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> > 30th March 2020

Circular 012/20

Dear Pharmacy Contractor,

Please find enclosed a letter from Prof Barry, Clinical Lead of the Medicines Management Programme outlining the need to conserve national stocks of Hydroxychloroquine to those already on established regimens for rheumatoid and lupus conditions or where hospital initiated during the COVID 19 emergency.

Your assistance is sought in the conservation of this preparation.

Where you receive a 'de novo' prescription for a patient in the community that is not already on established therapy with your pharmacy, please scan the prescription to <u>pharmacy.response@hse.ie</u> who will contact the prescriber in this regard and revert to you as to whether you can proceed to dispense the product.

Yours faithfully,

Shaun Flanagan Primary Care Reimbursement & Eligibility

Seirbhís SláinteBuilding aNíos FearrBetter Healthá ForbairtService





Re: Ensuring availability of hydroxychloroquine (Plaquenil®)

30 March 2020

Dear Colleagues,

A national guideline in relation to specific antiviral therapy in the clinical management of acute respiratory infection with SARS-CoV-2 (COVID-19) has been developed by the Acute Hospitals Drug Management Programme, and is available at:

https://www.hse.ie/eng/about/who/acute-hospitals-division/drugs-management-programme/guidelines/.

Hydroxychloroquine (Plaquenil[®]) has been identified as having some antiviral activity against SARS-CoV-2. It should only be prescribed for hospital in-patients and according to these guidelines in order to match supply with evidence-based demand. There is no evidence to support prophylactic use and such prescriptions reduce access for patients with evidence-based need.

Hydroxychloroquine has an important role in the on-going management of rheumatoid and lupus conditions of many individuals. Stocks of this medicine are being managed to ensure these individuals will continue to have access to their regular medication in the normal manner. This management is premised on the recommendations of the national guideline that hydroxychloroquine will only be prescribed for COVID-19 positive in-patients by a hospital clinician on a hospital prescription only.

The national stock of hydroxychloroquine for COVID-19 positive patients is therefore being directed to the hospitals, and the community stock is wholly for existing rheumatoid and lupus patients. Prescriptions should not be offered in the community for the management of patients with COVID-19 in the home.

I would ask you in this COVID-19 Public Health Emergency that you would carefully consider alternative therapies before initiating new patients on long-term hydroxychloroquine for rheumatoid and lupus conditions to support continuity of supply, where such alternatives are available.

My thanks for your ongoing support in promoting safe, effective and cost-effective prescribing.

With best wishes,

Michael Brany.

Professor Michael Barry, National Clinical Lead, Medicines Management Programme. www.hse.ie/yourmedicines