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La revista *Prescrire International* ha publicado la [actualización 2024 de los fármacos a evitar](#) por considerarlos con una relación beneficio-riesgo desfavorable en todas las indicaciones para las que han sido autorizados en la Unión Europea o por existir alternativas terapéuticas más seguras.

La evaluación beneficio-riesgo se realiza mediante una revisión sistemática con metodología reproducible, datos sobre resultados relevantes para el paciente; la mejor evidencia disponible; con los tratamientos de referencia y teniendo en cuenta los efectos adversos y puntos de incertidumbre. Esta revisión pretende proporcionar información crucial para ayudar a los profesionales sanitarios a evitar exponer a los pacientes a fármacos que conllevan riesgos desproporcionados. Actualmente, se incluyen un total de 105 fármacos:

- sustancias activas con efectos adversos que, dadas las situaciones clínicas en las que se utilizan, son desproporcionados con respecto a los beneficios que aportan;
- medicamentos más antiguos que han sido reemplazados por medicamentos más nuevos con mejor relación riesgo-beneficio;
- medicamentos recientes que tienen una relación riesgo-beneficio menos favorable que otras opciones;
- medicamentos que no tienen eficacia probada más allá del efecto placebo, pero que conllevan un riesgo de efectos adversos particularmente graves.

Los principales cambios producidos con respecto al listado del año anterior son:

- **Teriflunomida** vuelve a estar entre los medicamentos a evitar.
- **Fenfluramina** se ha retirado de la lista de medicamentos a evitar hasta evaluar su balance beneficio-riesgo en síndrome de Lennox-Gastaut en niños.
- **Folcodina y tixocortol** han dejado de comercializarse, por lo que se han retirado del listado de medicamentos a evitar.
- **Idebenona** se ha reevaluado considerándose incierto el balance riesgo-beneficio.

El listado completo de fármacos que proponen evitar y los argumentos que lo justifican para cada uno de ellos puede consultarse accediendo al documento original. A continuación, se reproduce la tabla resumen de los cambios de 2024.

## Main changes in the 2024 update of Prescrire's drugs to avoid

**P**rescrire updates its review of drugs to avoid every year, in the interests of improving patient care.

No new drugs to avoid have been added to our 2024 review. However, it still includes a large number of drugs that are more dangerous than beneficial, indicating that health authorities are not doing enough to protect patients.

Faced with this situation, this review aims to provide crucial information to help healthcare professionals to avoid exposing patients to drugs that carry disproportionate risks. It also suggests safer therapeutic options, when they exist.

Prescrire's review of drugs to avoid in order to provide better-quality care also serves as a solid base for certain analyses. For example, Australian academics used Prescrire's drugs to avoid to analyse the authorised drugs on the Australian market in 2019 (*Prescrire Int* n° 254). Our review also made it possible to easily identify drugs that did not warrant their place on the list of "essential" drugs, published by France's Ministry of Health in mid-2023 (*Rev Prescrire* n° 478).

**The main differences between 2023 and 2024 are outlined below.**

**Teriflunomide back among Prescrire's drugs to avoid.** *Teriflunomide* is an immunosuppressant authorised for use in multiple sclerosis. It was removed from Prescrire's drugs to avoid while we evaluated its harm-benefit balance in a new indication: children aged 10 years or older. Analysis of the clinical evaluation data showed that *teriflunomide's* harm-benefit balance is also unfavourable in children. It is therefore back among Prescrire's drugs to avoid in order to provide better-quality care.

**Three drugs no longer among Prescrire's drugs to avoid: fenfluramine, pholcodine and tixocortol mouth spray.** *Fenfluramine* is an amphetamine that no longer features among Prescrire's drugs to avoid while we evaluate its harm-benefit balance in a new authorised indication, Lennox-Gastaut syndrome in children. It should still be avoided as an add-on to antiepileptic therapy in Dravet syndrome, a rare and serious form of infantile epilepsy (*Prescrire Int* n° 233).

Two drugs are no longer flagged as drugs to avoid because they are no longer marketed in France (nor in Belgium or Switzerland) and have not been granted marketing authorisation elsewhere in Europe through the centralised procedure: *pholcodine*, an opioid used as a cough suppressant; and *tixocortol* mouth spray, a corticosteroid used in combination with *chlorhexidine* for sore throat.

**Idebenone's removal upheld following re-assessment in 2023.** *Idebenone*, a coenzyme Q10 analogue, claimed to act as an antioxidant, already no longer featured among Prescrire's drugs to avoid in 2023, because we were reassessing its harm-benefit balance in Leber hereditary optic neuropathy in light of the new data that had become available. Following this reassessment in 2023, Prescrire concluded that its harm-benefit balance was uncertain rather than unfavourable. These new, low-quality data suggest that *idebenone* slightly increases the number of patients whose visual acuity improves or stabilises, at a cost of the risk of serious hepatic adverse effects (*Prescrire Int* n° 251). *Idebenone's* removal is therefore upheld.

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