

BLUE information sheet

DRUG NAME: ACETYLCHOLINESTERASE-INHIBITORS AND MEMANTINE

(Donepezil, galantamine, rivastigmine and memantine)

INDICATION COVERED: Alzheimer's disease (AD)

CWS Local Health Economy formulary classification - Blue

Blue (initiation) – Initiation by a secondary care clinician or specialist nurse who holds a recognised prescribing qualification and who is making recommendations within his/her area of competence; following secondary care initiation then suitable for primary care prescribing.

- These drugs require specialist knowledge for assessment and / or equipment for patient selection but have no specialist ongoing monitoring requirements.
- No specialist knowledge or equipment is required for ongoing prescribing or monitoring although the provision of additional information may be made where deemed necessary.

This information sheet does not replace the Summary of Product Characteristics (SPC), which should be read in conjunction with this guidance. Prescribers should also refer to the appropriate paragraph in the current edition of the BNF.

RESPONSIBILITIES and ROLES

Consultant / Specialist responsibilities	
1	Confirmation of diagnosis of AD and identification of suitable patients in line with NICE TA 217 following full assessment.
2	To ensure baseline monitoring of MMSE is performed and psychiatric assessment using appropriate rating scales plus any additional relevant investigations e.g. CT and MRI scan.
3	Discussion of options for treatment including risks, benefits and compliance with patients and their carers, outline possible side effects.
4	Initiation of appropriate therapy having considered interactions with existing therapy(s), including issuing initial prescription(s) until the treatment has been demonstrated to be tolerated and clinically effective (minimum of three months) and the request for prescribing has been accepted by the GP.
5	To monitor the patient's clinical condition, carer's views, drug tolerability, drug compliance and administer the MMSE once treatment has commenced prior to the transfer of prescribing to the GP.
6	To consider the use of memantine for the symptomatic treatment of people with moderate AD who are intolerant of or have contraindications to acetylcholinesterase inhibitors or with severe AD.
7	Ensure that all newly treated patients (and/or their carers) receive appropriate education, advice and support regarding their drug therapy. This should include written information where appropriate.
8	Give a copy of the information sheet to the patient / carer and explain their roles.
9	Have a mechanism in place to receive rapid referral of a patient from the GP in the event of deteriorating clinical condition and to ensure that clear back up arrangements exist for the GPs to obtain advice and support.

Primary care prescriber responsibilities	
1	Initial referral to secondary care (to include length of time impairment has been noted and how this impacts upon the person, medical history, blood screening and physical examination).
2	To inform the consultant if un-agreeable to the transfer of prescribing.
3	To provide repeat prescriptions once prescribing has transferred and the treatment has been demonstrated to be tolerated and clinically effective (not before initial three months stabilisation period). It is recommended that no more than one month's prescription should be issued at a time. A demonstrable system should be in place to ensure that prescribing is reviewed by the primary care prescriber.
4	To monitor patients overall health and well-being acting upon reports of any adverse drug reactions or interactions.
5	To consider any potential interactions with this therapy before initiating any acute or repeat therapy.
6	To review the appropriateness of ongoing prescribing for patients.
7	Liaise with specialist if any cause for concern or drug discontinued.

Patient's / Carer's role	
1	Ask the consultant / specialist or primary care prescriber for information, if he or she does not have a clear

	understanding of the treatment.
2	Share any concerns in relation to treatment with antidementia medicine.
3	Tell the consultant / specialist or primary care prescriber of any other medication being taken, including supplements, over-the-counter or herbal products.
4	Read the patient information leaflet included with the medication and report any side effects or concerns to the consultant / specialist or primary care prescriber.
5	To inform the primary care prescriber if any health problems arise.
6	To attend appointments.
7	To be aware of side effects and report to their primary care prescriber / specialist any such symptoms.

	Name / position	Telephone	Email
Specialist / Consultant:	Dr Nicola Rogan (Consultant Psychiatrist)	See below	
Alternative specialist (e.g. departmental contact):	West Sussex Memory & Assessment Service South	01903 843 888	
	West Sussex Memory & Assessment Service West	01243 791 883	
Hospital Pharmacy:	Worthing Hospital	01903 285075	pharmacy@wsht.nhs.uk
	St Richards Hospital	01243 831518	
Out of hours (e.g. medical team on call):	N/A	N/A	N/A