

FOI 3837

3rd July 2026

FREEDOM OF INFORMATION ACT 2000 – INFORMATION REQUEST

Please provide the following information regarding the availability, commissioning, and rollout of Fampridine (brand name Fampyra) for eligible Multiple Sclerosis (MS) patients within your Trust for patients residing in or treated within the Southern Health and Social Care Trust area:

Current Availability: Is Fampridine currently available to be routinely prescribed on the NHS to eligible MS patients (meeting the standard EDSS 4–7 criteria) who are under the care of neurologists within the Southern Trust?

Response:

No. This is currently not provided by the Southern Health and Social Care Trust Neurology service.

Patient Numbers: How many patients with a diagnosis of Multiple Sclerosis are currently receiving NHS-funded Fampridine prescriptions within the Southern Trust?

Response:

There are no patients within Southern Health and Social Care Trust receiving NHS-funded Fampridine

Infrastructure and Clinics: Have specialist assessment or monitoring pathways/clinics required for the initial 2-to-4-week Fampridine walking speed trials been established and staffed in the Southern Trust?

Response:

No. This element of care is not provided by the Southern Health and Social Care Trust Neurology service as there currently is no commissioned funding streams.

Rollout Timelines: If Fampridine is not yet routinely available or if the necessary clinical assessment infrastructure is not fully operational in Southern Trust, what is the specific projected timeline or target date for the full rollout and operational availability of this service?

Response:

This is not operational within Southern Health and Social Care Trust due to the inability to provide timelines and targets as service is not funded/commissioned.

Interim Funding / Pathways: If routine local pathways are not yet active, what interim processes or Individual Funding Requests (IFRs) are available to eligible patients to access the treatment in the meantime?

Response:

Currently no patient pathways are place. The clinical teams note that this is highly unlikely to be approved via IFR route.

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