

Costing statement: naltrexone for the management of opioid dependence

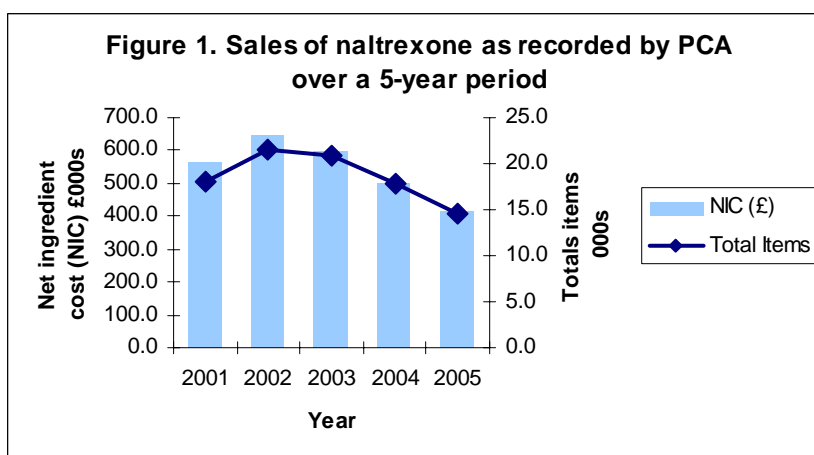
Guidance recommendation

The guidance on naltrexone for the management of opioid dependence (NICE technology appraisal guidance 115) is unlikely to result in a significant change in resource use in the NHS.

Naltrexone is recommended as a treatment option in detoxified formerly opioid-dependent people who are highly motivated to remain in an abstinence programme.

Patient numbers affected

Naltrexone is not widely used in the NHS. It is estimated that between 1500 and 2000 people are prescribed naltrexone¹, and a small proportion of this group will be receiving the drug for alcoholism and mental disorders rather than opioid dependence. Analysis of the Prescription Cost Analysis² (PCA) system suggests that use of naltrexone is decreasing (see figure 1).



¹ Assessment report section 8, based on current cost, estimated average dose and dose duration.

² The PCA data are based on a full analysis of all prescriptions dispensed in the community, that is, by community pharmacists and appliance contractors, dispensing doctors and prescriptions submitted by prescribing doctors for items personally administered in England. The data do not cover drugs dispensed in hospitals, including mental health trusts, or private hospitals.

Resource impact

The summary of product characteristics recommends that treatment is for an initial period of 3 months, although extended treatment may be necessary because time to recovery from opioid dependence is variable. The daily cost of naltrexone treatment is £1.51 per person ('British national formulary' edition 52). Assuming that patients receive treatment for 3 months, the drug cost per person is about £130; if treatment continues for 12 months the cost increases to around £510.

Table 1 investigates the effect of increased prescribing of naltrexone following implementation of the guidance. For the purpose of this statement it is assumed that currently 1500 people in England receive naltrexone for opioid dependence. Potential changes in prescribing are based on this estimate, and assume that individuals will receive the drug for 12 months. In reality it is likely that a significant number of individuals would receive treatment for less than 12 months, reducing the costs estimated below.

Table 1. National costs of naltrexone following implementation of the guidance

% Increase in people receiving naltrexone	Increase in number of people receiving naltrexone	Annual cost of drug treatment, per person (£)	Estimated increase in prescribing costs (£000s)
5	75	510	38
10	150	510	77
15	225	510	115

As shown in table 1 it is likely that the overall budget impact of this guidance will be minimal to local healthcare communities and the NHS nationally.