Thames Valley Priorities Committees
(Berkshire PCTs)

Policy Statement 112: Sodium oxybate for cataplexy and excessive daytime sleepiness in narcolepsy

Ref TV90

Date of Issue: **June 2007**

The Thames Valley Priorities Committees have reviewed the evidence for Sodium Oxybate for the treatment of cataplexy in adult patients with narcolepsy and considered its use to be a LOW PRIORITY due to limited evidence of clinical and cost effectiveness when compared to existing treatments available.

Summary

Sodium oxybate is the sodium salt of gamma hydroxybutyrate (GHB). It is licensed as a liquid for oral administration in the treatment of cataplexy in adult patients with narcolepsy.

In two short term (4 to 8 weeks) randomised placebo controlled studies, sodium oxybate, at the licensed dose range, produced a median percent reduction in weekly cataplexy attacks ranging from 49% to 85%, compared with only 14% to 22% in the placebo groups. Long term open follow up studies (up to 12 months), showed that its effects are sustained, and sudden withdrawal does not produce an acute increase in the frequency of cataplexy attacks. There are however, no clinical studies directly comparing sodium oxybate with the other treatment options (for example, tricyclic antidepressants and selective serotonin reuptake inhibitors, SSRI) commonly used in cataplexy.

NOTES:

1. *Exceptional circumstances may be considered where there is evidence of significant health impairment and there is also evidence of the intervention improving health status.*
2. *This policy will be reviewed in the light of new evidence or guidance from NICE.*
3. *Berkshire Priorities Committee policy statements and minutes can be viewed at www.berkshire.nhs.uk/priorities*