

**February 2006**

**PRESS RELEASE  
NEW MELT FORMULATION FOR DESMOPRESSIN**

DesmoMelt 120mcg (oral lyophilisate desmopressin (as acetate)), a new orodispersible formulation of desmopressin, is now available for the treatment of Primary Nocturnal Enuresis (PNE) (bedwetting) in children over the age of five years. PNE is a common condition and can be highly distressing for children, and their parents (1). The child's school life and social life can suffer and they may suffer significant lack of self esteem (2).

Desmopressin is the most commonly used medication for the treatment of PNE. It was originally introduced as a nasal spray and has been available for a number of years as a tablet, Desmotabs 0.2mg (desmopressin acetate). DesmoMelt offers healthcare professionals a new child friendly way of administering desmopressin, which a study has shown is clinically equivalent to Desmotabs (3).

DesmoMelt has been specifically developed to create a formulation which is convenient for children to take; and which is in line with the National Service Framework for children recommendations on medicines for children and young people (4).

DesmoMelt dissolves almost instantly under the tongue (5). There is no need for additional water intake at bedtime and it has no unpleasant taste. The rapidly dissolving dose also makes it difficult to spit out, so doctors and parents can be confident that the medicine has been taken.

Christine Board, Enuresis Nurse Advisor from Bexley Care Trust stated "DesmoMelt is simple and easy to use and will now be our preferred first choice treatment".

DesmoMelt is available in packs of 30 x 120 mcg Melts in blister packs. The dosage is 120 micrograms (1 melt) under the tongue bedtime. If this dose is not effective, the dose may be increased to 240 micrograms (2 melts) but only if necessary. The need for continued treatment should be assessed at 3 monthly intervals, with at least one week off treatment (5).

DesmoMelt costs £30.34 for 30 Melts; the same price as a bottle of 30 Desmotabs.

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**References**

1. Hagglof B et al. Scand J Urol Nephrol 1997; 183:79-82.
2. Blackwell C. A guide to the treatment of enuresis for professionals. Bristol: Education and Resources for improving childhood continence, 1989
3. Data on file, pharmacokinetic study
4. NSF for children and young people
5. DesmoMelt SPC

