

Guidance from the Diabetes MCN Prescribing Subgroup on managing the GLP1 shortage

Summary:

There are ongoing supply problems with very limited availability of glucagon-like peptide receptor agonists (GLP-1 RAs) both oral and IV formulations. Supply is not expected to return to normal until at least mid-2024.

Actions recommended for clinicians are as follows:

GLP1-RAs should only be prescribed for their licensed indication.

Avoid initiating people with type 2 diabetes on GLP1-RA's for the duration of this shortage.

Review the need for prescribing a GLP1-RA and stop treatment if no longer required due to not achieving desired clinical effect as per NICE CG28.

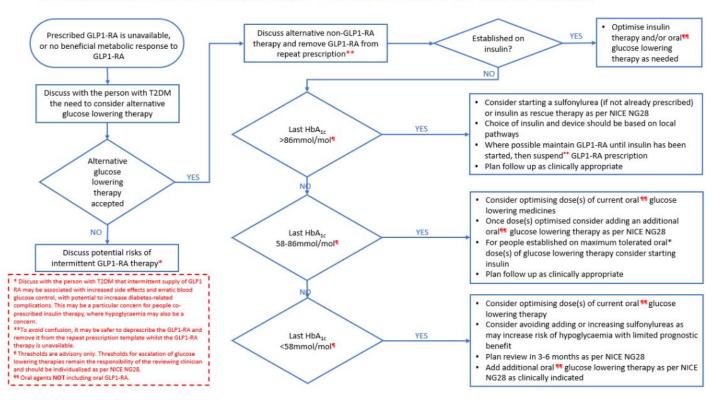
Avoid switching between brands of GLP-1RAs including between injectable and oral forms.

Where a higher dose preparation of GLP-1RA is not available do not substitute by doubling up a lower dose preparation.

Where an alternative glucose lowering therapy needs to be considered aim to maximise all tolerated oral therapies and encourage diet and lifestyle advice and support to maintain glycaemic control and avoid weight gain. (See weight management advice on Refhelp)

A flowchart summarising the actions required is shown below:

Selecting Alternative Glucose Lowering Therapy for People with T2DM when GLP1-RAs are unavailable



Note: Symptomatic hyperglycaemia may indicate clinical need for insulin therapy. If in doubt, discuss with specialist clinician. Symptoms of hyperglycaemia include polyuria, polydipsia, weight loss and fatigue. Think 4Ts – Thirst, Toilet, Thinner, Tired.



If further advice is required please see the following:

For existing patients:

SJH - <u>Clinadvdiabetes@nhslothian.scot.nhs.uk</u> WGH - <u>WGH.DiabeticAdvice@nhslothian.scot.nhs.uk</u> RIE- <u>RIE.DiabetecAdvice@nhslothian.scot.nhs.uk</u>

For new referrals:

SCI Gateway - RIE/WGH/SJH/ELCH/LCTC - diabetes - advice only

Kind regards, NHS Lothian Diabetes MCN