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IMMEDIATE MESSAGE TO:

- 1. Directors of Pharmacy
- 2. Medical Directors NHS Boards

25 May 2023

Dear Healthcare Professional,

NATIONAL PATIENT SAFETY ALERT /2023/006/DHSC – SHORTAGE OF PYRIDOSTIGMINE 60MG TABLETS

Please see attached National Patient Safety alert regarding supply issues and advice on prescribing lower dosages of pyridostigmine 60mg tablets for onward transmission as below :

Please could all Directors of Pharmacy please forward this alert to:-

- Chief Pharmacists
- Hospital Pharmacists

Please could Medical Directors arrange to forward this alert on to:-

- General Practitioners
- Accident & Emergency Departments
- Directors of Public Health
- Relevant Clinics
- Chief Executives of NHS Board

Thank you for your co-operation.

Yours sincerely

IRENE FAZAKERLEY Medicines Policy Team







Shortage of pyridostigmine 60mg tablets

Date of issue:	24-May-23	Reference no:	NatPSA/2023/006/DHSC
This alert is for action	by: All organisations using	g pyridostigmine 60r	ng tablets
an executive lead (or leaders in Pharmacy,	equivalent role in organisa	ations without execu P practices, Care Ho	nplementation should be co-ordinated by tive boards) and supported by clinical ome settings, clinical leaders in Neurology
Explanation of iden	tified safety issue:	Action	ns required
Pyridostigmine 60mg expected week comm There are three supp tablets: • Viatris • Teva • Flynn Pharma The supply disruption manufacturing issues demand to other supp Pyridostigmine is lice ileus and post operat gravis, it is used to st interruption in supply resulting in swallowin There is no clinical al Consideration has be dose for individual pa been optimised by the tablet supply howeve may well result in syn Pyridostigmine 12mg and can support patie tablets during this pel (w/c 12 June 2023), p the tablet formulation solution for those who	tablets are out of stock, re- nencing 12 June 2023. liers of pyridostigmine 60m is caused by a combination and a resulting increase in obliers. Insed in myasthenia gravis ive urinary retention. In my abilise patients therefore, increases the risk of relap- g difficulties or respiratory ternative to pyridostigmine en given to suggesting a r tients (assuming they have eir neurologist) in order to r, clinical advice suggests inptom recurrence or exact /1ml oral solution remains ents in primary care switch iod. Once tablets are back patients should be switched to preserve supplies of the patients of require a liquid formulation f pyridostigmine 60mg tables	esupply is ng Actio 1. 1. 2. 2. 2. 2. 2. 3. 4. 3. 4. 5. educed e already preserve that this erbation. available ing from c in stock d back to e oral on. 7. ets can	ns to be completed by 26/05/2023 Prescribers, pharmacists and staff working in GP practices and specialist clinical teams to identify all patients currently prescribed pyridostigmine 60mg tablets. Prescribers and pharmacists to determine if patients have sufficient stock to last until expected resupply date, week commencing 12 June 2023. Patients with insufficient supplies should be referred to their prescriber for a prescription for pyridostigmine 12mg/ml oral solution. Prescribers should only prescribe sufficient pyridostigmine 12mg/1ml oral solution to cover until week commencing 12 June 2023. ^{NOTE A} Pharmacists and prescribers should ensure patients are not intolerant to any excipients, are appropriately counselled on the switch to oral solution and equivalent volume of liquid to be administered. Prescribers may consider prescribing unlicensed imports of pyridostigmine 60mg tablets if the licensed oral solution formulation is not considered suitable and work with local pharmacy teams to ensure supplies are ordered in a timely manner. ^{NOTE B} Pharmacy procurement teams should utilise mutual aid in secondary care if there is an urgent need and it is appropriate. Prescribers should immediately refer

For further detail, resources and supporting materials see: Enter specific webpage provided by alert issuer

For any enquiries about this alert contact: DHSCmedicinesupplyteam@dhsc.gov.uk

Additional information:

Clinical Information

The licensed dosage for adults with myasthenia gravis is 30-120 mg be given at suitable intervals throughout the day when maximum strength is needed (for example, on rising and before mealtimes). The usual duration of action of a dose is 3 to 4 hours in the daytime but a longer effect (6 hours) is often obtained with a dose taken on retiring for bed. The total daily dose is usually in the range of 5-20 tablets (of 60mg strength), but it is inadvisable to exceed a total daily dose of 450 mg in order to avoid acetylcholine receptor down-regulation. Patients requiring doses exceeding 450 mg daily will usually require input from a specialised neuromuscular service. Immunosuppressant therapy is usually considered if the dose of pyridostigmine exceeds 360 mg daily.

There is no direct clinical alternative to pyridostigmine, patients with myasthenia gravis are at risk of relapse resulting in swallowing difficulties or respiratory failure.

Patients with severe disease will be taking oral immunosuppressants; if these patients are still taking pyridostigmine this would indicate that they will not be in remission. Reducing the dose of pyridostigmine to preserve tablet supply may result in symptom recurrence or exacerbation.

Pyridostigmine 60 mg tablets should be stored in its original package and the bottle tightly closed to protect from moisture and light.

Notes:

A. Guidance on ordering short dated pyridostigmine 12mg/ml oral solution from Viatris

Viatris have short-dated stock of pyridostigmine 12mg/ml oral solution that will be available to order directly from wholesalers. This stock is due to expire at the end of November 2023.

B. Guidance on ordering and prescribing unlicensed imports

Unlicensed imports of pyridostigmine 60mg tablets have been sourced and orders should be placed at the earliest opportunity as lead times vary.

Any decision to prescribe an unlicensed medicine must consider the relevant guidance and NHS trust or local governance procedures. Please see the links below for further information:

- <u>The supply of unlicensed medicinal products</u>, Medicines and Healthcare products Regulatory Agency (MHRA)
- Professional Guidance for the Procurement and Supply of Specials, Royal Pharmaceutical Society
- Prescribing unlicensed medicines, General Medical Council (GMC)

References

- BNF pyridostigmine
- <u>SmPC pyridostigmine tablets</u>
- SmPC pyridostigmine oral solution
- Myasthenia gravis: Association of British Neurologists' management guidelines

Stakeholder engagement

The following stakeholders have been engaged in the management and consulted in the drafting of this alert: Specialist Pharmacy Service Medicines Advice, Medicine Shortage Response Group, NHS England National Clinical Directors for Neurology, NHS England Patient Safety and the Devolved Governments.

Advice for Central Alerting System (CAS) officers and risk managers

This is a safety critical and complex National Patient Safety Alert. In response to <u>CHT/2019/001</u> your organisation should have developed new processes to ensure appropriate oversight and co-ordination of all National Patient Safety Alerts. CAS officers should send this Alert to the executive lead nominated in their new process to coordinate implementation of safety critical and complex National Patient Safety Alerts, copying in the leads identified on page 1.

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