



30 June 2023

Hull City Council,
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HU1 1HJ

Sent Via Email To:

- ICB Place Heads of Primary Care
- ICB Place Directors
- ICB Heads of Primary Care
- All GP Practices in HNY – via Practice Managers, Pharmacy Teams and GP Prescribing Leads.
- Pharmaceutical, general ophthalmic and dental services colleagues (via Primary Care Teams)
- NHS Humber and North Yorkshire Integrated Care Board
- Humber and North Yorkshire Community Provider Collaborative
- Humber and North Yorkshire Clinical and Care Professional Forum
- Local Medical Committees – YORLMC and Humberside LMC
- Community Pharmacy North Yorkshire
- Community Pharmacy Humber

Dear colleagues

GLP- 1 Receptor Agonist Shortage

There is an ongoing national shortage of glucagon like peptide-1 receptor agonists (GLP-1 RAs) used in the management of Type 2 Diabetes (T2DM). This situation is not expected to resolve until into mid-2024. Supplies of some GLP-1 RA preparations may be intermittent or exhausted within this time frame. Although other GLP-1 RA therapies may be available it is possible there will be insufficient additional capacity to accommodate switching everyone with T2DM currently prescribed an affected GLP-1 RA to an alternative brand. **Please see attached letter from the Department of Health and Social Care (27 June 2023) for more information.**

You can also read the national guidance to help start considering actions around this shortage at: [Joint PCDS and ABCD guidance: GLP-1 receptor agonist national shortage - PCDS \(pcdsociety.org\)](https://www.pcdsociety.org/agonist-national-shortage-pcds)

The SPS website will have a dedicated GLP1 RA page:
<https://www.sps.nhs.uk/articles/prescribing-available-glp-1-receptor-agonists/>
Key messages from the MSN and PCDS/ABCD Guidance

- GLP-1 RAs should only be prescribed for their licensed indication.
- Avoid initiating people with type 2 diabetes on GLP-1 RAs for the duration of

- the GLP1-RA national shortage.
- Review the need for prescribing a GLP-1 RA agent and stop treatment if no longer required due to not achieving desired clinical effect as per [NICE Guidance 28](#)
 - Avoid switching between brands of GLP-1 RAs, including between injectable and oral forms.
 - Where a higher dose preparation of GLP-1 RA is not available, do not substitute by doubling up a lower dose preparation.
 - Where GLP-1 RA therapy is not available, proactively identify patients established on the affected preparation and consider prioritising for review based on the criteria below.
 - Where an alternative glucose lowering therapy needs to be considered, see links to MSN and guidance above.
 - Where there is reduced access to GLP-1 RAs, support people with type 2 diabetes to access structured education and weight management programmes where available.
 - Order stocks sensibly in line with demand during this time, limiting prescribing to minimise risk to the supply chain whilst acknowledging the needs of the patient.

NHS Humber and North Yorkshire are in the process of implementing a working group with all key stakeholders to provide regional guidance and to manage these ongoing supply problems.

The Medicines Management/Optimisation Teams are currently working on SystemOne and EMIS patient searches to help identify patients in priority groups and we will share searches with practices once finalised.

For further local information please contact your local medicines optimisation teams:

- For queries relating to North and North-East Lincolnshire Places contact: necsu.moqueries@nhs.net

- For queries relating to Hull and East Riding Places contact: NECSU.PrescribingQueries@nhs.net

- For queries relating to North Yorkshire and York Places contact: hnyicb-ny.rxline@nhs.net

Yours sincerely

Dr Tom Milligan & Dr Vinod Kumar

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and North Yorkshire ICB**

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