



Medicine Supply Notification

MSN/2026/021

Chlordiazepoxide 5mg and 10mg capsules

Tier 2 – medium impact*

Date of issue: 30/03/2026

Link: [Medicines Supply Tool](#)

Summary

- Chlordiazepoxide 5mg and 10mg capsules (Viatris) are out of stock until mid-July 2026.
- Chlordiazepoxide 10mg capsules (Kent Pharma) have been discontinued.
- Chlordiazepoxide 5mg capsules (Kent Pharma) will be discontinued from 31 March 2026.
- Chlordiazepoxide 5mg and 10mg capsules (Crescent) remain in stock although there are insufficient 5mg capsules to meet the full demand.
- Alternative oral benzodiazepines remain available.

Actions Required

Clinicians treating alcohol withdrawal should:

- not initiate new patients on chlordiazepoxide 5mg and 10mg capsules unless there is sufficient supply available for the entire withdrawal treatment plan;
- reserve stock of chlordiazepoxide 5mg and 10mg capsules for patients who are part way through an alcohol detox to enable them to complete the detox in line with the treatment plan;
- check if clinical protocols need revising to include use of diazepam and ensure teams become familiar with prescribing the regimen (see Supporting Information), and
- if necessary, seek advice from specialist alcohol treatment services for more complex cases, and in the presence of significant or suspected impairment of liver function, consult specialists experienced in the management of patients with liver disease for advice on choice of benzodiazepine.

Clinicians using chlordiazepoxide to treat anxiety should:

- not initiate new patients on chlordiazepoxide 5mg and 10mg capsules;
- review existing patients and offer them, with support, the opportunity to taper down and discontinue treatment; and
- seek advice from specialist mental health team if there is difficulty managing the discontinuation of chlordiazepoxide.

Supporting information

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

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

Clinical Information

Chlordiazepoxide and diazepam are licensed for short term use (2-4 weeks only) for the symptomatic relief of anxiety that is severe, disabling or subjecting the individual to unacceptable distress occurring alone or in association with insomnia or short-term psychosomatic, organic or psychotic illness. They are also licensed for treatment of muscle spasm of varied aetiology and symptomatic relief of acute alcohol withdrawal.

Chlordiazepoxide use as an anxiolytic

- if there are patients who have been treated for anxiety, they should be reviewed and deprescribing discussed.
- For chronic users of chlordiazepoxide who have agreed to discontinue treatment, a switch to equivalent dose of diazepam and a slow withdrawal is usually recommended ([see CKS guidance](#)).

Alcohol withdrawal

In alcohol withdrawal, a long-acting benzodiazepine, such as chlordiazepoxide or diazepam, is recommended to attenuate alcohol withdrawal symptoms. Refer to NICE guidance on alcohol use disorders for managing harmful drinking and physical complications. UK clinical guidelines for alcohol treatment contains [example regimens](#) in section 10.7 for planned, fixed-dose alcohol withdrawal (moderate dependence) using chlordiazepoxide and diazepam.

Links to further information

- [SmPC: Chlordiazepoxide](#)
- [SmPC: Diazepam tablet](#)
- [BNF: Alcohol dependence](#)
- [NICE guidance \(CG15\): Alcohol-use disorders: diagnosis, assessment and management of harmful drinking \(high-risk drinking\) and alcohol dependence](#)
- [NICE guidance \(CG110\): Alcohol-use disorders: diagnosis and management of physical complications](#)
- [Clinical guidelines for alcohol treatment - Guidance - GOV.UK](#)
- [BNF: Hypnotics and anxiolytics](#)
- [BNF: Benzodiazepine dose equivalences](#)
- [NICE guidance \(CG113\): Generalised anxiety disorder and panic disorder](#)
- [CKS: Benzodiazepine and z-drug withdrawal](#)
- [SPS: Oral benzodiazepines and choosing equivalent doses](#)
- [The Maudsley Deprescribing Guidelines \(subscription required\)](#)
- [Detainees with substance use disorders in police custody: Guidelines for clinical management \(5th edition\) - FFLM](#)
- [Ashton manual](#)

Enquiries

Enquiries from NHS Trusts in England should in the first instance be directed to your Specialist Pharmacy Service Regional Pharmacy Procurement Specialist (SPS RPPS), who will escalate to national teams if required:

Region	Lead SPS RPPS Name and Email	Associate SPS RPPS Name and Email
Midlands	Andi Swain andi.swain@nhs.net	Dav Manku Dav.Manku@uhb.nhs.uk

East of England	James Kent james.kent@nhs.net	Tracy McMillan tracy.mcmillan2@nhs.net
London	Jackie Eastwood j.eastwood@nhs.net	Daniel Johnson Daniel.Johnson@nhs.net
North East and Yorkshire	David Allwood davidallwood@nhs.net	Penny Daynes penny.daynes@nhs.net
North West	Andrew Stewart Andrew.stewart@liverpoolft.nhs.uk	Vacant
South East	Alison Ashman Alison.Ashman@berkshire.nhs.uk	Melanie Renney melanie.renney@berkshire.nhs.uk
South West	Danny Palmer danny.palmer@uhbw.nhs.uk	Natalie Bryson Natalie.Bryson@uhbw.nhs.uk

Scotland

nss.nhssmedicineshortages@nhs.scot

Wales

MedicinesShortages@gov.wales

Northern Ireland

RPHPS.Admin@northerntrust.hscni.net

All other organisations should send enquiries about this notice to the DHSC Medicine Supply Team quoting reference number MSN/2026/021.

Email: DHSCmedicinesupplyteam@dhsc.gov.uk.