

To: ALL PRIMARY CARE – GREATER MANCHESTER

Monday 30 October 2023

Dear Colleagues,

Advice for Primary Care Regarding Current Supply Issues with ADHD Medications

We acknowledge the capacity concerns and pressure on GP practices and are working on the complexity of shared care arrangements across Greater Manchester, including those for ADHD, as well as longer term investment in quality schemes. We also acknowledge the fragility of general practice and we have escalated the concerns regarding ongoing significant drug shortages in the system to regional and national teams. We want to maintain the ongoing conversation with primary care in line with the GM Primary Care Blueprint.

We would like general practice to have the tools to support patients during the current shortage of ADHD medication and this letter includes some advice to help manage the immediate situation. We will continue to work with providers to develop additional support materials for primary care. This will include education and training, a patient information leaflet and pathway, as well as other tools that will help deal with this current shortage.

Background

On 27th September a [National Patient Safety Alert](#) was issued to advise of national shortages of Methylphenidate prolonged-release capsules and tablets, Lisdexamfetamine capsules, and Guanfacine prolonged-release tablets. At present, the supply disruptions are expected to resolve at various dates between October and December 2023.

The below information aims to advise colleagues in primary care of the actions that could be considered to support patients who are affected by the supply problems. The ADHD services will support with any concerns/queries.

Medications that are affected:

Methylphenidate:

- Equasym XL® 30 mg capsules
- Xaggitin XL® 18 and 36 mg prolonged-release tablets
- Xenidate XL® 27 mg prolonged-release tablets

Lisdexamfetamine:

- Elvanse® 20, 30, 40, 50, and 70 mg capsules
- Elvanse® Adult 30mg capsules

Guanfacine:

- Intuniv® 1, 2, 3 and 4 mg prolonged-release tablets

The supply disruption of these products is caused by a combination of manufacturing issues and an

increased global demand. Other ADHD medicines remain available but cannot meet excessive increases in demand and may not necessarily be clinically appropriate for all patients. Please note the availability of these products is subject to change, and regularly updated information regarding this can be found on the [Specialist Pharmacy Services website](#).

Initial actions for GP Practices

- Identify those likely to be affected using prescription data from the last three months
- Contact the patient and/or their carer and establish if they have enough medication to last until the expected resolution date (N.B. this is unlikely due to the majority of the medications being affected are schedule two controlled drugs, which should not routinely be prescribed for more than 30 days at a time).
- If they have insufficient supplies, discuss with the patient and/or their carer whether they could manage having a break in medication (the exception to this is guanfacine which should not be stopped suddenly – see guidance below).
- For any patients identified who are being prescribed the medication by CAMHS or the specialist ADHD service, please direct them or their carer to contact the specialist team for advice using the contact information provided at the end of this document.

For patients identified who are being prescribed this medication by their GP under a shared care agreement please see the guidance below regarding individual medications.

Advice regarding specific medications

Guanfacine

- Patients currently prescribed guanfacine should have their dose gradually reduced. Suddenly stopping guanfacine should be avoided due to the risk of rebound hypertension. Hypertensive encephalopathy has been very rarely reported on abrupt cessation of treatment. Refer all patients prescribed guanfacine back to their specialist team for review **ASAP. Specialist teams across Greater Manchester are prioritising these patients for review.** The specialist team may ask the GP to assist in the monitoring of these patients.

Lisdexamfetamine

- Consider issuing a generic prescription. The Elvanse and Elvanse Adult formulations are identical, the only difference being the patient information and product licensing.
- If the patient does not feel that they can manage having a break in medication, then direct them to their specialist ADHD service for advice.

Equasym XL® 30 mg capsules

- If the patient does not feel that they can manage having a break in medication, then direct them to their specialist ADHD service for advice.

Xaggitin XL® 18mg tablets

- In the first instance consider prescribing an alternative Methylphenidate formulation with an equivalent release profile (Affenid XL, Delmosart PR, Matoride XL, Xenidate XL, Concerta XL)*

- If these alternative options are also out of stock and patient does not feel that they can manage having a break in medication, then direct them to their specialist ADHD service for advice.

Xaggitin XL® 36mg tablets

- In the first instance, consider prescribing 2 x 18mg tablets instead.
- Alternatively, consider prescribing an alternative Methylphenidate formulation with an equivalent release profile (Affenid XL, Delmosart PR, Matoride XL, Xenidate XL, Concerta XL)*
- If these alternative options are also out of stock and the patient does not feel that they can manage having a break in medication, then direct them to their specialist ADHD service for advice.

Xenidate XL® 27 mg prolonged-release tablets

- In the first instance consider prescribing an alternative Methylphenidate formulation with an equivalent release profile (Affenid XL, Delmosart PR, Xaggitin XL, Concerta XL)*. NB: Matoride XL not available as a 27mg tablet.
- If these alternative options are also out of stock and the patient does not feel that they can manage having a break in medication, then direct them to their specialist ADHD service for advice.

*Please note that the maximum licenced dose of Concerta XL is 72mg daily but for Affenid XL, Matoride XL, Xenidate XL, Delmosart PR, Xaggitin XL the maximum licenced dose is 54mg daily. The doses between the different methylphenidate prolonged release tablets are equivalent i.e. 54mg daily of one preparation is equivalent to 54mg daily of another preparation. If you have any questions or concerns regarding switching bioequivalent preparations, please contact your locality medicines optimisation team.

Support for patients

If a patient does not wish to consider a treatment break advise the patient to contact their specialist team to discuss alternative treatment options. Patients unable to contact their specialist team directly should be supported by their GP practice to do so. Please make patients aware that due to the number of patients requiring review because of the shortage there may be a period of waiting before their medication is reviewed by the specialist team.

Whilst the risk of stopping ADHD medications is generally considered low from a physical health perspective, there is the potential for significant psychological distress and many people rely on their medication to be able to function in an employment, education or social setting.

These websites have information that might be useful in helping patients manage any changes in symptoms because of the medication shortage:

[Resources Archive - ADHD Foundation : ADHD Foundation Factsheets \(addiss.co.uk\)](#)
[ADHD Support For Your Child | Parents Advice Guide | YoungMinds](#)
[ADHD and mental health - Mind](#)

Should patients struggle with their mental health as a result of having a break from their medication, they can also access support via our 24-hour mental health crisis lines.

Crisis Helplines in Greater Manchester	Number
Bolton, Manchester, Salford, Trafford and Wigan	0800 953 0285
Bury, Heywood, Middleton and Rochdale (HMR), Oldham, Stockport, Tameside	0800 014 9995

Advice for Community Pharmacies

If unable to supply a patient's usual medication, consider the following:

- If aware that other pharmacies may have stock, direct the patient to try alternative pharmacies in the first instance.
- If, based on the advice regarding specific medicines, there is an alternative preparation that the GP practice could consider prescribing, contact the practice to discuss and obtain a replacement prescription if the GP practice clinician considers this appropriate (Note that for some patients the GP may wish to direct the patient to their specialist service)
- If there are no alternatives that the GP practice can prescribe, the patient will need to be reviewed by their specialist service as above. If this is the case, advise the patient of the timescales for when their medicine may become available (if known) and advise the patient to contact the specialist service they are known to, or their GP practice, depending on patient preference.

Contact Information for specialist services

Most patients should have contact details for the service they are known to. If contact details are required, please ensure requests for advice or review are directed to the service that provides the patient's shared care.

CAMHS and Paediatrics		
Locality	Phone	Email
Bury	0161 716 1100	pcn-tr.hymburyresource@nhs.net
Bolton	01204 483 222	boltoncamhsmedshelpline@gmmh.nhs.uk
HMR	01706 676 000	pcn-tr.camhsrochdaleadmin@nhs.net
Manchester - North	0161 203 3250/1	cmm-tr.NorthCamhs@nhs.net
Manchester - Central	0161 701 6880	cmm-tr.CentralManchesterCamhs@nhs.net
Manchester - South	0161 529 6062	cmm-tr.SouthManchesterCamhs@nhs.net
Manchester/Salford Emerge 16-17	0161 549 6055	cmm-tr.emerge.cmft@nhs.net
Oldham	0161 716 2020	pcn-tr.reflectionsoldham@nhs.net
Oldham (16-18yrs) Optimise	0800 844 5257	info@optimisehcq.co.uk
Salford	0161 518 5400	salfordcamhs.enquiries@mft.nhs.uk
Salford/Manchester Emerge 16-17	0161 549 6055	cmm-tr.emerge.cmft@nhs.net

Stockport	0161 716 5868	pcn-tr.camhsadminstockport@nhs.net
Tameside	0161 716 3600	pcn-tr.info.tghym@nhs.net
Trafford CAMHS	0161 549 6456	mft.traffordcamhs@nhs.net
Trafford Combined ADHD service	0161 912 5945	mft.cpaeds@nhs.net
Wigan	01942 764473	wigancamhsreferrals@gmmh.nhs.uk

ADULT ADHD services		
Locality	Phone	Email
Bury (Optimise)	0800 844 5257	info@optimisehcg.co.uk
Bolton Adult ADHD service	Use email	gmicb-bol.adhd.enquiries@nhs.net
HMR (Optimise)	0800 844 5257	info@optimisehcg.co.uk
Manchester (GMMH)	Use email	ADHD@gmmh.nhs.uk
Oldham (Optimise)	0800 844 5257	info@optimisehcg.co.uk
Salford	Information to follow from locality	
Stockport ASD-ADHD adult diagnostic service	0161 716 4591	Use phoneline
Tameside	Use email	pcn-tr.adhd-tameside@nhs.net
Trafford (Trafford Extended Service)	0161 357 1210	gmmh-tesadmin@gmmh.nhs.uk
Wigan (GMMH)	01942 631800	wiganadhdprescriptions@gmmh.nhs.uk

Kind regards,



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