

IMPORTANT INFORMATION FOR COMMUNITY PHARMACY TEAMS

Dear Colleague,

You are no doubt aware of the current supply disruptions relating to ADHD medicines, resulting in a [National Patient Safety Alert](#) being issued on 27th September 2023. The DHSC expects these issues to resolve by the end of the year.

The SNEE ICB has been working closely with local stakeholders to develop a system response that enables colleagues across both primary and secondary care to support patients affected by these supply disruptions. We have produced a number of resources to support general practice, and to minimise the impact of these shortages on community pharmacy teams.

1. Patient information (Appendix 1)

This information/factsheet is appropriate for GP practices to send to patients currently prescribed the preparations included in the alert, plus atomoxetine (supplies of which remain unpredictable). It was shared with practices across SNEE on 10th October, so your teams may come across it when patients present a prescription for dispensing.

2. Guidance for prescribers and pharmacy teams

Although not all ADHD medications are bioequivalent, some preparations are appropriate for routine generic prescribing. Other preparations can be prescribed generically when bioequivalence has been established across a group of products.

We have advised GP practices that prescribing generically when it is clinically appropriate to do so, gives community pharmacy colleagues maximum flexibility when dispensing prescriptions. You may begin to see an increase in patients presenting prescriptions for generically prescribed 'Methylphenidate XL tablets.'

CAUTION! Methylphenidate modified release preparations should only be prescribed generically in the XL tablet form. **Prescriptions written generically for modified release capsules should be returned to the prescriber for amendment.**

Patients with complex needs may be unsettled by changes to the appearance of their medication. Where possible, it is advisable to supply the patient with the brand that they have received historically. If their preferred brand of medication is unavailable, patients may wish to try other pharmacies but should be warned that finding a supply elsewhere is unlikely.

When a pharmacy is unable to dispense the item prescribed, they should ensure that the prescription is returned to the spine. This will enable the patient to have their medication dispensed by an alternative pharmacy.

NOTE: Where possible, pharmacies should avoid part-dispensing of prescriptions. Patients choosing to accept a part-dispensed prescription should be warned that the outstanding balance owed to them may be unavailable and cannot be collected from another pharmacy.

3. Switching matrix (Appendix 2)

The switching matrix was designed to support prescribers in identifying opportunities for safe, clinically effective generic prescribing and gives them the option to switch to generic prescribing proactively if they wish to. It also enables pharmacy teams to identify groups of products which are interchangeable. An example is the Concerta XL[®] bioequivalent products, which can be prescribed generically as 'Methylphenidate XL tablets.'

Where the switching matrix indicates that a switch can be made in primary care, pharmacists should work closely with their local practices to support patient care, using professional lines to facilitate these conversations.

When suggesting alternatives to GPs, pharmacists should share information on the products, brands, and strengths available to them to assist the GP in prescribing an appropriate alternative.

NOTE: Prescribers are asked to prescribe, and issue affected products as single item prescriptions, to enable patients to collect their other medication as usual.

NOTE: Where the switching matrix indicates that the switch cannot be made by the GP, patients should be asked to contact their specialist team directly to minimise the impact on primary care.

4. Patient counselling

Patients who are dispensed a different brand of methylphenidate XL tablet should be consulted where possible, and counselled to reassure them that the alternative product will work the same way, and they should not experience any new side effects or changes in their symptoms.

Counselling should also be given to patients when lower strengths of a product are dispensed to achieve the full dosage.

All patients should be advised that any changes to their prescription will be short-term, and only until the supply problems are resolved. Once supplies are readily available, they should be given the option to switch back to their original medicine or stay on the brand that they have been switched to.

Appendix 1: Patient Information

IMPORTANT INFORMATION ABOUT YOUR ADHD TREATMENT

You may have heard about a national shortage of some of the medicines used to treat ADHD. These supply problems are expected to resolve at various dates between October and December 2023.

How does this affect me/my child?

Although not all ADHD medicines are affected by this shortage, our records indicate that you/your child is currently being prescribed one or more of the medicines that are likely to be in short supply, or possibly unavailable.

What do I need to do?

The NHS is working hard to manage this shortage, but there are a few things that you can do to help us minimise the effect on you/your child:

Patients currently taking Xaggitin XL® tablets, Concerta XL® tablets, or Xenidate XL® tablets

1. Please only order your prescription when you have 10-14 days of your medicine left. It is important not to stockpile medicines. Your doctor will not be able to issue your prescription any earlier.
2. Be prepared for your medicine to look a little different to normal:

- You may be asked to take different strengths of your medicine to make up the full dose.
- If your usual medicine is not available, your GP should be able to give you a prescription for a different medicine that works in the same way and is still available - you should not experience any new side effects or changes in your ADHD symptoms.

Please do not ring your GP practice to request an alternative medicine, your pharmacist will arrange this for you.

- Any change to your medicine will be short-term, and only until the supply problems are resolved. Once supplies are readily available, you will be given the option to switch back to your original medicine or stay on the brand that you have been switched to.

Patients currently taking Equasym XL® caps, Elvanse® caps, Elvanse Adult® caps, or Intuniv® tabs

1. Please only order your prescription when you have 10-14 days of your medicine left. It is important not to stockpile medicines. Your doctor will not be able to issue your prescription any earlier.
2. Your GP cannot prescribe you an alternative medicine. If you have transport, you may wish to take your prescription to another pharmacy if your medicine is not available from your usual one. It is possible that another pharmacy will still have some of your medicine in stock, but this is unlikely.
3. If you are unable to get your medicine, please contact your specialist directly for advice on what to do next:

- **East Suffolk and North Essex NHS Foundation Trust** (Colchester, Clacton, and Harwich hospitals):

Tel: 07907 576486

- **Essex Partnership University NHS Foundation Trust:**

northessex.adultadhd@nhs.net (preferred method of contact)

Tel: 01268 2435555 (please leave a message and we will get back to you as soon as we can)

- **NSFT Adult ADHD Services:**

East Suffolk: EastSuffolkadultadhdteam@nsft.nhs.uk or Tel: 01473 279200

West Suffolk: adultadminadhdwest@nsft.nhs.uk or Tel: 01284 733 188

- **NSFT Children's ADHD Services:**

East Suffolk: Admin.ChildrensADHDteam.EastSuffolk@nsft.nhs.uk or Tel: 01473 237070

West Suffolk: ADHD.West@nsft.nhs.uk or Tel: 01284 733188

- **Community Paediatric service (West Suffolk Foundation Trust):**

Tel: 01284 741744

If you are under the care of any other service, please contact your specialist directly.

4. While we wait for supplies of your medicine to become available again, you may need to change to a different treatment or management plan. Your specialist will discuss the options available to you and agree on the best way to manage your ADHD until your usual medicine is available again.

Appendix 2: Switching Matrix

ADHD MEDICATION – PRESCRIBING INFORMATION

Medicinal forms	Products on UK market	Bioequivalent?	Prescribe generically?	Guidance for primary care
METHYLPHENIDATE				
Immediate release tabs 5mg, 10mg, 20mg	Medikinet Generic Ritalin Tranquilin	✓ These products are interchangeable.	✓ 'Methylphenidate ? mg tablets'	Switching between these products can be undertaken in primary care.
				DO NOT switch between immediate release and XL preparations.
Modified release tabs 18mg, 27mg, 36mg, 54mg	Affenid XL Concerta XL Delmosart XL Matoride XL Xaggitin XL Xenidate XL	✓ These 6 products are interchangeable.	✓ 'Methylphenidate XL tablets ? mg'	A combination of strengths can be prescribed to achieve the full dose, e.g. Concerta XL 36mg + Concerta XL 18mg to achieve a total dose of 54mg
				Switching between these products can be undertaken in primary care by prescribing a like-for-like dose, e.g. instead of "Concerta XL 18mg tablets" prescribe "Methylphenidate XL 18mg tablets"
				DO NOT switch between immediate release and XL preparations.
				DO NOT prescribe or dispense the US import Ritalin SR 20mg tabs
Modified release caps	Medikinet XL Equasym XL Metyrol XL Ritalin XL	X These products have different release profiles.	X Please prescribe by brand name only.	DO NOT switch between products in primary care. Advise patient to contact specialist.
LISDEXAMFETAMINE				
Immediate release caps	Elvanse	X	X	DO NOT switch to/from lisdexamfetamine in primary care. Advise patient to contact specialist.
DEXAMFETAMINE				
Immediate release tabs	Amfexa Generic	✓	✓ 'Dexamfetamine ? mg tablets'	DO NOT switch to/from dexamfetamine in primary care. Advise patient to contact specialist.
Modified release caps	Dexedrine	n/a		
Oral solution	Generic	n/a		
GUANFACINE				
Modified release tabs	Intuniv	n/a		DO NOT switch to/from guanfacine in primary care. Advise patient to contact specialist.
ATOMOXETINE				
Immediate release caps	Atomaid Generic Strattera (disc ^d)	✓	✓ 'Atomoxetine ? mg capsules'	DO NOT switch to/from atomoxetine in primary care. Advise patient to contact specialist.
Oral solution	Strattera			