

Botulinum toxin type A for blepharospasm – New studies published since the current SEC PRC₁ policy recommendation was issued.

Recommendation

The EKPG have agreed the new policy document and the PRGC recommendation to continue funding botulinum toxin for blepharospasm.

**Kent and Medway Policy Recommendation and Guidance Committee
Policy Recommendation**

Policy:	PR 2014-02: Botulinum toxin type A for blepharospasm
Issue date:	March 2014
Review date:	N/A – Static recommendation¹
<p>Recommendation: The Kent and Medway Policy Recommendation and Guidance Committee (PRGC) has considered up to date information on national and local policy and evidence of clinical effectiveness. Taking these into account, the PRGC recommends that:</p> <p style="text-align: center;">Botulinum toxin type A² is funded within the local NHS for the treatment of blepharospasm</p>	

¹This recommendation has been placed on a static list. It will only be updated if new evidence becomes available that is likely to have a material effect on the current recommendation.

²Botulinum toxin is listed as a High Cost Drug Exclusion (Payment by Results Exclusion).

Supporting documents

Health Care Intervention Appraisal and Guidance (HCiAG) team (2014) Botulinum toxin type A for blepharospasm – New studies published since the current SEC PRC¹ policy recommendation was issued. Briefing note.

South East Coast Health Policy Support Unit (2010). Botulinum toxin for blepharospasm. Final Report.

¹ SEC = South East Coast. PRC = Policy Recommendation Committee; forerunner of the Kent and Medway PRGC

Key findings and rationale

What is blepharospasm?

Blepharospasm is a focal dystonia characterised by chronic intermittent or persistent involuntary eyelid closure due to spasmodic contractions of eye muscles. Most cases are idiopathic and blepharospasm is generally a life-long disorder. Its severity can range from repeated frequent blinking to persistent forceful closure of the eyelids with functional blindness. Botulinum toxin type A (BTX-A) has been the treatment of choice for blepharospasm since the early 1990s.

What is botulinum toxin?

Botulinum toxin is a powerful neurotoxic agent synthesised by the anaerobic bacterium *Clostridium botulinum*. Different strains of *C. botulinum* produce seven immunologically distinct forms of botulinum neurotoxin, labelled BTX-A to BTX-G. When injected into the muscle, botulinum neurotoxin inhibits the release of acetylcholine at the neuromuscular junction causing relaxation of the affected skeletal muscle.

A number of BTX-A preparations have marketing authorisation in the UK, but only Botox[®], Dysport[®] and Xeomin[®] are licensed for the treatment of blepharospasm. All are administered by intramuscular injection. Botulinum toxin units are different depending on the medicinal products and doses are not interchangeable from one product to another.

What local guidance is available?

SEC PRC² Policy Recommendation 2010-05, recommends funding of botulinum toxin within the local NHS for the treatment of blepharospasm.

Does botulinum toxin work for the treatment of blepharospasm?

A Cochrane review (2005) concluded that although there was no high quality, randomised, controlled efficacy data to support the use of botulinum toxin for blepharospasm, results from other studies suggest that it is highly effective and safe for treating this condition. More recent, RCT, evidence supports the effectiveness of BTX-A for the treatment of blepharospasm.

What is the cost impact to CCGs of implementing this policy?

Implementation of this policy recommendation would be cost neutral for all Kent and Medway CCGs, since all Kent and Medway CCGs already fund the use of botulinum toxin for blepharospasm.

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