

20 September 2024

## **Medicine Supply Alert Notice**

### **Trandolapril 2mg and 4mg capsules**

**Priority: Level 2\***

**Valid until: Late December 2024**

#### **Issue**

1. Trandolapril 2mg and 4mg capsules are out of stock with an anticipated re-supply date of late December 2024.
2. Other angiotensin-converting enzyme (ACE) inhibitors remain available.

#### **Advice and Actions**

3. Prescribers should:
  - Not initiate new patients on trandolapril 2mg and 4mg capsules until the shortage has resolved.
  - Where patients have insufficient supplies to last until the re-supply date, consider prescribing an alternative ACE inhibitor, taking into account the indication for use, treatment history, and local guidance/formularies; and
  - Monitor patients within a month after switching to ensure their blood pressure remains controlled and the new agent is tolerated. Advise patients that if they experience dizziness or light-headedness after the change in medication, they should seek medical advice.

## **Additional Information**

#### **Clinical Information**

4. Trandolapril is licensed for treatment of mild or moderate arterial hypertension and left ventricular dysfunction after acute myocardial infarction.
5. There is limited data on dose equivalence of ACE inhibitors. Table 1 presents the licensed adult doses of some of the commonly used ACE inhibitors in hypertension. It is NOT a dose conversion table but provides a guide to the dose ranges that may help in dose selection when switching agents. Blood pressure should be monitored after the switch, as well as patient tolerability, in case the dosing needs to be adjusted. The SmPCs should be consulted for full prescribing details.

\*<https://www.nss.nhs.scot/media/1842/medicine-supply-alert-notices-definitions-of-classifications-21-october-2019.pdf>

6. Table 1: ACE inhibitor dosing in hypertension

ACE Inhibitors	Low starting dose*	Usual starting dose	Maintenance low dose	Maintenance high dose	Maximum dose
<a href="#">Trandolapril</a> **	0.5mg once daily	0.5mg once daily	1mg once daily	2mg once daily	4mg once daily
<a href="#">Enalapril</a>	2.5mg once daily	5mg once daily	10mg once daily	20mg once daily (or 10mg twice daily)	40mg once daily (or 20mg twice daily)
<a href="#">Lisinopril</a> **	2.5mg to 5mg once daily	10mg once daily	20mg once daily	40mg once daily	80mg once daily
<a href="#">Perindopril erbumine</a> / <a href="#">Perindopril tertbutylamine</a>	2mg once daily	4mg once daily	4mg once daily	8mg once daily	8mg once daily
<a href="#">Ramipril</a> **	1.25mg once daily	2.5mg once daily	5mg once daily	10mg once daily	10mg once daily
<p>*Lower starting doses are required for people who are more prone to the adverse effects of ACE inhibitors (such as elderly, frail, or renally impaired people, or people on low-dose diuretics).</p> <p>**Licensed for left ventricular dysfunction after acute myocardial infarction (target maintenance dose): Trandolapril- dose increased progressively to maximum of 4 mg daily, lisinopril 10mg once daily, ramipril 2.5 mg to 5 mg twice a day.</p>					

Links to further information

[SmPC Trandoapril 2mg and 4mg capsules](#)  
[BNF Trandolapril](#)  
[BNF ACE inhibitors](#)  
[NICE CKS guidance on hypertension](#)

### Specialist Pharmacy Service (SPS) website

- The UK Department of Health and Social Care (DHSC) in conjunction with SPS have launched an online Medicines Supply Tool, which provides up to date information about medicine supply issues. To access the online Medicines Supply Tool you need to register with the [SPS website](#). Registration for access to the website is available to UK healthcare professionals and organisations providing NHS healthcare. The tool is located under the Tools tab and then click on the Medicines Supply option.
- We encourage prescribers, pharmacy professionals, and pharmacy procurement leads in Scotland to register with the SPS website and use its Medicine Supply Tool to stay up to date concerning medicines supply disruptions. Please be aware that while medicines supply issues will appear on the SPS website, some of the recommended actions may not always be appropriate / relevant within the Scottish context.

### Enquiries

- Enquiries from Health Boards or healthcare professionals should be directed in the first instance to [PharmacyTeam@gov.scot](mailto:PharmacyTeam@gov.scot) (primary care) or [NSS.NHSSMedicineShortages@nhs.scot](mailto:NSS.NHSSMedicineShortages@nhs.scot) (secondary care).