# Methionine

NOT RECOMMENDED AS AN ESSENTIAL MEDICINE

Section: 4. Antidotes and other substances used in poisonings > 4.2. Antidotes and other substances used in poisonings > Specific

Codes ATC: V03AB26

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| **Indication** | Exposure to or harmful effects of undetermined intent of analgesics, antipyretics or nonsteroidal anti-inflammatory drugs Code ICD11: PH44 |
| **INN** | Methionine |
| **Type de médicament** | Chemical agent |
| **Type de liste** | Liste de base |
| **Formulations** | **Oral > Solid:** 250 mg (DL) |
| **Historique des statuts LME** | Ajouté pour la première fois en 1987 (TRS 770)<br>Modifié en 2003 (TRS 920)<br>Modifié en 2007 (TRS 950)<br>Retiré en 2011 (TRS 965) |
| **Sexe** | Tous |
| **Âge** | Adolescents et adultes |
| **Équivalence thérapeutique** | La recommandation concerne ce médicament spécifique |
| **Renseignements sur le brevet** | Patents have expired in most jurisdictions<br>Lire la suite sur les brevets. |
| **Wikipédia** | Methionine |

## Résumé des preuves et recommandation du comité d'experts

An application was prepared by Kristi Shiago, Isa Watson, and Professor Marcus Reidenberg, Weill Cornell Medical College, New York, USA for deletion of DL-methionine from the Model List. Expert reviews were prepared by Professor Abdol Majid Cheraghali and Dr Kalle Hoppu. The Committee considered evidence from one Cochrane Review (1) that reported that there were no head-to-head trials comparing N-acetylcysteine with DL-methionine but an indirect comparison based on pooled data from the individual studies suggested that acetylcysteine was slightly more effective. Both medicines have been used since the late 1970s and the safety profile is well established. The Committee noted that although the cost of methionine is lower than acetylcysteine, acetylcysteine has the advantage that it can be administered both orally and intravenously. The Committee was concerned that methionine may not be widely available as a single medicine in many countries, due to acetylcysteine having become the standard of care for paracetamol poisoning globally. The Committee recommended the deletion of DL-methionine from the Model List due to its reported limited availability as a single medicine, the unknown real cost difference between DL-methionine and N-acetylcysteine, and the fact that N-acetylcysteine has become the standard of care globally for the treatment of paracetamol poisoning. DL-methionine has already been deleted from the EMLc. References: 1. Brok J, Buckely N, Gluud C. Interventions for paracetamol (acetaminophen) overdose. Cochrane Database of Systematic Reviews, 2006, (2):CD003328.

