

Shortages of Glucagon-like peptide-1 (GLP-1) receptor agonists

This information has been updated following the release of an updated <u>National</u> <u>Patient Safety Alert</u> (NPSA) on 3rd January 2024 and has been produced in collaboration with the NHS Grampian diabetes specialist service.

Note: the information below is for prescribing of GLP-1 medications for Type 2 diabetes only. Prescribing of GLP-1 medicines for any other indication (i.e. weight loss) is not supported within NHS Grampian.

Shortage information

- Supplies of injectable GLP-1 medications anticipated to be limited until the end of 2024. Not all medications are completely out of stock, limited supplies may mean that some patients can source their prescribed GLP-1 without the need for an intervention.
- Byetta (Exenatide) 5micrograms/0.02mL solution for injection 1.2mL pre-filled pens will be discontinued in March 2024.
- Rybelsus[®] (semaglutide) tablets are now available in sufficient quantities to support initiation of GLP-1 treatment in people with type 2 diabetes in whom new initiation of GLP-1 therapy would be clinically appropriate.

Actions required as per the NPSA

Advice below is for the duration of medication shortages only and as such may differ from information on Grampian Guidance and Grampian Area Formulary.

For new patients recommended to be started on a GLP-1

- Rybelsus[®] (semaglutide) tablets should be prescribed.
- Due to specific administration instructions patients need to be counselled appropriately when starting Rybelsus[®].

For patients already established on a GLP-1 and clinical response established (see flowchart for details)

- If current medication cannot be sourced, consider prescribing Rybelsus[®] (semaglutide) tablets for the duration of supply issues (noting that supplies are limited and not out of stock, so original medications may be able to be supplied).
- If currently prescribed Byetta[®] 5micrograms/0.02mL solution for injection 1.2mL pre-filled pens, switch to prescribing Rybelsus[®] (semaglutide) tablets.
- Due to specific administration instructions patients need to be counselled appropriately when switching to prescribing of Rybelsus[®].

For patients already established on a GLP-1 and clinical response has not been observed (see flowchart for details)

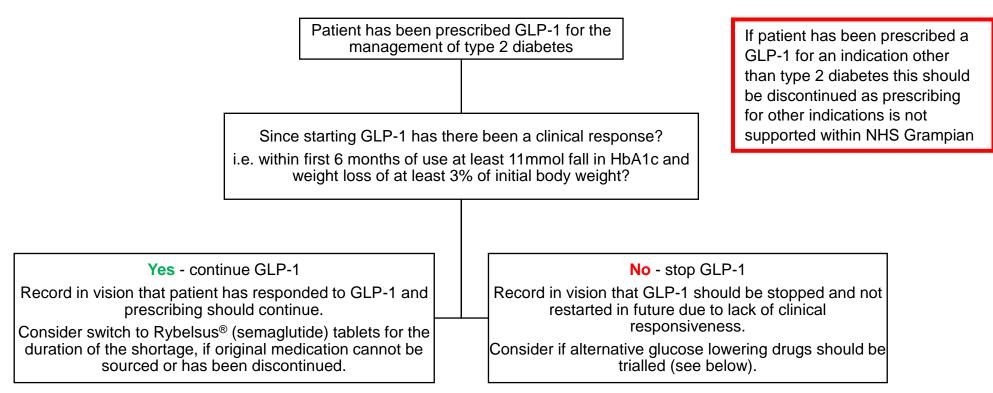
• GLP-1 medication should be discontinued (see flow chart for further details).

Further information

- <u>NPSA</u>
- <u>Grampian Guidance</u>: Pharmacological Management of Type 2 Diabetes
- NICE Type 2 diabetes in adults: management (nice.org.uk)



Flowchart: Management of patients currently prescribed GLP-1



Choosing alternative glucose lowering medications (when required)

- 1. See Grampian Guidance: Pharmacological Management of Type 2 Diabetes to aid decision,
- 2. Discuss any proposed changes with practice diabetes team,
- 3. If further advice or support is required this would be via standard diabetes pathways:
 - Diabetes specialist nurses helpline for healthcare professionals: 01224559977. Available Monday Friday 0900-1300
 - · Linked diabetes consultant via standard SCI referral

Note: HbA1c should be checked 3 months after any significant change in diabetes medications i.e. new agent started or medication stopped.