

Date: December 15, 2005

Subject: DRC Recommendations to DCC and DHS

To: DHS, DCC, Dean's Office

From: Henry F. Simmons, Jr., MD, Ph.D.
Chairman DRC

At its 12/15/05 meeting, the Drug Review Committee considered the potential toxicity and therapeutic roles of the skeletal muscle relaxers listed below in the management of adult and pediatric patients with various indications as listed below.

Skeletal muscle relaxers under consideration

Baclofen (Lioresal)*
Carisoprodol (Soma)
Chlorzoxazone (Parafon)
Cyclobenzaprine (Flexeril)
Dantrolene (Dantrium)*
Metaxolone (Skelaxin)
Methocarbamol (Robaxin)
Orphenadrine (Norflex)
Tizanadine (Zanaflex)*
*FDA approved for spasticity

Indications under consideration for adults and children

Chronic neurological conditions associated with spasticity
Acute musculoskeletal conditions with or without muscle spasms
Chronic musculoskeletal conditions with or without muscle spasms

Based upon the bulk of the best available evidence pertaining to the aforementioned drugs the Committee concluded the following:

Either tizanadine or baclofen should be available to Arkansas Medicaid recipients for the treatment of spasticity due to the potential hepatotoxicity of dantrolene.

Dantrolene, baclofen, and tizanadine are efficacious for the treatment of spasticity disorders.

Carisoprodol, chlorzoxazone, cyclobenzaprine, metaxolone, methocarbamol and orphenadrine are efficacious for the treatment of spasm.

None of the aforementioned drugs that are efficacious for treatment of spasticity or spasm pose either a special risk or benefit for a particular group on the basis of demographics.

