

**South East London Integrated Medicines Optimisation Committee
Formulary recommendation**

Reference:	139
Intervention:	Nystatin oral suspension BP for the treatment and prevention of early voice prosthesis failure due to candida infections in adults (Nystatin is an antifungal)
Date of Decision:	September 2021
Date of Issue:	December 2022
Recommendation:	Amber 1 – initiation in primary care on the recommendation of a Speech and Language Therapist at Guy’s and St.Thomas’ NHS Foundation Trust (GSTfT) only
Further Information	<ul style="list-style-type: none"> • Nystatin oral suspension BP is accepted for use in South East London for the treatment and prevention of candida infections of the oral cavity and oesophagus, impacting on laryngectomy voice prosthesis lifespan. • Use is restricted in adults with a voice prostheses (VP) who have undergone a laryngectomy for surgical voice restoration. • For patients with early VP failure with visible candida deposits: <ul style="list-style-type: none"> - oral nystatin 1ml four times a day together with 1ml of nystatin used topically brushed through the VP once a day is recommended for 14 days. - 1mL of nystatin used topically brushed through the VP once a day should then be continued long term to prevent future infection. See GP information leaflet for more information. • Some patients may require repeat 14 day courses of oral nystatin four times daily if signs of infection appear. GPs will be informed by the GSTT Speech and Language Therapy team. • Nystatin treatment should be stopped if treatment is no longer required, or in the event of failure to increase prosthesis life time. The GSTT Speech and Language Therapy team will advise when treatment should be stopped. • Prior to the initiation of nystatin in primary care, training on the topical application of nystatin to the VP should be provided to patients by the GSTT Speech and Language Therapy team. • Patients must be counselled on the appropriate administration of nystatin as described in the GP information leaflet. • Patients usually require a VP replacement every 3 to 6 months; their VP topical technique should be regularly reviewed in clinic by the Speech and Language Therapy team. • It should be noted that nystatin is not licensed for use in this setting (off-label use). Informed consent should be gained from the patient before treatment is started.
Shared Care/ Transfer of care required:	N/A.
Cost Impact for agreed patient group	<ul style="list-style-type: none"> • There are currently 60 patients at GSTfT with a voice prosthesis and over 90% are SEL patients. • Each VP costs between £170 and £400 depending on the type. The cost of nystatin is £1.80 per 30ml (2 x required for initial treatment, then 1 per month for ongoing regimen) this equates to £25.20 per annum per patient. • Based on the current caseload, the estimated cost impact is ~£1,500 (<£100 per 100,000 population) per annum.
Usage Monitoring & Impact Assessment	Acute Trusts: Monitor and audit usage and outcomes from use of nystatin in this setting (against this recommendation) and report back to the Committee upon request of the Committee

	<p>SEL Borough Medicines Optimisation Teams: Monitor ePACT2 data and exception reports from GPs if inappropriate prescribing requests are made to primary care</p>
<p>Evidence reviewed</p>	<p>References (from evidence evaluation)</p> <ol style="list-style-type: none"> 1. Pentland D, Stevens S, Williams L et al. Precision antifungal treatment significantly extends voice prosthesis lifespan in patients following total laryngectomy. <i>Frontiers in Microbiology</i> 2020 11 975 2. Somogyi-Ganss, Chambers M, Lewin J et al. Biofilm on the tracheoesophageal voice prosthesis: considerations for oral decontamination. <i>Eur Arch Otorhinolaryngol.</i> 2017 274 (1) p405-413

NOTES:

- a) SEL IMOC recommendations and minutes are available publicly via the [website](#).
- b) This SEL IMOC 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.
- c) **Not to be used for commercial or marketing purposes. Strictly for use within the NHS.**