

# QIPP Detail Aid

Providing support for quality in prescribing

## EZETIMIBE

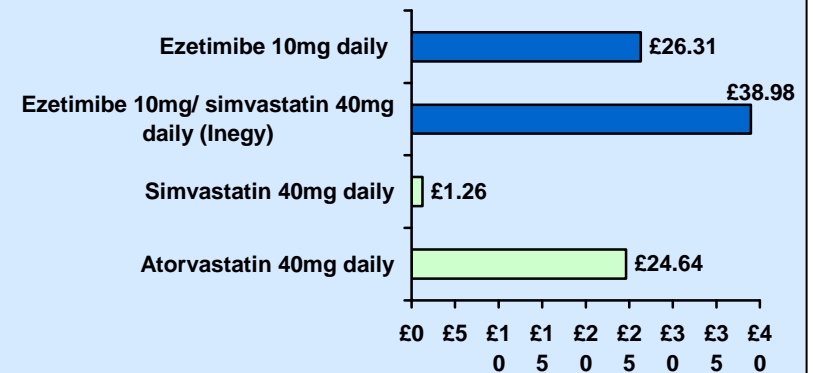
### WHAT IS THE PROBLEM?

- In 2010/11 the East Midlands spent nearly £6.5million on ezetimibe in primary care, of which £400,000 was on the combined product ezetimibe/ simvastatin. £100,000 could be saved immediately by prescribing ezetimibe and simvastatin separately rather than using the combination product. A further £780,000 could be saved if East Midlands prescribing was in line with NICE guidance, based on estimates from the NHS Information Centre.
- ADD LOCAL DATA HERE**

### WHAT IS THE EVIDENCE?

- Ezetimibe selectively inhibits transport of dietary cholesterol across the small intestine wall. It is licensed for primary hypercholesterolaemia. It is not licensed for the prevention of cardiovascular mortality and morbidity.
- NICE guidance recommends ezetimibe, coadministered with a statin, as an option in patients in whom total or LDL cholesterol concentration is not appropriately controlled either after dose titration of initial statin therapy or because dose titration is limited by intolerance. Monotherapy with ezetimibe is an option in patients who are intolerant of or have contra-indications to a statin.
- Most studies assessing efficacy of ezetimibe have used LDL-cholesterol as a surrogate measure of clinical outcomes; a few studies which have used clinical endpoints have shown mixed results. It is therefore not known whether the reduction in cholesterol translates into reduced cardiovascular morbidity or mortality.
- The NPC have highlighted whether there is any meaningful efficacy or safety advantage of ezetimibe plus a statin compared with using simvastatin alone.
- The Drug and Therapeutics Bulletin (DTB) have questioned whether adding ezetimibe to simvastatin is a cost-effective or outcome-based intervention and concluded that every effort should be made to reduce LDL-cholesterol with a statin alone rather than using ezetimibe.

### WHAT ARE THE COSTS?



Costs for 28 days supply. Taken from Drug Tariff August 2011  
Doses are a guide and do not imply therapeutic equivalence.

### KEY MESSAGES

- Ezetimibe has no proven beneficial effect on cardiovascular morbidity or mortality. It is not licensed for the primary or secondary prevention of cardiovascular events.**
- Every effort should be made to reduce LDL-cholesterol with a statin alone rather than using ezetimibe. The cost of atorvastatin is expected to fall in the next year when generics become available.**
- Do not use the combination product which is considerably more expensive than the individual drugs prescribed separately. If the patient pays a prescription charge, ensure they have a pre-payment certificate.**

### References:

- NICE technology appraisal guidance 132 Ezetimibe for the treatment of primary (heterozygous-familial and non-familial) hypercholesterolaemia November 2007
- Anon Ezetimibe - an update Drug Ther Bull 2009; 47:91-5

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