

## Enc 3 Appx 3

### Clinical Expert Summary Levodopa-carbidopa intestinal gel (Duodopa<sup>®</sup>) 20 mg/ml levodopa and 5 mg/ml carbidopa monohydrate

Levodopa-carbidopa intestinal gel (Duodopa<sup>®</sup>) for the treatment of advanced levodopa-responsive Parkinson's disease with severe motor fluctuations and hyper-/dyskinesia when available combinations of Parkinson medicinal products have not given satisfactory results

#### 1. Existing guidelines

There are no specific guidelines in Wales. Clinical experts were aware of the NICE guideline which states that Duodopa<sup>®</sup> is not a cost effective use of NHS resources in advanced Parkinson's disease.

#### 2. Disease prevalence/incidence

An expert highlighted that within their area, Duodopa<sup>®</sup> is only considered in exceptional circumstances when all other treatment options have been explored. Another expert confirmed only a small number of people would be eligible to receive Duodopa<sup>®</sup> in their catchment area, amounting to a maximum of 5–10 people. The expert has had four patients on Duodopa<sup>®</sup> and has advised on a further two. In one patient it had been an extraordinary success but in others less so. Another clinician (catchment area 250,000) has 4–6 patients currently on Duodopa<sup>®</sup> and estimated that about 15 patients would be suitable for Duodopa<sup>®</sup> every year in Wales. One clinician, treating young-onset Parkinson's disease (< 60 years), stated that they have had no need to use Duodopa<sup>®</sup> thus far.

#### 3. Current treatment options

For the treatment of advanced Parkinson's disease treatments principally include apomorphine injections and neurosurgery in the form of deep brain stimulation (DBS), dependent on clinical circumstances. Another expert commented that DBS may be under used in Wales and earlier referral should be considered.

#### 4. Unmet needs

One expert highlighted that Duodopa<sup>®</sup> may be suitable for a very small number of people and that the unmet need is difficult to assess. One expert felt that there is a need for an All Wales policy for the use of Duodopa<sup>®</sup>. It was felt that many local clinicians managing complex /advanced PD patients in Wales are not confident enough to consider this therapy due to lack of experience/knowledge and/or lack of facilities available locally. Another clinician stated that Duodopa<sup>®</sup> should form part of a wider complex therapy delivery service for all patients with movement disorders, rather than considering each disorder in isolation, especially with the potential for other novel therapies. It was highlighted that current use of Duodopa<sup>®</sup> requires an IPFR request.

#### 5. Knowledge of product in given indication

An expert highlighted their experience of managing 7 patients with Duodopa<sup>®</sup> over the last 10 years.

It was stated that Duodopa<sup>®</sup> would be used for complex Parkinson's patients when all other treatment options have been considered. The following clinical circumstances for treatment were highlighted:

- Patients with advanced disease whose symptoms are no longer managed on optimised medical therapy and who may not be candidates for DBS
- Patients where DBS would not be clinically appropriate and who are having difficulty with apomorphine, or difficulties with therapy administered via a needle

- Those with significant periods of off state during waking hours in spite of best oral medical therapy
- Patients who have mild cognitive impairment and not suitable for assessment for DBS
- Patients who have a competent and proactive carer
- Patients who have significant problems with absorption of oral drugs and dose failures shown by PKG.

It was also noted Duodopa<sup>®</sup> treatment can be difficult; in particular there are tube-related issues. Many areas in Wales may not have routine ready access to gastroenterology services.

It should be noted that one expert involved in compiling this response declared a personal non-specific interest in relation to levodopa-carbidopa intestinal gel for the indication under consideration.