

Commissioning Policy

Treatment (brand name, manufacturer if applicable)	Antifungal Therapies (Various)
For the treatment of	<p>Serious systemic fungal infection</p> <p>See also Y & H Specialist commissioning group policy for the use of antifungals for the treatment of Chronic pulmonary aspergillosis in patients who meet the criteria for the nationally designated and commissioned service.</p>
Background	<p>The following antifungal therapies are all excluded from PbR tariff:</p> <ul style="list-style-type: none"> • Amphotericin liposomal (Abelcet® - Cephalon, AmBiSome® - Gilead) • Anidulafungin (Ecalta® - Pfizer) • Caspofungin (Cancidas® - MSD) • Micafungin (Mycamine® - Astellas) (SCG not commission for aspergillosis) • Posaconazole (Noxafil® - Schering-Plough) (SCG not commission for aspergillosis) • Voriconazole (Vfend® - Pfizer)
Commissioning position	<p>The following indicates what NHS Calderdale CCG will and will not fund in relation to antifungal use in serious systemic infections:</p> <p>NHS Calderdale CCG will routinely fund the following treatment for the specified indications:</p> <ul style="list-style-type: none"> • Amphotericin liposomal, anidulafungin and caspofungin are routinely funded for the treatment of serious systemic fungal infection only on the advice of a consultant microbiologist, and should only be used in preference to I.V fluconazole / flucytosine/ itraconazole in those who are intolerant or resistant to fluconazole / flucytosine / itraconazole. • Voriconazole is routinely funded (second line) only for the treatment of chronic pulmonary aspergillosis (see Specialist Commissioning Group commissioning policy). • Posaconazole is routinely funded only in patients who are intolerant or resistant to oral fluconazole or itraconazole, for the prophylaxis of invasive fungal infections in patients undergoing bone marrow transplantation. <p>NHS Calderdale CCG will NOT routinely fund the following treatment for the specified indications:</p> <ul style="list-style-type: none"> • Posaconazole is not routinely funded for the treatment of serious systemic fungal infection. • Micafungin are not routinely funded for any indication.
Effective from	October 2012
Summary of evidence/rationale	Cost effective use of resources. Reserving more expensive treatments for second / third line use where there is resistance to conventional antifungals or where conventional antifungals are not tolerated.
Date	October 2012
Policy to be reviewed by	October 2014
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