

**South East London Area Prescribing Committee
Formulary recommendation**

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| Reference: | 107 |
| Intervention: | Tafluprost 15 micrograms/mL (SAFLUTAN[®] 15 micrograms/mL) preservative free eye drops and tafluprost 15 micrograms/mL + timolol 5 mg/mL (TAPTIQOM[®]) preservative free eye drops for the treatment of elevated intraocular pressure in adults with open angle glaucoma and ocular hypertension (Tafluprost is a prostaglandin analogue [PGA] which lowers the pressure in the eye) |
| Date of Decision: | July 2019 |
| Date of Issue: | August 2019 |
| Recommendation: | Amber 2 – initiation and first prescription supplied by the ophthalmology team |
| Further Information | <ul style="list-style-type: none"> • Tafluprost 15mcg per mL preservative free (PF) eye drops (Saflutan[®]) and the combination preparation of tafluprost 15 micrograms/mL with timolol 5 mg/mL (Taptiqom[®]) PF eye drops are accepted for use in South East London in line with (i) their licensed indications and (ii) their place in therapy in the local pathway. • The licensed indications for these PF preparations are: <ul style="list-style-type: none"> - Saflutan: Reduction of elevated intraocular pressure (IOP) in open angle glaucoma and ocular hypertension and in those who would benefit from PF eye drops. - Taptiqom: Reduction of IOP in adult patients with open angle glaucoma or ocular hypertension who are insufficiently responsive to topical monotherapy with beta-blockers or prostaglandin analogues (PGAs) and require a combination therapy, and who would benefit from PF eye drops. • Use of these PF preparations will be in line with the local pathway for managing Chronic Open Angle Glaucoma and Ocular Hypertension, which is being updated to reflect this formulary recommendation. Use is restricted as follows: <ul style="list-style-type: none"> (i) Preservative free preparations are reserved for patients with a true preservative allergy and/or who have evidence of epithelial toxicity and/or severe dry eyes. Note: This will be based on clinical opinion of the initiating specialist. (ii) Where a preservative free prostaglandin is clinically appropriate, the first line choice of PF PGA is latanoprost 50mcg/mL. Treatment with tafluprost 15 micrograms/mL PF eye drops (Saflutan[®]) may be considered at the same point in the pathway as bimatoprost 300 mcg/mL eye drops i.e. where there are adverse effects with PF latanoprost. (iii) Where a PF PGA and beta-blocker combination is clinically appropriate, the first line PF choice is latanoprost 50micrograms/mL with timolol 5mg/mL eye drops. Tafluprost 15 micrograms/mL with timolol 5 mg/mL (Taptiqom[®]) PF eye drops may be considered at the same point in the pathway as bimatoprost 300 mcg/mL with timolol 5mg/ml (Ganfort[®]) PF eye drops i.e. where there are adverse effects with the PF latanoprost with timolol preparation. (iv) Where both Ganfort[®] PF and Taptiqom[®] PF are suitable for the patient, the preparation with the lowest acquisition cost will be prescribed (refer to table appendix in the pathway). • The initial prescription and supply will come from the specialist team. Prescribing can then be continued in primary care by the GP. |
| Shared Care/ Transfer of care required: | N/A. Not considered necessary as other glaucoma treatments are already widely prescribed in primary care on the advice of a specialist. |
| Cost Impact for agreed patient group | <ul style="list-style-type: none"> • Tafluprost PF single agent product has a higher acquisition cost vs. latanoprost PF single agent product, and has a lower acquisition cost vs. the single agent bimatoprost PF product. • Using tafluprost product ahead of latanoprost product would equate to £4,530 |

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| Cost Impact for agreed patient group cont'd | <p>increased costs per 100,000 population per annum. This equates to £86,000 increased costs per annum across SE London.</p> <ul style="list-style-type: none"> Based on current prices, tafluprost PF is £1.55 cheaper per month than bimatoprost PF per patient per month, and Taptiqom is £3.44 cheaper per patient per month than Ganfort single dose units. Using tafluprost PF products ahead of bimatoprost PF products therefore would equate to £4,790 savings per 100,000 population per annum. This equates to £91,000 savings per annum across SE London. It is therefore likely that the addition of these preparations will be cost-neutral. |
| Usage Monitoring & Impact Assessment | <p>Acute Trusts:</p> <ul style="list-style-type: none"> Monitor use and submit usage data and audit reports against this recommendation and the pathway upon request to the APC. <p>CCGs:</p> <ul style="list-style-type: none"> Monitor EPACT 2 data. Exception reports from GPs if inappropriate prescribing requests are made to primary care. |
| Evidence reviewed | <p>References (from evidence evaluation)</p> <ol style="list-style-type: none"> Glaucoma. Clinical Knowledge Summaries. Available online at: https://cks.nice.org.uk/glaucoma (accessed 26/04/2019). Glaucoma: diagnosis and management. National Institute for Health and Care Excellence NG81. Available online at: https://www.nice.org.uk/guidance/ng81 accessed 26/04/2019). Saflutan. Summary of Product Characteristics. Available online at: https://www.medicines.org.uk/emc/product/5115/smpc (accessed 26/04/2019). Taptiqom. Summary of Product Characteristics. Available online at: https://www.medicines.org.uk/emc/product/6917 (accessed 26/04/2019). Uusitalo H, Pillunat L, Ropo A. Efficacy and safety of tafluprost 0.0015% versus latanoprost 0.005% eye drops in open-angle glaucoma and ocular hypertension: 24-month results of a randomized, double-masked phase III study. Acta Ophthalmol. 2010 88 p12-19. Uusitalo H, Chen E, Pfeiffer N et al. Switching from a preserved to a preservative-free prostaglandin preparation in topical glaucoma medication. Acta Ophthalmologica 2010 88 p329-336. Hommer A, Mohammed Ramez O, Burchert M et al. IOP-lowering efficacy and tolerability of preservative-free tafluprost 0.0015% among patients with ocular hypertension or glaucoma. Current Medical Research and Opinion 2010 8 p1805-1913. Hommer A, Kimmich F. Switching patients from preserved prostaglandin-analog monotherapy to preservative-free tafluprost. Clinical Ophthalmology 2011 5 p623-631. Esaki Y, Shimazaki A, Pellinen P. Ocular Tolerability of Preservative-Free Tafluprost and Latanoprost: in vitro and in vivo Comparative Study. Open Ophthalmol J. 2016; 10: 146–153. Pellinen P, Esaki Y, Shimazaki A. Ocular tolerability of preservative-free prostaglandin eye drops. Acta Ophthalmologica 2013 91:s252. doi: 10.1111/j.1755-3768.2013.S008.x Konstas A, Quaranta L, Katsanos A et al. Twenty-four hour efficacy with preservative free tafluprost compared with latanoprost in patients with primary open angle glaucoma or ocular hypertension. British Journal of Ophthalmology 2013 97 p1510-1515. Hollo G, Hommer A, Lopez A et al. Efficacy, safety and tolerability of preservative-free fixed combination of tafluprost 0.0015%/timolol 0.5% versus concomitant use of the ingredients. Journal of Ocular Pharmacology and Therapeutics 2014 30 (6) p468-475. SMC 581/09 - tafluprost 15 micrograms/ml preservative-free eye drops single dose container (Saflutan). Scottish Medicines Consortium November 2009. SMC 1085/15 - tafluprost 15micrograms/mL and timolol 5mg/mL preservative-free eye drops (Taptiqom®). Scottish Medicines Consortium August 2015. |

NOTES:

- Area Prescribing Committee recommendations and minutes are available publicly on the [APC website](#).
- This Area Prescribing Committee recommendation has been made on the cost effectiveness, patient outcome and safety data available at the time. The recommendation will be subject to review if new data becomes available, costs are higher than expected or new NICE guidelines or technology appraisals are issued.
- Not to be used for commercial or marketing purposes. Strictly for use within the NHS.**