Shortage of Levomepromazine Hydrochloride 25mg/ml Solution for Injection Ampoules

Date: 12th April 2019

Description of product affected

- Levomepromazine is a phenothiazine antipsychotic which acts as an antagonist at the $D_2$, $5HT_2A$, alpha$_1$ and alpha$_2$-adrenergic, $H_1$ and muscarinic receptor sites.\(^1\)
- It possesses anti-emetic, antihistamine and anti-adrenaline activity and exhibits a strong sedative effect.
- It is licensed for the management of pain and accompanying restlessness or distress in the terminally ill patient.\(^2,3\)
- In the palliative care setting, it is widely used for terminal agitation and as a second line anti-emetic agent.\(^1\) Please view the Cambridgeshire and Peterborough Community End of Life Medicine Administration Record (see link below) for further details. [https://www.cambridgeshireandpeterboroughccg.nhs.uk/easysiteweb/getresource.axd?assetid=16607&type=0&servicetype=1](https://www.cambridgeshireandpeterboroughccg.nhs.uk/easysiteweb/getresource.axd?assetid=16607&type=0&servicetype=1)

Background

- Sanofi, one of the manufacturers of levomepromazine will be out of stock from the end of this week (12th April 2019) until the end of April.
- The only other UK supplier, Wockhardt, anticipate they will be out of stock this week due to the unexpected increase in demand; their next delivery has been delayed and further stock will not be available until the end of April.
- Wockhardt have confirmed the remaining levomepromazine 25mg/mL injection ampoule stock which is held at Alliance Healthcare will be kept for primary care use only. This stock at Alliance Healthcare is limited and will not last until the end of April.

Alternative agents and management plan – GPs, Palliative Care Networks and Community Pharmacies to review and action immediately

- Levomepromazine is an essential medication in the inpatient and community setting.
- Patients on this drug may already have been treated with first line parenteral agents such as haloperidol or midazolam, alone or in combination, for terminal agitation\(^1\); or cyclizine, haloperidol, and metoclopramide for nausea and vomiting\(^4\), where the multi-receptor blockade of levomepromazine makes it a useful choice when symptoms are thought to be due to more than one cause.\(^4\)
Therefore, should stock of levomepromazine run out, management options will need to be determined on a case by case basis, in consultation with the specialist palliative care teams (see table 1).

For alternative agents which may be considered please view the Cambridgeshire and Peterborough Community End of Life Medicine Administration Record: https://www.cambridgeshireandpeterboroughccg.nhs.uk/easysiteweb/getresourcex.axd?assetid=16607&type=0&servicetype=1

Suppliers of the following medicines have been made aware of this supply issue and have confirmed they can support an increase in demand should this be required.

- Haloperidol 5mg/1ml solution for injection ampoules
- Midazolam 10mg/2ml solution for injection ampoules
- Cyclizine 50mg/ml solution for injection ampoules
- Metoclopramide 10mg/2ml solution for injection ampoules

During the period of shortage, new patients should only be started on levomepromazine if other treatment options have been exhausted. This is to try to avoid disrupting existing treatment regimens where possible whilst acknowledging that for some new patients levomepromazine may be the only option available.

Community pharmacies who require stock for existing patients should order Wockhardt stock from Alliance Healthcare.

Community pharmacies should support patients and their representatives to obtain stock from other pharmacies to fulfil the prescription i.e. by phoning other pharmacies in advance. For pharmacies within the Cambridgeshire and Peterborough area which hold palliative care medicines see link below. It is imperative to contact the pharmacy to confirm stock availability and support patients and their representatives.
https://www.cambridgeshireandpeterboroughccg.nhs.uk/easysiteweb/getressource.axd?assetid=16743&type=0&servicetype=1

Community pharmacies unable to obtain levomepromazine injection should liaise with the prescriber to discuss using an alternative product as outlined above, considering drugs patient may have already been treated with.

Where no clinical alternative is available and after discussion with the prescriber, community pharmacies requiring stock to fulfil a prescription and having difficulty obtaining stock should contact their local secondary care trusts as they have been asked to support primary care and hospices where possible, to understand if they have stock that can be made available to allow the continuation of treatment in existing patients. Details of how to contact trusts is available on our online formulary platform netFormulary (see link below) and further contact details are listed in table 1. http://www.cambridgeshireandpeterboroughformulary.nhs.uk/

It is imperative that GPs, palliative care networks and community pharmacies work together during this period to ensure patients can be managed appropriately.
Table 1 - Contact details of the Cambridgeshire and Peterborough Specialist Palliative Care Teams

<table>
<thead>
<tr>
<th>Team and Location</th>
<th>Contact details</th>
<th>Available</th>
</tr>
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<tbody>
<tr>
<td>Addenbrookes Palliative Care Team, Cambridge</td>
<td>01223 274404</td>
<td>Monday – Friday 9am-5pm.</td>
</tr>
<tr>
<td></td>
<td>01223 216151</td>
<td>Out of hours urgent specialist palliative care advice is available via the consultant on-call for Palliative Medicine contactable via GP switchboard</td>
</tr>
<tr>
<td></td>
<td>01223 274404</td>
<td>Consultants in Palliative Medicine</td>
</tr>
<tr>
<td>Arthur Rank Hospice Charity, Cambridge</td>
<td>01223 675800</td>
<td>Urgent Referral Line Monday – Friday 9am-5pm</td>
</tr>
<tr>
<td></td>
<td>01223 675777</td>
<td>24-hour advice line for GPs and District Nurses caring for patients at home</td>
</tr>
<tr>
<td></td>
<td>01480 416103</td>
<td>7-day face to face service Monday to Friday 8.30am – 4.30pm, Weekends and bank holidays 9am-5pm</td>
</tr>
<tr>
<td>Hinchingbrooke Hospital, Huntingdon</td>
<td>01733 847245</td>
<td>Palliative care advice and referrals</td>
</tr>
<tr>
<td>Hospital at Home, Cambridgeshire and Peterborough Foundation Trust</td>
<td>01480 364747</td>
<td>Monday – Friday within office hours for referrals</td>
</tr>
<tr>
<td>Royal Papworth Hospital, Papworth Everard</td>
<td>01733 678541</td>
<td>For out of hours palliative care advice please contact the on-call consultant via the Papworth Hospital switchboard</td>
</tr>
<tr>
<td></td>
<td>01733 678599</td>
<td>Consultant in palliative care</td>
</tr>
<tr>
<td></td>
<td>01733 678585</td>
<td>Lead Nurse Palliative Care and End of Life Nurse</td>
</tr>
<tr>
<td></td>
<td>01733 678599</td>
<td>Specialist Palliative Care Nurses</td>
</tr>
<tr>
<td></td>
<td>01733 678599</td>
<td>Community Macmillan Nurse Specialists</td>
</tr>
<tr>
<td>Peterborough Hospital, Peterborough</td>
<td>01767 642 410</td>
<td>Specialist advice</td>
</tr>
<tr>
<td>St John’s Hospice, Moggerhanger, near Sandy</td>
<td>01733 225 900</td>
<td>Specialist advice</td>
</tr>
</tbody>
</table>

References

1. Palliative Care Formulary Sixth Edition, 2017
2. Wockhardt UK Ltd. Levomepromazine Hydrochloride 25mg/ml Solution for Injection. SPC, date of revision of text, 26/04/2017: https://www.medicines.org.uk/emc/product/3014
3. SANOFI. Nozinan 25mg/ml Solution for Injection/Infusion. SPC, date of revision of text, 30 August 2017: https://www.medicines.org.uk/emc/product/1428/smpc
5. DHSC supply issues list and email disseminated from PrescQIPP 11 April 2019
Acknowledgements

- Dr Shaheen Khan, Consultant in palliative medicine, lead clinician for Guy’s and St Thomas’ NHS Foundation Trust community palliative care team
- Dr Bill Crawley (GPSI palliative medicine), Pilgrims Hospices, Canterbury
- Margaret Gibbs, Lead Palliative Care Clinical Pharmacist, Ashton’s Hospital Pharmacy Services

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Disclaimer: The content of this memo may not reflect national guidance. Some of this memo is based on clinical opinion from practitioners. Users should bear this in mind. Any decision to prescribe off-label must take into account the relevant GMC guidance and governance procedures for unlicensed medicines. Prescribers are advised to pay particular attention to the risks associated with using unlicensed medicines or using a licensed medicine off-label. As with all prescribing, the prescriber is medically and legally responsible for the prescriptions they sign and for their decisions and actions when they supply and administer medicines or authorise or instruct others to do so.