Chief Medical Officer Directorate Pharmacy and Medicines Division

Dear Colleague

MEDICINE SUPPLY ALERT NOTICE

MEDICINE / DRUG IN SHORT SUPPLY: Detrusitol XL (tolterodine) 4mg capsules

Priority:Level 2Valid until:6 December 2019

lssue

1. This Medicine Supply Alert Notice provides information regarding the supply of **Detrusitol XL (tolterodine) 4mg capsules.** These will be out of stock from 7 October until 6 December 2019.

Advice

2. Other brands of Tolterodine 4mg modified-release capsules remain available from alternative suppliers (see table below for further information)

Product (brand)	MA holder	
In stock		
Blerone XL 4mg prolonged release capsules	Zentiva	
Mariosea XL 4mg prolonged release capsules	Teva	
Preblacon XL 4mg prolonged release capsules	Accord	
In stock – but only use these if prescribed by		
brand	_	
Inconex XL 4mg prolonged release capsules	Sandoz	
Neditol XL 4mg prolonged release capsules	Aspire	
Out of stock		
Santizor XL 4mg prolonged release capsules	Pfizer	
Detrusitol XL 4mg prolonged release capsules	Pfizer	



11 October 2019

Addressees:

<u>For action</u> Community Pharmacy Scotland Medicines Shortage Response Group (Scotland) Scottish Prescribing Advisor Network

General Enquiries to:

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6. For patients who do not have sufficient supplies of Detrusitol XL 4mg capsules for the duration of the expected out of stock period, **clinicians should consider prescribing generically or switching to alternative brands** of tolterodine 4mg XL capsules using the table above as a guide.

7. The United Kingdom Medicines Information (UKMI) service have advised there is no difference in the bioequivalence of all brands of tolterodine 4mg prolonged-release capsules.

Actions

8. Healthcare professionals are asked to note the content and actions outlined in this circular and Annex and circulate as appropriate.

Yours sincerely,

Jose Marie Para

Rose Marie Parr Chief Pharmaceutical Officer/ Deputy Director Pharmacy & Medicines Division

Medicines Shortages Response Group (Scotland) priority definitions

LEVEL	DESCRIPTION	POTENTIAL RESPONSES
Level one (low impact)	Supply problem with a short duration (up to one month) where immediately available measures are expected to be sufficient and there is minimal additional management requirement.	 Business as usual. Response likely to involve using the same medicine. Alternative strength/formulation available to meet demand, potentially from other suppliers.
Level two (medium impact)	Supply problem where <u>alternatives in</u> <u>the same therapeutic class are</u> <u>available but which may require</u> <u>some management</u> such as switching to those alternatives, which may include unlicensed medicines. Level two shortages also include level one shortages that continue for more than a month.	 Business as usual. Response not likely to require a change in the class of medicine. Alternative strength/formulation available but clinical advice is required to help manage the switch. Alternative medicine in the same therapeutic class. Unlicensed alternatives may be available.
Level three (high impact)	Supply problems where there are <u>limited or no alternatives in the same</u> <u>therapeutic class and which require</u> <u>significant management</u> , potentially including changes in clinical practice or operational direction or that have patient safety implications. Level three shortages also include level two shortages for medicines used in <u>life saving conditions</u> such as anaphylaxis or involving <u>patient</u> <u>groups considered as vulnerable</u> , such as neonates, pediatrics or	 Serious shortage situation. Response likely to require a change in the therapeutic class of medicine. Alternative therapeutic class of medicine available. The use of a 'serious shortage protocol'. Additional clinical advice. Exceptional MHRA regulatory measures. Issuing a Medicine Supply Alert Notice (MSAN) to the NHS via the MSAN system.
Level four (critical impact)	people with learning disabilities. Supply problems where there is <u>no</u> <u>viable therapeutic alternative</u> and were responses may also require support from the wider NHS and outside the health system and / or which trigger the use of national resilience structures.	 Very serious shortage situation. Wider burden on NHS and public sector. Non-medicine support provided to patients. National Resilience procedures potentially activated – including links with agencies outside NHS. Additional project management or communications support may be required.