News

UK stocks up on antiviral drug to tackle flu outbreak

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The UK government is to build up a stockpile of millions of doses of an antiviral drug as its first line of defence against a likely influenza pandemic.

The order for 14.6 million courses of oseltamivir was announced this week along with a contingency plan to deal with an expected outbreak. In the United Kingdom about 50 000 people or more could be affected by the disease, said the health secretary, John Reid.

The World Health Organization is warning that a flu pandemic is likely to emerge from South East Asia, where a current outbreak of avian flu, known as H5N1 (a strain of influenza A virus), has spread at an unprecedented rate. It has so far affected nine countries and is proving difficult to eliminate.

To date, 55 people have been

infected with the same virus, of whom 42 have died. Symptoms have ranged from conjunctivitis to typical flu-like symptoms.

Although the virus is currently not able to pass easily from person to person, it could mutate with a human flu virus, producing a new virus capable of spreading easily and causing a pandemic.

Launching the UK Pandemic Contingency Plan, Mr Reid said it would be impossible for the United Kingdom to avoid a pandemic. "We have reason to expect that a flu pandemic will have an affect that will be four times higher than normal seasonal flu, but it could be higher."

Treating the most severe cases with oseltamivir would be the main weapon against disease until a vaccine is developed, a process that would take up to six

months from the beginning of the outbreak, he said.

Mr Reid said the order for oseltamivir was based on estimates that one in four of the UK population could be affected by the disease.

The Pandemic Contingency Plan is published at www.dh.gov.uk



Scientists from a joint WHO and Food and Agriculture Organization conference on avian flu tour a chicken farm in Vietnam

NICE proposes to withdraw Alzheimer's drugs from NHS

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The drugs donepezil, rivastigmine, galantamine, and memantine should no longer be prescribed on the NHS to treat Alzheimer's disease, says new draft guidance from the National Institute for Clinical Excellence (NICE).

NICE, the NHS prescribing watchdog for England and Wales, has retracted its previous guidance—issued in 2001 and which said that these drugs should be prescribed for Alzheimer's disease—after reviewing the latest evidence on efficacy and cost effectiveness. Patients currently receiving any of the drugs, however, can continue to do so. Memantine will be available only as part of a clinical trial with strict outcome criteria.

Comments on the proposals are being accepted until 21 March, and final guidance is expected to come into force in July this year.

The NICE assessment group says that, although donepezil, rivastigmine, and galantamine (collectively known as anti-cholinesterase inhibitors) have proved gains in cognitive and global scales compared with placebo in people with mild to moderate Alzheimer's disease, there is "limited and largely inconclusive" evidence on outcomes that are important to patients and carers, such as quality of life and time to admission to a nursing home.

NICE considered a range of published and unpublished

trials, as well as submissions from drug manufacturers and professional and support organisations, when developing its draft guidelines. However, it said that many of the randomised controlled trials it reviewed were of "mixed" quality. The group also suspected "selection bias, measurement bias and attrition bias in a number of the reviewed studies."

Its own cost effectiveness calculations put the group of drugs beyond the means of the NHS, it said. When it adjusted costs to take account of the benefits attributed to these drugs NICE estimated that donepezil, rivastigmine, and galantamine had a cost per quality adjusted life year gained of £48 000 (\$92 000; €70 000), £32 000, and £38 000 respectively; the corresponding cost for memantine was between £37 000 and £53 000.

The NHS will spend an

estimated £60m on anticholinesterase inhibitors this year and more than £70m in 2005-6, says NICE. If its proposed recommendations are adopted the NHS would make a saving of £15m in the first year, £45m in the second, and more than £60m in the third.

However, the proposals have been greeted with anger from professionals, patient groups, and drug manufacturers.

"Whilst these drugs do not provide a cure, or affect the underlying disease process, they can bring substantial benefit to many patients," said Professor Susan Benbow, of the Royal College of Psychiatrists. "On average, drugs for Alzheimer's disease delay the decline associated with the illness by six to nine months. This is a degree of benefit which... patients value."

The draft NICE guidance is at www.nice.org.uk