



Position Statement:

Tapentadol MR is NOT recommended (RAG status 'Black') for use by the NHS in Lancashire in the following settings:

- 1. As a treatment option for intractable neuropathic pain in non-palliative care patients**
- 2. As a treatment for nonspecific pain**

There is insufficient evidence to consistently demonstrate improved efficacy in the above settings when compared to opioid drugs and there is a lack of significant evidence to demonstrate efficacy in patients inadequately controlled on opioid drugs.

Overview

Two evidence reviews have been completed that support the use of tapentadol MR in two specific patient populations. These populations are:

- Tapentadol as a treatment option for neuropathic pain in palliative care, and
- Tapentadol as a treatment option for intractable neuropathic pain in non-palliative care patients.

There is limited additional evidence that would support the use of tapentadol MR outside of these patient populations.

There is one meta-analysis, one randomised-controlled trial and one descriptive study in the literature that compare the use of tapentadol MR with tramadol. These studies compare efficacy of managing different pain types and different medication regimens. There is inconsistency in use of adjuvant analgesia (i.e. paracetamol use) and there is also limited consensus of study design, making useful comparison between the studies difficult.

As limited comparability between the studies endures, it is difficult to consider the data as coherent evidence in support of tapentadol MR use in preference to tramadol. Hence, because of the increased treatment costs over tramadol (see below) it is not viable to recommend tapentadol MR for more general use.

Comparative unit costs:

Drug	Example regimen	Pack cost	Cost per patient per course/ per year (ex VAT)
Tapentadol MR tablets	100 – 250mg TWICE daily	100mg x 56 = £49.82; 250mg x 56 £124.55	£647.66 – £1619.15
Tramadol MR tablets	100-200mg TWICE daily	100mg x 60= £6.94	£83.28- £170.28

		200mg x 60 = £14.19	
Costs based on BNF list prices 28/04/2016 [5] This table does not imply therapeutic equivalence of drugs or doses.			

RECOMMENDATION

The prescribing of Tapentadol MR for non-specific pain within the Lancashire health economy is not recommended. Where an opiate is required for the management of non-specific pain, prescribers should choose a more cost-effective opiate that has been approved for use in accordance with local arrangements.

References

- [1] Mercier et al, "A model-based meta-analysis to compare efficacy and tolerability of tramadol and tapentadol for the treatment of chronic non-malignant pain," *Pain Ther*, vol. 3, pp. 31 - 44, 2014.
- [2] Iyer et al, "Comparison of tapentadol with tramadol for analgesia after cardiac surgery," *Annals of Cardiac Anaesthesia*, vol. 18, no. 3, pp. 352 - 360, 2015.
- [3] Kress et al, "Direct conversion from tramadol to tapentadol prolonged release for moderate to severe, chronic malignant tumour-related pain," *European Journal of Pain*, vol. [Published ahead of print], April 2016.
- [4] Royal Pharmaceutical Society, British National Formulary, vol. 70, London: Pharmaceutical Press, 2016.