

# QIPP Detail Aid

Providing support for quality in prescribing

## LEVOCETIRIZINE – ANY BETTER THAN CETIRIZINE?

### WHAT IS THE PROBLEM?

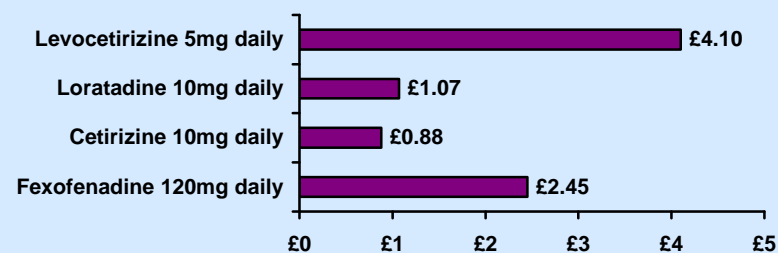
- In 2010 the East Midlands spent over £176k on levocetirizine.
- If this had been prescribed as cetirizine, over £139k would have been available to spend on other services.

- **ADD LOCAL DATA HERE**

### WHAT IS THE EVIDENCE?

- Levocetirizine was introduced in 2001 when the patent for cetirizine was about to expire.
- Levocetirizine is the biologically active enantiomer (isomer) of cetirizine. The other enantiomer is relatively inactive therapeutically.
- There are no published studies that have shown levocetirizine to be superior to cetirizine or loratadine in relieving allergy symptoms.
- Clinical knowledge summaries ([www.cks.nhs.uk](http://www.cks.nhs.uk)) recommend cetirizine loratadine or fexofenadine for treatment of allergic rhinitis (loratadine is preferable in pregnancy). Fexofenadine may be less sedating than other antihistamines and may be an alternative where an individual patient finds sedation with the other agents unacceptable. However cetirizine or loratadine are preferable on the grounds of cost.

### WHAT ARE THE COSTS?



Costs for 28 days supply, from Drug Tariff February 2011  
Doses based on manufacturers' recommendations for allergic rhinitis.

### KEY MESSAGES

- **Antihistamines are broadly comparable in effectiveness**
- **Levocetirizine is over four times more expensive than the parent drug**
- **There are no published trials to support a preference for levocetirizine over cetirizine or loratadine in allergic rhinitis or urticaria**
- **Cetirizine or loratadine are recommended first line agents for allergic rhinitis. Fexofenadine may occasionally be useful where sedation is a problem with the first line agents.**