

Methylphenidate modified release tablets: supply issues

Supply issues with various brands and strengths of methylphenidate (type 1) modified release tablets have been identified. Brands include: Affenid[®] XL, Concerta[®] XL, Delmosart[®], Matoride[®] XL, Xaggitin[®] XL, Xenidate[®] XL.

Timelines for resolution of issues are variable and subject to change.

Stock information & availability

Modified release methylphenidate should be prescribed by brand name and not used interchangeably as they have different release profiles and different instructions for use. Where supply issues necessitate a switch to an alternative brand, [MHRA advice](#) should be followed and patients appropriately counselled.

Actions for community pharmacy

- Where a prescription for the affected medication is presented, ascertain patient's personal stock levels to assess when further medication will be required.
- Where it is anticipated that stocks cannot be procured in time to ensure continuous supplies of medication, the patients GP practice should be contacted.
 - Information relating to current medication as well as alternatives available for order should be shared with the GP practice.
- Patients/carers should not be advised to either
 - contact their GP directly, it is expected the communications relating to this issue are dealt with via community pharmacy – GP practice/pharmacotherapy communication route.
 - 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.
- Generic prescribing of methylphenidate modified release preparations should not be requested (see [MHRA Drug Safety Update](#)).
- Where an alternative brand/formulation of methylphenidate modified release tablets are supplied to a patient – ensure counselling regarding changes to medication – see [factsheet](#) for key points.

Actions for primary care teams

- No proactive switching of patients should be undertaken. Patients should be considered on a case-by-case basis where it has been confirmed stock cannot be procured to ensure continuous supplies of current prescribed medication.
- Where a patient is flagged as not having enough medication, work alongside the patient's community pharmacy to explore what alternative brands of modified release methylphenidate tablets are available (as per community pharmacy actions above).
- All alternative prescribing should be by brand name and for the duration of supply issues only.
- Where an alternative brand/formulation of methylphenidate modified release tablets are prescribed – ensure counselling regarding changes to medication – see [factsheet](#) for key points.

Actions for specialist service

- Do not commence patients on type 1 modified release methylphenidate tablets until supply disruption has been resolved. Other preparations of methylphenidate e.g. Medikinet® XL capsules, Equasym® XL capsules and immediate-release methylphenidate can still be considered.

Further information

- SPS methylphenidate shortage: [Shortage of Methylphenidate prolonged-release tablets – SPS -](#) (NHS email address and log on required)
- ADHD medicines fact sheet: [handyfactsheetadhdformsuk.pdf \(choiceandmedication.org\)](#)
- SPS consideration when switching methylphenidate brands: [Considerations when prescribing modified-release methylphenidate – SPS –](#)
- MHRA Drug Safety Update: [Methylphenidate long-acting \(modified-release\) preparations: caution if switching between products due to differences in formulations](#)
- [Guidance For The Management Of Medicine Shortages Within NHS Grampian](#)