Clostridium botulinum neurotoxin type A (Xeomin) for sialorrhoea associated with adult Parkinson's disease and paediatric cerebral palsy

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Record Status

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Authors' objectives

Clostridium botulinum neurotoxin type A (Xeomin) is a purified botulinum toxin type A, which acts as a neuromuscular blocking agent by inhibiting acetylcholine release. It is intended to treat sialorrhoea (hypersalivation) in patients with Parkinson's disease and paediatric cerebral palsy. It is administered via four injections to parotid and submandibular glands over a four week treatment cycle. Xeomin is currently licenced for blepharospasm, spasmodic torticollis, and post-stroke muscle spasticity of the upper limb. There are currently about 127,000 people with Parkinson's disease in the UK while the prevalence of cerebral palsy is about 186 per 100,000 population, representing a total of around 110,000 people affected. Sialorrhoea affects about 70% of patients with Parkinson's disease, and between 10-80% of patients with paediatric cerebral palsy. The treatment and management of sialorrhoea involves suction, drug treatment and invasive procedures, including injection of off-label botulinum toxin A to the salivary gland, radiotherapy, surgical excision of the salivary glands, salivary duct rerouting or ligation of the salivary glands. Although injection of botulinum toxin A into the parotid and submandibular glands is considered safe and effective in controlling drooling, its effects are short lived, thus requiring repeat injections. Surgical intervention is the only permanent treatment currently available. Presently, there are no drugs specifically licensed to treat sialorrhoea. Xeomin is currently in two phase III clinical trials investigating the efficacy and safety of its use compared to placebo. The trials are expected to complete in July 2016 and June 2018.

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