



Medicine Supply Notification

MSN/2024/071

Erythromycin 250mg gastro-resistant tablets

Tier 2 – medium impact*
Date of issue: 12/06/2024
Link: Medicines Supply Tool

Summary

- Erythromycin 250mg tablets are currently out of stock until w/c 24th of June 2024.
- Erythromycin 500mg tablets remain available but are unable to support an increase in demand.
- Erythromycin oral suspensions remain available but are unable to support an increase in demand.
- Azithromycin 500mg tablets remain available and will be able to support increased demand.
- Clarithromycin 250mg and 500mg tablets remain available and will be able to support increased demand.
- The actions on the previously issued MSN/2024/060 for clarithromycin 125mg/5ml and 250mg/5ml oral suspension do not impact the actions specified here.

Actions Required

Where supply of erythromycin 250mg tablets are not available, clinicians should:

- review patients and consider prescribing azithromycin 500mg tablets or clarithromycin 250mg/ 500mg tablets if clinically appropriate, ensuring the patient/parent/carer is counselled on the appropriate dose and course length (see Supporting information);
- for pregnant women, consider prescribing azithromycin as the preferred alternative to erythromycin.
 Where azithromycin is not considered appropriate or unavailable, consider prescribing clarithromycin;
- where azithromycin or clarithromycin tablets are not suitable, consider prescribing an alternative antimicrobial as appropriate, depending on the indication, pregnancy status of the patient, and local prescribing guidelines;
- consider prescribing unlicensed products only where licensed alternatives are not appropriate, lead times vary; and
- if the above options are not considered appropriate, advice should be sought from specialists on alternative management options.

Supporting information

Clinical Information

Erythromycin is a macrolide antibiotic. Macrolides for some indications are considered an alternative to penicillin for penicillin-allergic patients.

Erythromycin, clarithromycin and azithromycin have a similar spectrum of antibiotic activity and similar side effect profile.

Macrolide use in pregnancy

Macrolide use in pregnancy should be reserved for indications where there are no suitable alternatives with adequate pregnancy safety data and should only be used if the benefit of treatment is expected to outweigh any small increased risks which may exist.

Erythromycin is the preferred choice, followed by azithromycin and clarithromycin. Order preference is due to experience with the drugs in pregnancy rather than any signal of additional harm (<u>UKTIS: Macrolides in pregnancy</u>).

Table 1. Equivalent dosing regimens of alternative macrolides for prescribed dosing regimens of erythromycin

Indication	Erythromycin	Clarithromycin	Azithromycin
Treatment doses	250mg 4 times a day	250mg twice daily	500mg once daily
	500mg twice daily	250mg twice daily	500mg once daily
	500mg 4 times a day	500mg twice daily	500mg once daily
	1,000mg twice daily	500mg twice daily	500mg once daily
	1,000mg 4 times a day	500mg twice daily (ceiling dose)	500mg once daily
Prophylaxis doses	250mg twice daily	125mg twice daily	Seek specialist advice
	500mg twice daily	250mg twice daily	Seek specialist advice
Duration		Use same duration as erythromycin.	If erythromycin treatment is for 5 days or 7 days, then the equivalent for azithromycin is 3 days.

Note: The equivalent doses stated may not be appropriate for patients with gastro-intestinal stasis as an indication.

Please refer to the links below for further information:

SmPC Erythromycin 250mg GR tablets

SmPC Azithromycin (emc)

SmPC Azithromycin (MHRA)

SmPC Clarithromycin (emc)

SmPC Clarithromycin (MHRA)

BNF Erythromycin

BNF Macrolides

UKTIS: Macrolides in pregnancy

Public Health England: Guidelines for the Public

Health Management of Pertussis in England

BUMPS: Macrolides in pregnancy

BUMPS: Azithromycin BUMPS: Clarithromycin

Guidance on ordering and prescribing unlicensed imports

The following specialist importers have confirmed they can source unlicensed erythromycin 250mg gastroresistant tablets (please note there may be other companies that can also source supplies):

Alium Medical

Any decision to prescribe an unlicensed medicine must consider the relevant guidance and NHS Trust or local governance procedures. Unlicensed imports do not undergo any central quality assessment or suitability evaluation. Therefore, any import must be locally assessed in line with local unlicensed medicines processes.

Please see the links below for further information:

- <u>The supply of unlicensed medicinal products</u>, Medicines and Healthcare products Regulatory Agency (MHRA)
- <u>Professional Guidance for the Procurement and Supply of Specials</u>, Royal Pharmaceutical Society
- Prescribing unlicensed medicines, General Medical Council (GMC),

When prescribing a product that is not licensed in the UK due to a supply issue with the licensed alternative prescribers must indicate on the FP10 prescription that an unlicensed product is required. This can be done in one of the following two ways:

Electronic prescriptions – if the required unlicensed product is shown on electronic prescribing systems, GPs should select:

• Erythromycin 250mg tablets (imported)

Paper prescriptions – where the unlicensed product is not shown on electronic prescribing systems, GPs should use a paper prescription and annotate with the following wording: "**special order**".

Enquiries

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