

Dapoxetine for Premature Ejaculation

NHS Devon

Commissioning policy

The routine commissioning of dapoxetine is not accepted in Devon for the treatment of premature ejaculation.

The Formulary Interface Group should not include this in locally defined treatment recommendations.

Rationale for the decision

There are five phase 3 randomised controlled trials which have demonstrated a prolongation of time to intravaginal ejaculation from a mean of 1 minute to around 3.5 minutes with dapoxetine compared to 2 minutes with placebo. When assessed by the responder analyses of control and distress, around 18% of men responded to placebo compared to 31% who responded to dapoxetine 30mg and 40% who responded to dapoxetine 60mg given on demand. Overall around one third of men report that their problem has improved with treatment.

There are limited data on the number of men who may present for treatment. Current management options for men who report problems with premature ejaculation include off-label use of medications that are effective in the condition as well as psychosexual counselling and behavioural techniques. There are no published assessments of cost effectiveness from an NHS perspective. The price of dapoxetine is significantly higher than current medications used off-label.

The benefits that dapoxetine bring about were considered not to represent a good value intervention to offer and not a priority for the investment of NHS funds.

Guidance notes on exceptionality

This general policy does not replace clinical judgement on the appropriate treatment of an individual patient.

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