

## Prescribing Tip For Information

### Update on the prescribing on Febuxostat

Febuxostat (Adenuric) is licensed for the treatment of hyperuricaemia in people with gout.

In July 2019 it was advised that patients with **pre-existing major cardiovascular disease avoid febuxostat unless no other therapy options were appropriate**. This followed a review of the findings from a phase 4 clinical trial (the CARES study<sup>1</sup>) in which patients with gout and a history of major cardiovascular disease showed a higher risk for cardiovascular related death and for all-cause mortality if given febuxostat rather than those given allopurinol.

A further study (FAST study) which looked at the cardiovascular safety of febuxostat has now concluded. The FAST study found that febuxostat is non-inferior to allopurinol therapy with respect to the primary cardiovascular endpoint (composite of hospitalisation for non-fatal myocardial infarction or biomarker-positive acute coronary syndrome; non-fatal stroke; cardiovascular death) and, unlike the CARES study results, that long-term use was not associated with an increased risk of death or cardiovascular death compared to allopurinol

Following a review of the FAST study findings and advice from the Commission on Human Medicines (CHM) the product information for febuxostat has been updated. The warnings around cardiovascular disorders have been retained but treatment of patients with pre-existing major cardiovascular diseases should be exercised cautiously.

**Caution is required if prescribing febuxostat in patients with pre-existing major cardiovascular disease (heart failure, myocardial infarction, unstable angina or stroke), particularly, in those with evidence of high urate crystal and tophi burden or those initiating urate-lowering therapy.**

#### Advice for health care professionals

- Gout has been associated with an increased risk of cardiovascular disease and mortality. Gout flares may occur during initiation of urate-lowering treatment due to changing serum uric acid levels resulting in mobilisation of urate from tissue deposits.
- In patients with pre-existing major cardiovascular diseases febuxostat therapy should be used cautiously, particularly in those with evidence of high urate crystal and tophi burden or those initiating urate-lowering therapy.
- Following initiation of febuxostat, prescribers should titrate the febuxostat dose to minimise gout flares and inflammation
- Note the clinical guidelines for gout ([NICE guideline 219 - Gout : diagnosis and management](#)) recommend that allopurinol should be offered as first-line treatment for people with gout who have major cardiovascular disease.
- NICE visual aids on the [Long-term management of gout with urate-lowering therapy](#) and [Management of gout](#) are available.
- Report suspected adverse drug reactions associated with febuxostat to the yellow card scheme.

To contact the Medicines Optimisation Team please phone 01772 214302

If you have any suggestions for future topics to cover in our prescribing tips please contact [Nicola.schaffel@nhs.net](mailto:Nicola.schaffel@nhs.net)

All content accurate and correct on the date of issue of this tip.