Prif Swyddog Fferyllol Chief Pharmaceutical Officer





Llywodraeth Cymru Welsh Government

MEDICINES SHORTAGE ADVISORY GROUP WALES

MEDICINE SHORTAGE

Distribution:	As Annex 1
From:	Andrew Evans, Chief Pharmaceutical Officer
Date:	30 July 2019
Reference:	CPhO/MedsLet/2019/08
Category:	Level 3 - High impact
Title:	Disruption to supply of Phenelzine sulfate 15mg Tablets (Nardil™).
For Action by:	
 All General Practitioners – please ensure this message is seen by all working in your dispensary and retain a copy in your 'locum information pack' Action as below. 	
 Dispensing General Practitioners – please ensure this message is seen by all working in your dispensary and retain a copy in your 'locum information pack'. Action as below. 	
Commur	nity Pharmacists - Action as below.
Hospital Chief Pharmacists - Action as below.	
 Medical Directors of Health Boards - disseminate to relevant clinicians in secondary care setting – Action as below. 	
Timeframe: Action within 24 hrs	
For Information: See Annex 1 – Distribution List	

Key Recipients:



Chief Executives of Health Boards

Nurse Directors Health Boards

Directors of Public Health

Health Board and NHS Trust Chief Pharmacists

Health Board Prescribing Advisers

Chief Executives of NHS Trusts

Principal Pharmacist Welsh Quality Control

Principal Pharmacist Welsh Medicines Information Centre

NHS Direct

What is this about:

Disruption to the supply of phenelzine.

Kyowa Kirin are the sole supplier of phenelzine tablets in the UK. They will be out of stock for a period of at least three months from the beginning of August until end of October 2019.

Description of product affected:

Phenelzine is a monamine-oxidase inhibitor (MAOI) licensed for the treatment of depression.¹ It has been found to be effective in patients clinically characterised as 'atypical', 'non endogenous', 'neurotic' or where treatment with other antidepressants has failed. Phenelzine is also used in patients with anxiety disorders, panic disorder and post-traumatic stress disorder.²

Phenelzine may be associated with withdrawal effects if stopped suddenly. Although these are usually mild and self-limiting for some patients, withdrawal effects may be severe. It is advised that the dose should be reduced gradually over at least 4 weeks. Withdrawal over 6 months is recommended when patients have been taking it as a long-term treatment.^{2,3}

Issue & Action to be taken:

Action and alternative products

Phenelzine tends to only be used in patients where alterative treatments have failed or are not suitable and many have been stabilised on this treatment for a long time. Given the difficulties in withdrawing treatment and initiating new treatments in patients stabilized on phenelzine it is advisable to maintain them on this treatment using imported supplies if necessary, which would need to be treated as an unlicensed medicine in line with local clinical governance procedures.

If there is potential for a patient maintained on phenelzine to run out of supply during this shortage, they should be urgently referred back to mental health specialist for advice on ongoing clinical management.

When prescribing and dispensing unlicensed preparations, prescribers and pharmacists should always ensure the following:

Use of unlicensed products should be in line with agreed local policies and guidance.

Any decision to prescribe an unlicensed medicine must take into account the relevant GMC guidance and local governance procedures. Please see link to GMC guidance: https://www.gmc-uk.org/ethical-guidance/ethical-guidance-for-doctors/prescribing-and-managing-medicines-and-devices/prescribing-unlicensed-medicines

References:

- 1. Kyowa Kirin Ltd. Summary of Product Characteristics for Nardil tablets. Last updated Feb 2017. Available: <u>https://www.medicines.org.uk/emc/product/228</u>
- Taylor DM et al. The Maudsley Prescribing Guidelines in Psychiatry 13th edition. Published 2018. John Wiley & Sons Ltd.
- 3. UKMI Q&A. How do you switch between monoamine oxidase inhibitors and SSRI, tricyclic or related antidepressants? Published Nov 2015. Available: <u>https://www.sps.nhs.uk/wp-content/uploads/2015/12/NW-QA151.5-How-do-you-</u> <u>switch-between-MAOIs-and-SSRIs-TCAs-or-related-antidepressants-.pdf</u>

Acknowledgements:

- Carl Holvey, Clinical Pharmacy Services Lead, Bart's Health NHS Trust.
- Dr Anne Connolly, Principal Pharmacist, South London and Maudsley NHS Foundation Trust.
- Peter Pratt: Head of Mental Health and Learning Disabilities Medicines Strategy, NHS England and NHS Improvement.
- UK Medicines Information (UKMI).
- Specialist Pharmacy Service.

For all correspondence please contact:

Medicinesshortages@gov.wales

Please forward to listed recipients.

Yours sincerely

Andren M G S

Andrew Evans Chief Pharmaceutical Officer/Prif Swyddog Fferyllol Welsh Government/Llywodraeth Cymru

DISTRIBUTION LIST

Send to:

Chief Executives of Health Boards Medical Directors of Health Boards Health Board Chief Pharmacists Hospital Chief Pharmacists Chief Executives of NHS Trusts Director of Welsh Medicines Information Centre NHS Wales Procurement

NHS Wales Shared Services Partnership to forward to:

General Practitioners

Dispensing General Practitioners.

Community Pharmacists.

Independent / Private clinics, hospices and hospitals throughout Wales.

Welsh Government:

Chief Medical Officer Chief Nursing Officer Director General Health and Social Services Group Emergency Planning Adviser

HSSG Comms