

Guide for alternative inhalers during stock shortages related to Coronavirus (COVID-19)

There are ongoing issues with obtaining prescriptions for inhalers due to an increase in demand for inhaler prescriptions. Although this is anticipated to resolve over the coming weeks it may be necessary to consider prescribing alternative inhalers during this period. This guide recommends suitable alternatives. When reviewing prescriptions requests for inhalers please consider the following points:

- Do not increase the number of inhalers prescribed on regular repeat or acute prescriptions
- Ensure that prescriptions are not issued significantly earlier than they should be
- Where possible issue only 1-month supply
- Inhalers should be prescribed by brand name to reduce the risk of the wrong inhaler being supplied to the patient

If a patient's usual inhaler is unavailable, the chart below gives advice on suitable alternatives. If an alternative inhaler is prescribed please ensure that the following has been done:

- The alternative inhaler is supplied as an acute prescription
- If the strength of the inhaler is being changed ensure the patient is made aware that they need to take a different number of doses
- If the device is changed ensure that the patient is provided with information on how to use the alternative device. Websites that provide useful videos and/or leaflets on how to use different inhalers devices can be found in the useful links section
- If an alternative corticosteroid inhaler is required please refer to CCG guidance for suitable alternatives and switch to a similar strength inhaler based on the NICE table of inhaled corticosteroid doses (see useful links)

Original brand	1 st line option – change brand (same device)	2 nd line option – change strength	3 rd line option – change device	4 th line option – change to different drug
Salbutamol	Prescribe generically	Not appropriate	Change to Easi-breathe NEED TO COUNSEL PATIENT ON USE OF DIFFERENT DEVICE	Not appropriate
Clenil Modulite pMDI - 50, 100, 200, 250	Change to Soprobac pMDI - keep the inhaler strength and dose the same Soprobac 200 & Soprobac 250 are NOT licensed for children*	Change to a different strength of Clenil or Soprabec - adjust the number of doses accordingly - in preference increase the number of doses given Clenil 200 & Clenil 250 are NOT licensed for under 16 yrs*	No alternative devices	Change to QVAR or Kelhale - HALVE THE STRENGTH OF THE INHALER - QVAR pMDI & Autohaler are NOT licensed for under 5yrs* - QVAR Easi-breathe NOT licensed for under 12yrs* - Kelhale inhalers are NOT licensed for under 18yrs*

*All information regarding product licensing is based on the manufacturers Summary of Product Characteristics for each product at the time of publishing

Original brand	1 st line option – change brand (same device)	2 nd line option – change strength	3 rd line option – change device	4 th line option – change to different drug
QVAR pMDI, Easi-breathe & Autohaler - 50, 100	Change to Kelhale pMDI - keep the inhaler strength and dose the same Kelhale inhalers are NOT licensed for under 18yrs*	Change to a different strength of QVAR or Kelhale - adjust the number of doses accordingly - in preference increase the number of doses given	Change to QVAR Easi-breathe or autohaler - keep the strength and dose the same where possible NEED TO COUNSEL PATIENT ON USE OF DIFFERENT DEVICE QVAR pMDI & Autohaler NOT licensed for under 5yrs* QVAR Easi-breathe NOT licensed for under 12yrs*	Change to Clenil or Soprobech - DOUBLE THE STRENGTH OF THE INHALER Clenil 200 & Clenil 250 are not licensed for under 16yrs* Soprobech 200 & Soprobech 250 are NOT licensed for children*
Flixotide Evohaler pMDI - 50, 125, 250 Accuhaler - 50, 100, 250, 500	No alternative brands	Change to a different strength of Flixotide - adjust the number of doses accordingly - NB in preference increase the number of doses	Change to Flixotide Accuhaler - keep the strength and dose the same where possible NEED TO COUNSEL PATIENT ON USE OF DIFFERENT DEVICE	Change to alternative ICS inhaler at an equivalent dose - see CCG guidance for an alternative steroid inhaler
Budesonide Easyhaler Easyhaler - 100, 200, 400	No alternative brands with the same device	Change to a different strength of budesonide easyhaler and adjust the number of doses accordingly NB in preference increase the number of doses	Change to Budelin Novolizer or Pulmicort Turbohaler - keep the strength and dose the same where possible NEED TO COUNSEL PATIENT ON USE OF DIFFERENT DEVICE Budelin Novolizer NOT licensed for under 6yrs* Pulmicort Turbohaler NOT licensed for under 5yrs*	Change to alternative ICS inhaler at an equivalent dose - see CCG guidance for an alternative steroid inhaler

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Original brand	1 st line option – change brand (same device)	2 nd line option – change strength	3 rd line option – change device	4 th line option – change to different drug
Fostair pMDI – 100/6, 200/6 NEXThaler – 100/6, 200/6	No alternative brands	Not appropriate	Change to Fostair NEXThaler - keep the strength and dose the same NEED TO COUNSEL PATIENT ON USE OF DIFFERENT DEVICE	Change to alternative ICS + LABA inhaler at an equivalent dose see CCG guidance for alternative steroids
Flutiform pMDI – 50/5, 125/5, 250/10 K-haler – 50/5, 125/5	No alternative brands	Not appropriate	Change to K-haler - keep the strength and dose the same NEED TO COUNSEL PATIENT ON USE OF DIFFERENT DEVICE	Change to alternative ICS + LABA inhaler at an equivalent dose see CCG guidance for alternative steroids
Symbicort Turbohaler – 100/6, 200/6, 400/12 pMDI – 200/6	No alternative brands in the same device	Not appropriate	Change to Symbicort pMDI 200/6 where the strength is the same - keep the dose the same Change to Fobumix or DuoResp Spiromax Symbicort 100/6 equivalent to: - Fobumix 80/4.5 Symbicort 200/6 equivalent to: - Fobumix 160/4.5 - DuoResp Spiromax 160/4.5 Symbicort 400/12 equivalent to: - Fobumix 320/9 - DuoResp Spiromax 320/9 NEED TO COUNSEL PATIENT ON USE OF DIFFERENT DEVICE	Change to alternative LABA component - Fobumix (- DuoResp Spiromax (budesonide & formoterol) Change to alternative ICS + LABA inhaler at an equivalent dose see CCG guidance for alternative steroids

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Original brand	1 st line option – change brand (same device)	2 nd line option – change strength	3 rd line option – change device	4 th line option – change to different drug
RelvarEllipta Ellipta – 92/22, 184/22	No alternative brands	Not appropriate	No alternative devices	Change to alternative ICS + LABA inhaler at an equivalent dose see CCG guidance for alternative steroids
Seretide pMDI – 50, 125, 250 Accuhaler – 100, 250, 500	Change to one of the following brands (order of cost) - Sereflo (18yrs+) - AirFluSal (18yrs+) - Combisal (4yrs+) - Sirdupla (18yrs+) - keep the inhaler strength and dose the same Sereflo 125 is NOT licensed for use with a volumatic/aerochamber*	Not appropriate	Change to Seretide Accuhaler - keep the strength and dose the same NEED TO COUNSEL PATIENT ON USE OF DIFFERENT DEVICE	Change to alternative ICS + LABA inhaler at an equivalent dose see CCG guidance for alternative steroids

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Useful links:

- Websites with inhaler device training
 - www.rightbreathe.com - videos
 - <https://www.asthma.org.uk/advice/inhaler-videos/> - videos
 - <https://www.neessexccg.nhs.uk/inhalers-and-you> - videos & leaflets
- CCG guidance
 - Ipswich & East Suffolk CCG & North East Essex CCG
<http://www.ipswichandeastsuffolkccg.nhs.uk/GPpracticememberarea/Clinicalarea/Medicinesmanagement/Medicalconditions/RespiratoryAsthmaCOPD.aspx>
 - West Suffolk CCG
<https://www.westsuffolkccg.nhs.uk/clinical-area/prescribing-and-medicines-management/formularies-and-guidelines/>
- NICE Inhaled corticosteroid dose equivalency for asthma
<https://www.nice.org.uk/guidance/ng80/resources/inhaled-corticosteroid-doses-pdf-4731528781>