



Medicine Supply Notification

MSN/2024/004

Tegretol[®] (carbamazepine) 200mg and 400mg prolonged release tablets

Tier 2 – medium impact*

Date of issue: 10/01/2024

Link: [Medicines Supply Tool](#)

Summary

- Tegretol[®] (carbamazepine) 200mg prolonged release (PR) tablets are out of stock until mid-January 2024. Once back in stock, supplies can support the shortage of Tegretol[®] (carbamazepine) 400mg PR tablets.
- Tegretol[®] (carbamazepine) 400mg PR tablets remain available but cannot support an uplift in demand and will be out of stock from w/e 12th January until w/c 29th January 2024.
- Tegretol[®] (carbamazepine) immediate release (IR) tablets remain available and can support increased demand.
- Curatil[®] (carbamazepine) 200mg PR tablets remain available but can only support increased demand in secondary care.

Actions Required

Prescribers should not initiate new patients on Tegretol[®] PR tablets until the shortages have resolved.

Where patients have insufficient supply of Tegretol[®] 200mg PR tablets to last until the re-supply date, clinicians should:

- advise patients on a dose regimen comprising of Tegretol[®] 200mg PR and Tegretol[®] 400mg PR tablets who still have sufficient supplies of the 400mg PR strength to last until the resupply dates, to use half a 400mg PR tablet to make up 200mg doses;
- consider prescribing Tegretol[®] IR tablets, taking into account the total daily dose, as dose frequency for patients on high doses may need to be adjusted to accommodate the different release profile of IR tablets (see Supporting Information);
- consider prescribing Curatil[®] 200mg PR tablets noting that this option is available only in **secondary care** (see Supporting Information); and
- if the above options are not considered appropriate, advice should be sought from specialists on alternative management options.

For the shortage of Tegretol[®] 400mg PR tablets, where patients have insufficient supplies to last until the re-supply date, clinicians should:

*Classification of Tiers can be found at the following link:

<https://www.england.nhs.uk/publication/a-guide-to-managing-medicines-supply-and-shortages/>

- consider prescribing Tegretol® 200mg PR tablets to make up the required dose when this is back in stock.

Patients should be monitored after a switch in brand or formulation for loss of seizure control and adverse effects.

Supporting Information

Clinical Information

Carbamazepine is a [category 1 anti-epileptic drug](#). Different formulations of carbamazepine may vary in bioavailability and therefore patients should be monitored after any switch in brand for loss of seizure control and adverse effects.

Tegretol® PR tablets are administered at the same total daily dose as Tegretol® IR dosage forms. Tegretol® PR tablets are usually administered in two divided doses and Tegretol® IR tablets in two or three divided doses. Tegretol® PR tablets are scored and are licensed to be halved to enable flexibility of dosing. When starting treatment with Tegretol® PR, 100-200mg once or twice daily is recommended. This may be followed by a slow increase in dosage until the best response is obtained, often 800-1200mg daily. In some instances, 1600mg or even 2000mg daily may be necessary.

The SmPC notes that the Tegretol® PR formulation shows about 15% lower bioavailability than IR preparations due mainly to the reduction in peak plasma levels. In practice it may be difficult to adjust for this difference in bioavailability with available formulations unless the patient is on high doses, so a switch to the same total daily dose of IR tablets could be considered, and dose adjustment can be made depending on clinical response.

A change in dose frequency from a twice daily regimen of PR formulation to a three or four times daily regimen of IR tablets may be required for doses of PR formulation at or above 400mg twice daily. This will depend on factors such as indication, dose, adherence to treatment, previous side effects, and available tablets. As a switch in treatment may cause anxiety in some patients, it is important to provide reassurance, and counselling on any change in dose regimen, and to seek advice if they experience loss of seizure control and/or side effects after switching.

Links to further information

[SmPC Tegretol® 200mg prolonged release tablets](#)

[SmPC Tegretol® 400mg prolonged release tablets](#)

[SmPC Tegretol® 100mg tablets](#)

[SmPC Tegretol® 200mg tablets](#)

[SmPC Tegretol® 400mg tablets](#)

[SmPC Curatil® 200mg prolonged release tablets](#)

[BNF Carbamazepine](#)

[BNF Epilepsy](#)

[MHRA anti-epileptic advice on switching products](#)

Enquiries

If you have any queries, please contact DHSCmedicinesupplyteam@dhsc.gov.uk.