Policy Statement 83: Inosine Pranobex for Chronic Fatigue Syndrome/Chronic Epstein Barr Virus Infection

Date of Issue: February 2005

The Thames Valley Priorities Committees recommend that Inosine Pranobex for Chronic Fatigue Syndrome/Chronic Epstein Barr Virus Infection be considered a LOW PRIORITY and not normally funded.

Inosine Pranobex (Immonovir – Registered name with Newport Pharmaceuticals Ltd) is used for mucocutaneous herpes simplex, the adjunctive treatment of genital warts, and for sub-acute sclerosing pan-encephalitis, but is not the drug of first choice. There are several brand names. It has been found to be active in laboratory trials for enhancing the body’s immune system, which may be of benefit to patients with chronic fatigue syndrome and chronic Epstein-Barr virus infection. There is only one clinical trial suggesting some benefit in patients with severe chronic fatigue syndrome. The major side effect is raised serum and urinary urates.

Effectiveness

Clinical studies

There is only one single blind randomised clinical trial.\(^1\) There were 10 patients in the intervention arm and six in the placebo one. The average decrease in the symptom severity scores was the same in the intervention and placebo groups. In this study the numbers are small and the design has been confusingly implemented. There is also an open audit of 200 cases presented as a poster at a London Conference.\(^2\) 30% had definite improvement but 41% had an increase in symptoms. This was not a controlled comparative clinical trial and the outcome results are not impressive. Neither study provides good evidence for the clinical effectiveness of Inosine Pranobex in CFS/CEBV.

Cost-effectiveness

No information concerning the cost-effectiveness of using of Inosine Pranobex for CFS/CEBV has been identified.

This statement will be reviewed in light of new evidence or further guidance from NICE.

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5. GMC e-Formulary at http://www.doctors.net.uk/home.cfm.