

SOLRIAMFETOL tablets (Sunosi® ▼) for treating excessive daytime sleepiness caused by narcolepsy

The Pan Mersey Area Prescribing Committee recommends the prescribing of solriamfetol tablets (Sunosi® ▼), by specialists only, for treating excessive daytime sleepiness caused by narcolepsy in accordance with NICE TA758.

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[NICE technology appraisal \(TA\) 758](#)^[1] recommends solriamfetol as an option for treating excessive daytime sleepiness in adults with narcolepsy with or without cataplexy only if:

- > modafinil and either dexamfetamine or methylphenidate have not worked well enough or are not suitable.^[1]

Solriamfetol should only be initiated by a Consultant Sleep Physician. Prescribing and monitoring should be retained by the specialist team.

Within Aintree University Hospital Sleep Service, solriamfetol will be prescribed in line with the Narcolepsy Pathway.

The [Aintree University Hospital Sleep Service Pathway for Narcolepsy](#)^[2] recommends modafinil as first line treatment. If this ineffective, methylphenidate or dexamfetamine are recommended as second line treatments. Solriamfetol is recommended as a third line treatment if only if modafinil and either dexamfetamine or methylphenidate have not worked well enough or are not suitable.

NICE does not expect this guidance to have a significant impact on resources; that is, the resource impact will be less than £5 million per year in England (or approximately £9,000 per 100,000 population). This is because solriamfetol is a further treatment option and the overall cost of treatment will be similar to current treatment options.

References

1. National Institute for Health and Care Excellence. Technology Appraisal 758: [Solriamfetol for treating excessive daytime sleepiness caused by narcolepsy](#), 05 January 2022. Accessed 07 January 2022.
2. Pan Mersey Area Prescribing Committee. University Hospital Aintree Sleep Service Pathway: [NARCOLEPSY, University Hospital Aintree Sleep Service Pathway](#), 27 March 2019. Accessed 29 November 2021.

Note: Patients who are not eligible for treatment under this statement may be considered on an individual basis where their GP or consultant believes exceptional circumstances exist that warrant deviation from the rule of this policy. In this situation, follow locally defined processes.