Shortage of Bile Acid Sequestrants – Colestyramine Powder for Oral Suspension 4g (Questran) and Colestipol (Colestid)

Updated: 20th November 2020

Description of product affected

Colestyramine

- Colestyramine is licensed for use in the following indications[1,2]:
    - Primary prevention of coronary heart disease in men between 35 and 59 years of age and with primary hypercholesterolaemia who have not responded to diet and other appropriate measures.
    - Reduction of plasma cholesterol in hypercholesterolaemia, particularly in those patients who have been diagnosed as Fredrickson's Type II (high plasma cholesterol with normal or slightly elevated triglycerides).
    - Relief of pruritus associated with partial biliary obstruction and primary biliary cirrhosis.
    - Relief of diarrhoea associated with ileal resection, Crohn's disease, vagotomy and diabetic vagal neuropathy.
    - Management of radiation-induced diarrhoea.
- The dose used varies between 4g and 36g daily according to the indication.[1,2]
- For relief of diarrhoea, it is common practice to use colestyramine offlabel to treat "bile acid diarrhoea" where considered clinically appropriate. In Cambridgeshire and Peterborough colestyramine is recommended first line for the management of bile acid malabsorption (unlicensed indication).
- Colestyramine is also used to help reduce the volume of jejunal and ileostomy outputs as a consequence of bowel resection for any cause[3] and

in patients with myeloma treatment induced diarrhoea that is unresponsive to loperamide.[4]

- In the BNF it is also listed as being used to accelerate the elimination of teriflunomide and leflunomide when washout is required.

Colesevelam

Colesevelam 625mg tablets[5] has a much more restricted range of licensed indications limited to treatment of hypercholesterolaemia **although it may be used in practice to help relieve bile acid diarrhoea[5]** and is recommended in Cambridgeshire and Peterborough as second line therapy for bile acid malabsorption after colestyramine and where conventional antidiarrhoea medication have failed.[6]

Colestipol

- Colestipol[7,8] is restricted to treatment of hypercholesterolaemia **although it may be used in practice to help relieve bile acid diarrhoea.** Colestipol is **NON-FORMULARY** in Cambridgeshire and Peterborough.

Background

Bristol-Myers Squibb (BMS) divested the Questran range (Questran and Questran Light) to Cheplapharm at the end of July 2019. This affected the availability of several bile acid sequestrants. The current stock situation is as follows:

Colestyramine

- Questran Powder 4g sachets - **out of stock until August 2021.**
- Questran Light sachets – **available through Alliance Healthcare and Phoenix.**
- Generic colestyramine light 4g sachet (Mylan) - **available from the AAH, Alliance Healthcare and Phoenix.**

Colesevelam

- Cholestagel 625mg tablets (colesevelam) - **available from AAH, Alliance Healthcare and Phoenix.**

Colestipol (non-formulary)

- Colestid (colestipol) granules 5g (orange) - **unavailable until April 2021**
- Colestid (colestipol) granules 5g (plain) – **available**

Alternative agents and management options

- Given the current issues with all of these agents it would seem prudent to keep patients on their existing treatment for as long as supplies remain available, provided they are benefitting from treatment.

- If there is a need to switch patients between treatments the following factors should be taken into consideration:

    - Both Questran and Questran Light sachets contain 4g anhydrous colestyramine per sachet.

    - Questran Light contains 30mg of aspartame per sachet (whereas Questran contains about 3.8g sugar) and this may lead to tolerability issues in some patients with IBS.[6]

    - In switching patients between colestipol (5g sachet) and colestyramine (4g sachet) or vice versa it would seem appropriate to switch on a sachet for sachet basis and then titrate according to response if needed (with specialist input if appropriate).

    - **There is no clear guidance on switching from colestyramine sachets to colesevelam (Cholestagel) 625mg tablets or vice versa. Advice from gastroenterology specialists locally has confirmed that an appropriate initiation dosage when switching adult patients from colestyramine to colesevelam would be:**
        - *Colesevelam (Cholestagel) taken as 625mg orally ONE to TWO times a day.*[9]
        - *Patients will need to be monitored for their response to this treatment.*

- If prescribers have any concerns regarding individual patients, we recommend that you seek advice from the specialist that initiated the bile acid sequestrant in the first instance.

- Before switching medication, patient and carers as appropriate should be counselled about any change to their medication.

Pruritus

- For patients with pruritus due to liver or biliary problems who do not achieve adequate benefit from treatment with a bile acid sequestrant, there are a number of alternative treatments available.[9,10]

- Specialist advice may be needed to ensure that symptom control is maintained.

Action required

For GP practices:

- Questran sachets o Where patients do not have sufficient supplies or stock is unavailable, the practices should encourage patients to liaise with pharmacies directly to ascertain their stock levels and which alternative product is available as different pharmacies use a range of wholesalers.
    - Where stock is unavailable, if clinically appropriate for the patient colestyramine light (generic or Questran Light) are available in limited supplies via the normal ordering process.
    - Where stock is unavailable, if clinically appropriate for the patient colestipol (Colestid) sachets may be ordered via the normal ordering process.
    - Where stock is unavailable, if clinically appropriate for the patient, colesevelam 625mg tablets may be ordered via the normal ordering process.
    - Prescriptions for Colestid (Colestipol) and Cholestagel (Colesevelam) 625mg tablets should be made on an acute basis and patients switched back to their normal product when their supplies resume.
    - In circumstances where licensed colestyramine products are unavailable and the patient is unable to switch to alternative products due to clinical reasons then unlicensed Questran products may be considered.
    - Counsel the patient and their carers as appropriate about any change to their medication BEFORE any change is made.

For pharmacies:

- Support by checking your current stock levels of these products and informing your local practices.
- Support GPs in counselling patients regarding any change to their medication.

References

1. Bristol-Myers Squibb Pharmaceuticals limited. Questran Powder for Oral Suspension 4g. SPC, date of revision of the text, November 2017: https://www.medicines.org.uk/emc/product/5715/smpc
2. Bristol-Myers Squibb Pharmaceuticals limited. Questran Light. SPC, date of revision of the text, November 2017: https://www.medicines.org.uk/emc/product/911/smpc
3. Personal communication – Chair British Society of Gastroenterology Research Committee
4. Personal communication – Chief Pharmacist St Marks Hospital London and Haematology Pharmacist, Guys & St Thomas' NHS Foundation Trust.
5. British National Formulary Issue 76 (Sept 2018- March 2019)

6. NICE. SeHCAT (tauroselcholic [75 selenium] acid) for the investigation of diarrhoea due to bile acid malabsorption in people with diarrhoea-predominant irritable bowel syndrome (IBS-D) or Crohn's disease without ileal resection. Diagnostics guidance [DG7]. Published Nov 2012. Available: https://www.nice.org.uk/guidance/dg7
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10. Management of pruritis associated with cholestasis. UpToDate (subscription only)
11. Personal communication – liver specialist pharmacist Kings Hospital London

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