

# DRUG SAFETY NOTICE

## Supply Disruption

### DRUG NAME/STRENGTH/FORM:

## Hyoscine Hydrobromide (Scopoderm) 1.5mg Patches

### PROBLEM

- Supplies are unavailable.
- Supplies are expected to return January 2025.
- Hyoscine hydrobromide patches are licensed for the prevention of travel sickness symptoms e.g., nausea, vomiting and vertigo and used off-label for the management of hypersalivation and drying up respiratory secretions.

### ADVICE / ALTERNATIVE

#### Other hyoscine hydrobromide preparations

- Hyoscine hydrobromide (Kwells) 150microgram and 300microgram tablets can be used off label. They are taken orally, sucked, or chewed.
- In patients with swallowing difficulties<sup>1</sup>:
  - 1st choice: Consider giving by parenteral injection.
  - 2nd choice: The tablets may be sucked if the patient is able, and absorbed through the lining of the mouth, although the level of absorption may vary, particularly in patients with little saliva.
  - 3rd choice: The tablets can be dissolved in water for administration via enteral tube, but again, absorption may vary.
  - 4th choice: The injection has been used enterally.

#### Glycopyrronium bromide products

Licensed for the symptomatic treatment of severe sialorrhoea (chronic pathological drooling/hypersalivation) in children and adolescents aged 3 years and older with chronic neurological disorders.

Use in adults is off label.

- Glycopyrronium bromide 1mg and 2mg tablets

- Glycopyrronium bromide 1mg/5ml oral solution
- Glycopyrronium bromide (Sialanar) 2mg/5ml oral solution

#### Prevention of travel (motion) sickness

- Hyoscine hydrobromide (Kwells) 150 and 300microgram tablets
- Promethazine teoclate 25mg tablets
- Promethazine hydrochloride 10mg and 25mg tablets
- Promethazine hydrochloride 5mg/5ml oral solution
- Cinnarizine 15mg tablets

#### **ACTIONS**

- Do not initiate any new patients on hyoscine hydrobromide (Scopoderm) 1.5mg patches.
- Where patients have insufficient supplies to last until the re-supply date, clinicians should:
  - review patients to determine if this is still the most suitable therapy.
  - prioritise any remaining stock of Scopoderm patches for patients who cannot take via oral route
  - consider switching patients who have oral access to an alternative formulation of hyoscine hydrobromide; or if not appropriate, a glycopyrronium bromide preparation.
- Follow the Trust clinical guidance for the management of hypersalivation and motion sickness.
- Refer to the BNF and BNFC for full dosing and prescribing information.

#### **Key Documents**

<a href="#">BNF: hyoscine hydrobromide</a>	<a href="#">SmPC - Scopoderm 1.5mg Patch</a>
<a href="#">BNFC: hyoscine hydrobromide</a>	<a href="#">SmPC: Kwells</a>
<a href="#">BNFc: glycopyrronium bromide</a>	<a href="#">SmPC glycopyrronium tablets</a>
<a href="#">BNF: Antimuscarinic drugs</a>	<a href="#">SmPC glycopyrronium liquid</a>
<a href="#">CKS: hypersalivation</a>	<a href="#">SmPC glycopyrronium liquid (Sialanar)</a>
<a href="#">CKS: Palliative care - secretions: Noisy respiratory secretions at the end of life</a>	
<a href="#">Hyoscine hydrobromide patches to reduce saliva production</a>	
<sup>1</sup> <a href="https://access.newtguidelines.com/H/Hyoscine%20hydrobromide.html">https://access.newtguidelines.com/H/Hyoscine%20hydrobromide.html</a>	

**FOR FURTHER INFORMATION CONTACT YOUR WARD BASED PHARMACY  
TEAM  
OR**

**THE PHARMACY DEPARTMENT (CITY ext.5263; SANDWELL ext.3783).  
OUT OF HOURS CONTACT THE ON-CALL PHARAMCIST**

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