

**Response by The British Thoracic Society
to Appraisal Consultation Document: Oseltamavir, amantadine and zanamivir for the
prophylaxis of influenza (including a review of existing guidance no.67)**

- (i) *Do you consider that all the relevant evidence has been taken into account?*

The summary covers the available trial data. The consultation document does not appear to have taken into account the submissions by both the HPA and the BTS regarding out of season outbreaks of influenza in closed communities and we would urge the Committee to carefully reconsider these comments.

The clinical trials on the efficacy of neuraminidase inhibitors were conducted in years of low influenza activity when compared to the activity seen during the majority of the 20th Century. If influenza activity returns to more “normal” levels the cost benefit ratio of the drugs may alter substantially.

- (ii) *Do you consider that the summaries of clinical and cost effectiveness are reasonable interpretations of the evidence and that preliminary views on the resource impact and implications for the NHS are appropriate?*

The current definition of at risk groups for influenza is broad and encompasses a spectrum of susceptibility from healthy individuals over the age of 65 to individuals with major immunosuppression (for example individuals undergoing chemotherapy treatment, bone marrow transplantation or with advanced HIV infection). The clinical trials on the efficacy of Amantadine, oseltamivir and zanamivir were principally conducted on healthy individuals or those with “more usual” at risk factors for influenza, and the guidance is sound in these settings. There is however little information on the use of these drugs for influenza prophylaxis in very high risk individuals and while research is urgently needed in this area some dispensation should be considered that would allow the use of neuraminidase inhibitors in such very high risk individuals. The cost of neuraminidase inhibitor prophylaxis is minor in this setting particularly when compared to the cost of antibiotics and anti-fungal agents used for example in bone marrow transplant or chemotherapy recipients with fevers.

- (iii) *Do you consider that the provisional recommendations for the Appraisal Committee are sound and constitute a suitable basis for the preparation of guidance for the NHS?*

As noted above the committees recommendation for the use of neuraminidase inhibitors are sound for the majority of clinical circumstances but do not cover out of season outbreaks in closed communities, nor the issues relating to influenza in individuals with major immunosuppression.

- (iv) *Are there any equality related issues that may need special consideration?*

The definition of an influenza outbreak differs between in England and Wales which may result in regional differences in the use of oseltamivir, and zanamivir for the prophylaxis of influenza.