Stakeholderkonsultation HTA-Protokoll

Titel: Ginkgo biloba in patients with decreasing mental performance, pe-ripheral arterial occlusive disease, vertigo, or tinnitus

Name des Stakeholder(verbande)s: Swiss Academy of Pharmaceutical Sciences (SAPhW)

Datum: 11.03.2026

Allgemeine Kommentare zum Protokoll

(max. 4000 Zeichen):

The HTA report on Ginkgo biloba in patients with decreasing mental performance (MPD), peripheral arterial occlusive disease (PAOD), vertigo, or tinnitus has been conducted in a methodologically sound and through manner. Only products that have been approved by Swissmedic and that are thus available on the Swiss market have been taken into consideration.
The report, based on an extensive and critical analysis of all available evidence, does not make any specific recommendation. The budget analysis, based on prescription data and drug prices of the Spezialitätenliste (SL) limits itself to a cost calculation that also involves available alternative treatment options. This allows for a direct economic comparison.
As for MPD, the report recognizes a benefit of a daily dose of 240 mg of Ginkgo extract, with an evidence level rated as low to moderate, and with no relevant safety issues detected. Insufficient evidence is available for the lower daily doses of 120 and 160 mg that had been used in some earlier clinical studies. However, such products are not available on the Swiss market of SL-listed Ginkgo products. The evaluation is in accord with the findings of the HMPC monograph on Ginkgo biloba which recognizes therapeutical benefits in mild cognitive deficits at 240 mg per day. This HMPC monograph has also been a cornerstone in the approval of Ginkgo products by the Swissmedic, and the concordant outcomes of national and European evaluation processes are a clear indicator that the current regulatory assessment processes for drug approvals are scientifically sound and consistent in their outcomes.
The clinical evidence in PAOD, vertigo and tinnitus are considered as low to very low, based on the hierarchical evidence-based approach used in the HTA protocol. The verdict may not

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