



Dear Practices,

You would have received SWYFT guidance (attached) regarding the **SHORTAGES OF MEDICINES FOR ATTENTION DEFICIT HYPERACTIVITY DISORDER (ADHD) AUTUMN 2023**.

The SWYFT guidance is comprehensive, offering information tailored to patients, primary care clinicians, and secondary care clinicians. We emphasise the importance of clinicians focusing on and thoroughly reviewing the section "HEALTHCARE PROFESSIONALS IN PRIMARY CARE QUESTIONS." It provides essential details for primary care clinicians, ensuring you have relevant and practical information.

Key Information:

Reason for Shortage: Manufacturing challenges and an unexpected surge in global demand have disrupted the supply chain.

Affected ADHD Products:

Methylphenidate (prolonged-release capsules and tablets)

Lisdexamfetamine capsules (Elvanse®)

Atomoxetine capsules and Strattera 4mg/1ml oral solution

Guanfacine prolonged-release tablets (Intuniv®)

Refer to the SWYFT guidance for a detailed list of affected preparations.

Timeline: Supply disruptions will be resolved between October and December 2023.

Impacted Services in Primary Care: These medications are often prescribed by GPs under a shared care agreement.

Methylphenidate

A primary concern is the transition from brand to generic methylphenidate preparations, which can be complex. Clinicians must fully understand the intricacies involved. The local Calderdale Cares Partnership (CCP) has offered support through the CCP practice (NECS) pharmacy team to facilitate this process. To mitigate risks, please direct all inquiries regarding methylphenidate to the CCP (NECS) pharmacy team. They are well-equipped to provide the necessary guidance and direction.

Role of Primary Care for Guanfacine Patients:

The shared care agreement assigns post-dose adjustment monitoring to the specialist provider. While we initially suggested that specialists contact these patients directly, given the circumstances, a collaborative approach is advisable:

- **SWYFT's Responsibility:** Actively identify and monitor these patients.
- **General Practices' Responsibility:** Remain informed and ensure no guanfacine patient is missed, using the list provided by the CCP (NECS) pharmacy team. They can go on to verify if these patients have received communication from their specialist teams.

In situations where clinicians have questions or face dilemmas regarding ADHD medications,

- **Medication Management:** Consult the CCP (NECS) practice pharmacy teams.
- **Medical Concerns or Complexities:** Refer or guide patients to contact their specialist teams (ADHD/CAMHS). Relevant contact details can be found in the SWYFT guidance.

It is important to note that any changes to alternative medications require individually tailored management plans.

These interventions should only be conducted by specialist ADHD and CAMHS teams.

While Calderdale LMC were not consulted in drafting the SWYFT guidance or subsequently any opportunity to comment, our intention in sending out this letter is to clarify and offer actionable direction. Our aim is to ensure patient care remains at its best and to alleviate any undue burden on practices.

We hope our letter effectively aids you during these challenging times.

Warm regards,

Calderdale LMC Executive