



Type 1 methylphenidate modified-release tablets (various brands) – supply issues

Forthcoming supply interruption to stocks of various type 1 methylphenidate modified-release tablet preparations has been identified, as detailed below.

Prescribing in NHS Grampian

85 patients have been identified as being prescribed the affected medications within NHS Grampian, full details in table below (ePrescribed data. May 2023 – 12th August 2023, run 28/09/23)

Brand	Strength	Total number of patients	Number of patients aged under 18 years	Number of patients aged 18 years and over
Xaggitin [®] XL	18mg	34	6	28
Xaggitin [®] XL	36mg	39	11	28
Xenidate [®] XL	27mg	12	2	10
Concerta [®] XL	54mg	0	0	0

Stock information & availability

 Various brands and strengths of type 1 methylphenidate modified release tablets have been highlighted as having supply issues – the table below provides a summary of reported issues (taken from <u>SPS</u>, 28/09/23).

Brand	Strength	Currently experiencing supply issues	Anticipated date of out of stock	Anticipated re-supply date
Xaggitin [®] XL	18mg	No	10 October 2023	01 February 2024
Xaggitin [®] XL	36mg	No	17 November 2023	01 February 2024
Xenidate [®] XL	27mg	Yes	N/A	02 October 2023
Concerta [®] XL	54mg	Yes	N/A	06 October 2023

- Type 1 methylphenidate modified-release brands have a duration of action of approximately 12 hours. They contain a combination of immediate and extendedrelease methylphenidate. Preparations differ slightly in their immediate release and extended release profiles but the following brands have been deemed to be bio-equivalent and therefore could be used interchangeably (see <u>SPS</u> for full details – logon required):
 - Affenid[®] XL
 - Concerta[®] XL
 - Xaggitin[®] XL
 - Delmosart[®] XL
 - Matoride[®] XL
 - Xenidate[®] XL

This information has been produced in collaboration with CAHMS, CCH and adult mental health services.



Actions for primary care

Shortage of **Concerta® XL 54mg**:

- As we understand this to be a short term issue, patient personal stock and stock within the community pharmacy network may mean that not all patients will require an intervention. No actions should be taken in advance of patients making repeat requests for medication and community pharmacy confirming they cannot supply.
- Where a patient is flagged as not having enough medication to cover duration of supply issue, prescribing should be changed to Xaggitin[®] XL 54mg. This is the NHS Grampian preferred brand of prolonged release methylphenidate tablets, therefore prescribing ongoing should remain as Xaggitin[®] XL 54mg – patients medication record should be updated to reflect this.
- Patients/carers should be counselled on changes to their prescription and should be made aware that the alternative medication will be prescribed ongoing.

Shortage of Xaggitin® XL 18mg & 36mg:

- No actions should be taken in advance of patients making repeat requests for medication and community pharmacy confirming stocks are exhausted and unable to be sourced (noting indicative dates provided above).
- Prescribing should be changed to Concerta[®] XL for the duration of the shortage only. When supplies return, patients should be switched back to prescribing Xaggitin[®] XL as this is the NHS Grampian preferred brand of prolonged release methylphenidate tablets.
- Patients/carers should be counselled on changes to their prescription and should be made aware that the alternative medication is a substitute only for the duration of supply issues and that they should order their regular medication as normal when next required.

For all patients

- Where additional support is needed in the management of these patients, the recommending specialist service should be contacted for advice. (Noting that secondary care have the same stock limitations as primary care with these medications so should not be contacted relating to ongoing supplies of medicines).
- Where the recommendation to prescribe was from out with the NHS (i.e. private recommendation and GP has assumed clinical responsibility for prescribing), queries should not be directed to specialist as these patients are not under the care of an NHS specialist service. If necessary, patients should be directed back to their private provider.

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Actions for community pharmacy

- Share this information with all relevant staff.
- Be alert to ongoing supply issues, and where a prescription for the affected medication is presented ascertain patient's personal stock levels to assess when further medication will be required:
 - Where patient's person stocks are sufficient to cover duration of supply issues, provide information to patient/carer on when they can expect further supplies to be made.
 - When patient's personal supplies and community pharmacy stocks are assessed as **not sufficient** to cover duration of supply issues, contact patient's GP practice to arrange an alternative prescription advising of time scales for prescription requirement. It is advised that stock availability is provided as part of this communication.
 - Where an alternative medication is prescribed, patients should be counselled on changes to their prescription as detailed above.
- Consider making part supplies, when appropriate, to manage demand until stock returns (giving consideration to re-supply dates above).
- Patients/carer should not be advised to contact GP directly, it is expected the communications relating to this issue are dealt with via community pharmacy – GP practice/pharmacotherapy communication route.
- Patients/carers should not be advised to contact or travel to other community pharmacies looking for stocks – this is widespread issue and multiple patients contacting/attending pharmacies can result in an unnecessary increase in workload.

Further information

- Extended-release-methylphenidate-3.pdf (sps.nhs.uk)
- <u>Shortage of Methylphenidate prolonged-release tablets SPS Specialist</u> <u>Pharmacy Service – The first stop for professional medicines advice</u> (NHS email address and log on required)
- Guidance For The Management Of Medicine Shortages Within NHS Grampian