Recommendations for the Cost Effective Prescribing of Quetiapine

Quetiapine (including MR) Position Statement

- The standard release/Immediate Release (IR) tablets which are taken twice daily are the preferred option over the more expensive once daily Modified Release (MR) preparation.
- South West London Mental Health Trust does not have quetiapine MR on its formulary and does not initiate patients on this formulation of quetiapine.
- All consultants/specialists may not be aware of the local prescribing policy for quetiapine MR. If you receive a new request to prescribe quetiapine MR please contact the consultant/specialist to discuss the local prescribing position.
- Switching from quetiapine MR preparations to quetiapine standard release tablets is currently not recommended without specialist mental health input.
- Wandsworth CCG (WCCG) supports generic prescribing however in this area the Sondate® XL brand for quetiapine MR offers significant savings.
- Sondate®XL is 60% more cost effective than generic quetiapine MR or Seroquel® XL and is a simple change between bioequivalent medicines.
- In patient’s established on modified release quetiapine/Seroquel®/or any brand other than Sondate® XL should be considered for a change to Sondate® XL brand.

Recommendation

Wandsworth CCG recommends practice’s to switch selected patients from generically prescribed Quetiapine modified-release (MR) tablets and branded Seroquel® XL or any brand other than Sondate® XL tablets to the equivalent strength and dose of Sondate® XL tablets.
Background.

Switching from quetiapine XL (including Seroquel® XL) to a branded generic modified release preparation could save Wandsworth CCG approximately £70,000 over 12 months (based on the latest 12 months Epact data). Branded generic quetiapine MR products are less costly than generic products. The British National Formulary does recommend that modified release preparations should be prescribed by brand.

The licensed indication for quetiapine MR is as follows:

- Quetiapine XL - Once daily
  - Treatment of schizophrenia, including prevention of relapse
  - Treatment of mania or depression in bipolar disorder
  - Prevention of relapse in bipolar disorder
  - Add on treatment (to an antidepressant) in major depressive disorder who have had suboptimal response to antidepressant therapy

There are currently seven different brands of quetiapine XL available: Biquelle® XL, Ebescue® XL, Zaluron® XL, Sondate® XL, Tenprolide® XL, Atrolax® XL and Mintreleq® XL.

The pharmacokinetic properties of these preparations are the same as that of the original brand Seroquel. They are also available in all 5 strengths except for Ebescue® XL and Atrolax® XL which are not available as 150mg XL.

Sondate® XL has the lowest cost. The cost of this product is listed in appendix 3 - table 1. Therefore the brand that currently offers good value is Sondate® XL and this is licensed for the same indication as Seroquel XL.
Quetiapine Immediate Release (IR) vs Quetiapine Modified Release (MR)

Since the patent for Seroquel expired in 2012, generic quetiapine has been available in two dosage forms: quetiapine immediate release (IR) and quetiapine modified release (XL). There is a significant price difference between the two formulations and there is scope to achieve substantial cost savings by ensuring that patients initiated on generic quetiapine are prescribed the immediate release (IR) tablets and not quetiapine modified release (MR). Quetiapine IR tablets given twice daily and are approximately 95% cheaper than prescribing quetiapine XL in the same daily dose, once daily.

The pharmacokinetics of the two formulations is similar: although the (IR) and (XL) reach the same peak plasma concentration (Cmax), the time taken to reach Cmax is 1.5 hours for IR and 6 hours for XL. Hence why the XL formulation is taken once daily as opposed to the IR tablet which is taken twice daily. Apart from for use in depression in bipolar disorder when the IR tablets are recommended to be taken once daily.

There is very little difference in terms of side effects between quetiapine XL and quetiapine IR.

The use of quetiapine IR is supported by St. George’s Mental Health Trust. They do not have quetiapine MR tablets on formulary and therefore do not initiate patients on this formulation or request prescribers in primary care to do so. Given that we have a significant amount of quetiapine XL being prescribed it is important to ensure that any requests for continuation of the XL formulation following initiation by a mental health specialist follow local NHS guidelines.

If a patient has been seen by a private mental health specialist/consultant and prescriptions are being requested on the NHS for quetiapine XL, GPs are advised to ensure that prescribing recommendations are in line with this position statement e.g. quetiapine IR tablets are issued unless there are exceptional circumstances. This is to ensure equity for all patients. Please note there is no obligation for the GP to prescribe the recommended treatment from the private specialists if it is contrary to these guidelines and policy. The choices recommended by a private healthcare professional may be less clinically or cost-effective than the NHS local recommended option. In these circumstances the product prescribed on the NHS should be as recommended in these guidelines e.g. quetiapine IR tablets. Where there is a clinical, legal or cost-effectiveness reason not to accept prescribing of the requested product, a discussion with the patient and private healthcare professional should be initiated. Where appropriate, the patient should be reminded that they reserve the right to obtain their particular brand of product using a private prescription from the private specialist who originally recommended the treatment.

Many other CCGs have recommended changing patients from quetiapine XL to quetiapine IR. Due to the nature of this medication and without local specialist mental health input into this process this switch is currently not recommended by Wandsworth CCG.
Proposed action

Objectives
To support the practice to switch selected patients from generically prescribed Quetiapine modified-release (MR) tablets and branded Seroquel XL or any brand other than Sondate® XL tablets to the equivalent strength and dose of Sondate® XL tablets.

Scope
All patients prescribed generic Quetiapine (MR) tablets/branded Seroquel® XL tablets/any brand other than Sondate® XL tablets in the last 6 months.

<table>
<thead>
<tr>
<th>Current Prescription switch</th>
<th>Recommended</th>
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<tbody>
<tr>
<td>Quetiapine 50mg modified release tablets (or expensive brand)</td>
<td>Sondate® XL 50mg modified release tablets</td>
</tr>
<tr>
<td>Quetiapine 150mg modified release tablets (or expensive brand)</td>
<td>Sondate® XL 150mg modified release tablets</td>
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<td>Quetiapine 200mg modified release tablets (or expensive brand)</td>
<td>Sondate® XL 200mg modified release tablets</td>
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<tr>
<td>Quetiapine 300mg modified release tablets (or expensive brand)</td>
<td>Sondate® XL 300mg modified release tablets</td>
</tr>
<tr>
<td>Quetiapine 400mg modified release tablets (or expensive brand)</td>
<td>Sondate® XL 400mg modified release tablets</td>
</tr>
</tbody>
</table>

Process
Conduct a search of the EMIS system to identify patients who are currently registered and have received a prescription for generic quetiapine modified-release (MR) tablets/Seroquel® XL tablets/or any brand other than Sondate® XL tablets.

Details of the patients identified for the potential change should be summarised on a data collection form for the lead GP (or designated GP) to authorise the suggested changes.

Please ensure the old medication is removed from the patient medication list and add the new brand name of tablets –Sondate® XL tablets.

If the previous preparation was ‘linked’ to a problem e.g. schizophrenia, then Sondate® XL tablets should be linked accordingly.

The quantity and dose should remain the same as the previous Quetiapine MR preparation.

The reason for the change of quetiapine preparation should be documented in the patient’s computer records for audit purposes e.g. The READ code 8Blr ‘drug changed to cost effective alternative’ could be used.

Due to the nature of the condition being treated it is important as a practice to decide the best way to inform the individual patient. For those where a letter is suitable – please find a template letter (see appendix 1).
Exclusions

1. History of intolerance to Sondate® XL brand or any other excipients of either brand. Both Sondate® XL contain lactose; therefore exclude patients with rare hereditary problems of galactose intolerance, the lapp lactase deficiency, or glucose-galactose malabsorption.

2. Children and adolescents below the age of 18 years.

3. Concomitant administration of cytochrome P450 3a4 inhibitors, such as HIV-protease inhibitors, azole-antifungal agents, erythromycin, clarithromycin and nefazodone are contraindicated.

4. Patients receiving quetiapine XL in a monitored dose system-stability data for Sondate® XL is not available out of their blister packs.
Appendix 1

Dear

Quetiapine MR tablets

The practice has been reviewing its prescribing of quetiapine (or brand name) MR tablets. This is to ensure that patients continue to receive high quality and effective treatment whilst ensuring that the NHS gets better value for money.

Quetiapine MR is available as different brands and a brand that offers good value for money is called Sondate® XL.

We are writing to you today to let you know of a change in the name of the medication on your prescription. The full details of the changes are shown below and this new brand name for your medication will be given to you when you collect your next repeat prescription. The strength and the dose of your tablets will be the same and you should not notice any difference in effect.

<table>
<thead>
<tr>
<th>What you take now</th>
<th>What it will change to</th>
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<tbody>
<tr>
<td>Quetiapine MR/Seroquel® XL xxx mg tablets</td>
<td>Sondate® XL xxx mg tablets – Take xxxx tablets xxxx a day</td>
</tr>
<tr>
<td>Take xxxx tablet xxxx a day</td>
<td></td>
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</tbody>
</table>

The name of your medication will be changed automatically so please order your next prescription in the usual way. This new name of your medication contains the same active ingredient as your old medication so please continue to take the same dose and take it in the same way as before.

To help prevent waste, please use up any quetiapine MR tablets you may have left before starting to take your new Sondate XL.

If you have any concerns regarding this letter or wish to discuss the matter further please do not hesitate in contacting contact the surgery or your local community pharmacist.

Yours sincerely,
# Appendix 2

## Data Collection Form

<table>
<thead>
<tr>
<th>Patient ID</th>
<th>Allergies</th>
<th>Name and strength of Quetiapine XL currently prescribed</th>
<th>Current dose</th>
<th>Indication</th>
<th>Any previous brand(s) prescribed</th>
<th>Any reason for NOT switching</th>
<th>Recommendations (i.e. switch to Sondate® XL)</th>
<th>GP - Please indicate if switch is okay</th>
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Please sign below if you are happy for the above patients to be switched to the equivalent strength & dose of Sondate XL/ Zaluron XL tablets.

Name: __________________________________________________________

Rajiv Dhir, Senior Prescribing Advisor
Produced: September 2016
Review: September 2018
Appendix 3

Table 1: Comparison of Quetiapine XL Generic/ Cost-Effective Brand-Sondate® XL (28 days cost)

<table>
<thead>
<tr>
<th>Product</th>
<th>Generic Price Paid (NHSBSA ePACT July 16)</th>
<th>Sondate® XL (NHSBSA ePACT July 16)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quetiapine 50mg XL daily (28 Days)</td>
<td>£29.31</td>
<td>£10.91</td>
</tr>
<tr>
<td>Quetiapine 150mg XL daily (28 Days)</td>
<td>£48.91</td>
<td>£20.56</td>
</tr>
<tr>
<td>Quetiapine 200mg XL daily (28 Days)</td>
<td>£49.05</td>
<td>£18.31</td>
</tr>
<tr>
<td>Quetiapine 300mg XL daily (28 Days)</td>
<td>£73.59</td>
<td>£27.60</td>
</tr>
<tr>
<td>Quetiapine 400mg XL daily (28 Days)</td>
<td>£97.89</td>
<td>£36.64</td>
</tr>
</tbody>
</table>

(Generic/ Brand Prices – ePACT July 2016)

References
PrescQIPP, Bulletin 135, August 2016. 2.0