



Advice on re-prioritising IM Hydroxycobalamin injections and information on Oral Vitamin B12 supplements during COVID-19 pandemic

As a result of pressures on services and the requirement for vulnerable groups to self-isolate, some patients are struggling to access timely vitamin B12 injections. The information is intended to provide a pragmatic approach for clinicians to consider when treating patients currently being administered with the IM B12 injections during the COVID-19 pandemic.

The information below is intended to help support clinicians decision making process. and is not intended to override a clinician's judgement. Each patient must be considered on a case by case basis and practices comfortable with the decision made.

If further information is required, please GMMM COVID-19 B12 injection guidance [here](#).

Maintenance B12 dose depends on whether the deficiency is diet related or not.

For people with B12 deficiency that is:

B12 deficiency *not* thought to be diet related Eg: History of total/partial gastrectomy, bariatric procedures, inflammatory bowel diseases, Crohn's, coeliac disease, small bowel overgrowth, bile acid malabsorption, chronic H. Pylori, Pernicious Anaemia and/or Intrinsic factor Antibody positive results:

NICE 2019¹ Recommends: Administer hydroxocobalamin 1 mg intramuscularly every 2–3 months for life.

Information to consider during COVID 19 pandemic: Continue with scheduled 3 monthly vitamin B12 injections where possible, in particular in those with recent, or a history of suggestive neurological symptoms.

NB: Oral B12 is generally not well absorbed in this cohort of patients due to the lack of intrinsic factor (IF).

In self-isolating/shielding patients: To facilitate social distancing (with mutual agreement of patient), clinicians could consider a trial of High Strength Oral B12 Cyanocobalamin 1000mcg 1-2 /day (*Unlicensed*) to enable small amounts to be absorbed via the non-IF route.

There is 'low quality' evidence of comparable efficacy, safety and tolerability of high dose (1000-2000 micrograms/day) oral cyanocobalamin to intramuscular



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hydroxocobalamin.² In shielding patients a trial of OTC oral cyanocobalamin should be based on risk>benefit.

If still very symptomatic then B12 injection can be given with clear understanding that the interaction with healthcare increases transmission risk of COVID 19.

Stock/Unlicensed use High strength Oral Cyanocobalamin: High strength cyanocobalamin (1000micrograms) is an unlicensed medicine, community pharmacies would have to obtain supplies from importers which would delay supply to patient, in particularly if prescribed at a large scale.

If prescription of oral cyanocobalamin is not possible, advice people to buy high strength oral vitamin B12 over the counter (see below suggestions)

B12 deficiency thought to be diet or drug related

NICE 2019 Recommends: Advice people either to take oral cyanocobalamin tablets 50–150 micrograms daily between meals or have a twice-yearly hydroxocobalamin 1 mg injection.

In vegans, treatment may need to be life-long, whereas in other people with dietary deficiency replacement treatment can be stopped once the vitamin B12 levels have been corrected and the diet has improved.

Advice during COVID outbreak: This group of patients can be offered OTC oral cyanocobalamin tablets 50–150 micrograms daily between meals if needed. Measure serum B12 level before restarting injected B12 replacement again after the outbreak.

Supply of oral cyanocobalamin tablets 50mcg: There is **limited supply** of licence tablets in the community pharmacy due to out-of-stock issues with multiple manufacturers.
To prevent any delay in treatment advice people to buy Low dose oral B12 vitamin over the counter (see below suggestions)

Give dietary advice about foods that are a good source of vitamin B12: Good sources of vitamin B12 include eggs, meat, milk (and other dairy products), and fish (salmon and cod). Foods which have been fortified with vitamin B12 (for example some soy products, and some breakfast cereals and breads) are good alternative sources.



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Review patients: who have very high B12 levels, no intrinsic factor antibody and no anaemia / High MCV and no formal diagnosis as may well be low risk. This cohort of patients could manage with dietary advice alone and review again in 6 months.

Where can I buy oral vitamin B12?

Viaduct Care does not endorse any particular brand of oral supplementation, however patients may wish to source oral vitamin B12 as below.

Note the symbol for micrograms is μg and this may be used on some ingredient lists

Holland and Barrett

These are available to order online <https://www.hollandandbarrett.com/> or by telephone. By telephone, call 0330 058 2025 and select 'option 0'. Free standard delivery on orders over £25 otherwise £2.99 for delivery. (Price correct at time of writing)



100mcg vitamin B12 tab x 100 / Take ONE tablet daily / £7.69



1000 mcg Timed Release Vitamin B12 x 100 Tab / Take ONE daily/ £14.69

Nature's Best (online)

These are available to order online <https://www.naturesbest.co.uk/> or by telephone. By telephone, call 01892 55 20 30. Free UK delivery on orders over £15 otherwise £1 for delivery. (Price correct at time of writing)



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100mcg vitamin B12 tablets x 100 / Take ONE tablet daily / £4.60



1000mcg vitamin B12 tablets x 180 / Take ONE tablet daily/ £9.95

Reference:

- 1) NICE Clinical Knowledge summary: Anaemia - vitamin B12 and folate deficiency.
<https://cks.nice.org.uk/anaemia-b12-and-folate-deficiency#!scenario>
- 2) Wang H, Li L, Qin LL, et al. Oral vitamin B12 versus intramuscular vitamin B12 for vitamin B12 deficiency. Cochrane Database Syst Rev. 2018 Mar 15;(3):CD004655.
- 3) British Society Of Haematology: Online- <https://b-s-h.org.uk/about-us/news/covid-19-updates/> (Accessed: 06/4/20)
- 4) Alternatives to hydroxycobalamin B12 injection during the COVID-19 pandemic. Greater Manchester Medicines Management Group. April 2020.
<http://gmmmg.nhs.uk/docs/covid-19/RDTC-GMMMG-Covid-19-QAA-Alternatives-to-hydroxycobalamin-injection-Version-1-New.pdf>