

**General policy**

**06/10**

<b>Treatment (brand name, manufacturer)</b>	<b>Delta-9-tetrahydrocannabinol and cannabidiol oromucosal spray</b> (Sativex®, Bayer plc)
<b>For the treatment of</b>	<b>Symptoms associated with multiple sclerosis, including spasticity and pain</b>
<b>Commissioning position</b>	Sativex is not routinely funded for patients with multiple sclerosis. The medicine should not be withdrawn from patients already established on treatment but other treatment options should be considered at routine review.
<b>Effective from</b>	<b>26 March 2010</b>
<b>Summary of evidence</b>	Following appraisal of the available evidence and anticipated costs, the Yorkshire and the Humber Expert Panel for disease modifying therapies in multiple sclerosis recommend that Sativex should not be routinely funded. The Panel advised that, on the available evidence, Sativex lacked compelling evidence of benefit for the target population and was unlikely to be cost-effective. NICE CG 186 Multiple sclerosis: management of multiple sclerosis in primary and secondary care ( June 2015) stated do not offer Sativex to treat spasticity as it is not a cost effective treatment.
<b>Date</b>	May 2017
<b>Policy to be reviewed by</b>	May 2019
	Karen Billany, Head of Acute Care, NHS Hull CCG <a href="mailto:karen.billany@nhs.net">karen.billany@nhs.net</a>