

# Safety

## VALPROATE AND CARBIMAZOLE IN PREGNANCY

Despite several MHRA alerts, women on valproate are still not receiving the information they are entitled to, including the patient information leaflet, and some women on valproate are unaware of the serious risks in pregnancy. It is imperative the actions listed below are carried out urgently.

### VALPROATE (INCLUDING SEMI-SODIUM)

- Valproate is licensed as an effective treatment for epilepsy and bipolar disorder. However, we are aware it is also used 'off-label' (for example in migraine prophylaxis).
- All women and girls of childbearing potential should meet the conditions of a [Pregnancy Prevention Programme](#), irrespective of indication.
- A woman of childbearing potential is defined as a pre-menopausal female who is capable of become pregnant.
- Valproate should not be used in girls and women of childbearing potential unless other treatments are ineffective or not tolerated.
- Valproate medicines must not be used in women of childbearing potential unless the [Pregnancy Prevention Programme](#) is in place.

### ACTIONS FOR GP

- Ensure you are familiar with the [Guide for Healthcare Professionals](#) detailing information on the risks of using valproate in girls and women of childbearing potential.
- Identify and recall all women and girls on valproate who may be of childbearing potential.
- Inform patient of the known risks and ensure that she understands she must not get pregnant whilst taking valproate.
- Provide the [Patient Guide](#) to the patient (or her parents or responsible person as necessary).
- Check the patient has been reviewed by her specialist in the last year to ensure contraception has been discussed and a [Risk Acknowledgement Form](#) completed. If not arrange an urgent review.
- Check the patient has an in-date [Risk Acknowledgement Form](#) (completed and signed by the specialist at initiation and at each treatment review) each time a repeat prescription is issued. The patient should receive a copy of the form; one copy should be filed in the specialist notes, and one copy retained in the patient's medical records held by their GP.
- Ensure continuous use of highly effective contraception in all women taking valproate-containing products this includes women who are sexually inactive. Pregnancy testing may be required if there is a lack of compliance or effectiveness of contraception.
- If patient refuses contraception, refer urgently to specialist as an alternative to valproate must be considered.
- Refer back to the specialist urgently in case of unplanned pregnancy or where a patient wishes to plan a pregnancy.



### ACTIONS FOR DISPENSERS

- Valproate medicines must always be dispensed with the accompanying [Patient Information Leaflet](#).
- Dispense whole packs whenever possible, and ensure there is a [Warning Label](#) either on the carton or added via a sticker.
- Discuss risks in pregnancy with female patients each time you dispense valproate medicines, provide a [Patient Card](#) and ensure they have the [Patient Guide](#) and have seen their GP or specialist to discuss their treatment and the need for contraception.
- Ensure new packs of valproate information materials are placed in a designated place accessible to all dispensing staff and dispose of any old materials related to valproate medicines.



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### HOW TO ORDER PREGNANCY PREVENTION PROGRAMME PACKS

- Packs of information materials to support informing women on valproate of the risks in pregnancy and the need to be enrolled in the Pregnancy Prevention Programme have been sent to prescribers, dispensers, and healthcare professionals.
- These are available online at: <https://www.gov.uk/drug-safety-update/valproate-medicines-epilim-depakote-pregnancy-prevention-programme-materials-online>
- If you require more copies or if you have not received a pack, please contact the Sanofi medical information department without delay on 0845 372 7101 or email [UK-Medicalinformation@sanofi.com](mailto:UK-Medicalinformation@sanofi.com).

### CARBIMAZOLE AND PREGNANCY

#### Advice for Healthcare Professionals

- Carbimazole is an anti-thyroid agent. It is indicated where reduction of thyroid function is required.
- Carbimazole is associated with an increased risk of congenital malformations when used during pregnancy, particularly in the first trimester of pregnancy and at high doses (15 mg or more of carbimazole daily).
- Women of childbearing potential should use effective contraception during treatment with carbimazole.
- Carbimazole should only be considered in pregnancy after a thorough individual assessment by a **specialist** of benefits and risks of treatment, and only at the lowest effective dose without additional administration of thyroid hormones; close maternal, foetal and neonatal monitoring is recommended.
- Adequate treatment of hyperthyroidism in pregnant women should be adequately treated to prevent serious maternal and foetal complications.

### CONTRACEPTION FOR WOMEN USING KNOWN TERATOGENIC DRUGS

- Women and girls of childbearing potential must use highly effective contraception if they are able to become pregnant (see [guidance from Faculty of Sexual and Reproductive Health \[FSRH\]](#)).
- Methods of contraception considered 'highly effective' in this context include the long-acting reversible contraceptives (LARC): copper intrauterine device (Cu-IUD), levonorgestrel intrauterine system (LNG-IUS), and progestogen-only implant (IMP), and male and female sterilisation, all of which have a failure rate of less than 1% with typical use (see guidance from FSRH for more about user-independent methods and failure rates).
- If a user-independent form is not used, two complementary forms of contraception including a barrier method should be used and regular pregnancy testing considered.
- Individual circumstances should be, in each case, evaluated when choosing the contraception method, involving the patient in the discussion to guarantee her engagement and compliance with the chosen measures.

### REPORTING ADVERSE DRUG REACTIONS

Please report to the [Yellow Card Scheme](#) any suspected adverse reactions associated with medicines taken during pregnancy experienced by women or the baby or child.

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