

Supply Disruption Alert

SDA/2021/04

Issued: 26 February 2021

Discontinuation of Morphine sulphate (MST CONTINUS®) 20mg, 30mg, 60mg, 100mg and 200mg prolonged release granules for oral suspension

Summary

- All strengths of MST Continus® prolonged release granules for oral suspension are being permanently discontinued during 2021 due to difficulty sourcing a key excipient.
- Alternative morphine presentations, both prolonged release and immediate release, remain available and will be able to support increased demand.
- The following table provides information on anticipated out of stock dates for each presentation.

Product details	Anticipated out of stock date
MST CONTINUS granules for suspension 20mg	Nov-21
MST CONTINUS granules for suspension 30mg	Aug-21
MST CONTINUS granules for suspension 60mg	Jun-21
MST CONTINUS granules for suspension 100mg	May-21
MST CONTINUS granules for suspension 200mg	Jan-22

Action

All healthcare professionals in primary, secondary and specialist healthcare services should:

- not initiate MST Continus® prolonged release granules for oral suspension in patients;
- identify patients currently prescribed MST Continus® prolonged release granules for oral solution and make early contact for a review of treatment;
- review treatment and, if following discussion with the patient ongoing treatment with an opioid is considered necessary and appropriate, switch to an alternative opioid therapy taking into account current morphine dose and the patient's ability to administer alternative formulations (see Supporting Information below);
- counsel patients and their carers on the use of any newly prescribed formulation or opioid; and
- review patients following any switch to ensure pain is controlled and no signs of toxicity are evident (see Advice on Switching and Monitoring below).

Product details

Morphine sulphate (MST CONTINUS®) 20mg, 30mg, 60mg, 100mg and 200mg prolonged release granules for oral suspension (Napp Pharmaceuticals Ltd).

Background

Napp Pharmaceuticals Ltd are sole suppliers of MST CONTINUS® 20mg, 30mg, 60mg, 100mg and 200mg prolonged release granules for oral suspension, which are being discontinued throughout 2021 due to difficulty sourcing a key excipient for the product.

Advice on switching to alternative modified release morphine preparation

Each patient needs to be considered on a case by case basis.

The only modified release morphine preparations that are licensed to be manipulated to enable administration to patients with swallowing difficulties or who are being tube fed, are Zomorph® and MXL® capsules:

- Contents of Zomorph® capsules can be administered directly in semi-solid food (puree, jam, yoghurt) but should not be chewed or crushed. Alternatively, contents can be administered via gastric or gastrostomy tubes of a diameter of more than 16 F.G. with an open distal end or lateral pores, and tube rinsed with 30ml to 50ml of water. The [Handbook of Drug Administration via Enteral Feeding Tubes](#) suggests that the contents of Zomorph capsules can **also** be put down an 8Fr NG tube (unlicensed), however, the granules settle quickly in the syringe and care must be taken to deliver the complete dose. **Please note: Zomorph capsules are a 12 hourly preparation and administered twice daily.**
- MXL® capsules can be opened and the contents sprinkled on to soft cold food. Contents should not be chewed or crushed and cannot be administered down enteral feeding tubes as the granules in the capsules are highly lipophilic and will clump together when in contact with water or saline. **Please note: MXL® capsules are a 24-hour preparation and administered once daily.**
- Other modified release morphine preparations are available but may not be suitable for administering via a tube.
- Further information on administration through feeding tubes can be found in the [Handbook of Drug Administration via Enteral Feeding Tubes](#), which may contain information relating to unlicensed uses, and the SPCs (links below).

Advice on switching and monitoring if other modified release morphine preparations are not appropriate

Switching:

When modified release morphine preparations are not appropriate, clinicians should consider prescribing:

- standard release morphine preparations with as required pain relief provided for breakthrough pain;
- opioid transdermal patches with as required pain relief provided for breakthrough pain (in patients whose pain control has been stabilised); or
- other oral opioids (e.g. oxycodone), if appropriate.

Care should be taken to ensure correct dose conversion when switching from MST Continus suspension (twice daily preparation) to standard release morphine preparations or to alternative opioid products. Equivalence tables should be used as a guide as individual responses may vary. Clinical judgement and review are important before and after switching.

- Further advice is available from following sources:
 - [BNF Prescribing in Palliative Care](#)
 - [UKMi Q&A Opioid Conversion](#)
 - [SPC Zomorph Capsules](#)
 - [SPC MXL Capsules](#)

Monitoring:

Patients should be monitored for signs of opioid toxicity following a change in formulation of their opioid.

Signs of opioid toxicity include but are not limited to:

- Drowsiness and coma
- Decreased respiratory rate
- Pinpoint pupils

Patients and their carers should be counselled on the signs of toxicity and advised to contact their prescriber if concerned. Further information on signs of toxicity can be found [here](#).

Patients should be monitored for lack of pain control and advised to seek advice if pain is not controlled following any switch in therapy.

Distribution

If you are responsible for cascading these alerts in your organisation, these are our suggested distribution lists.

Trusts (NHS boards in Scotland)

CAS and SABS (NI) liaison officers for onward distribution to all relevant staff including:

- | | |
|---|---|
| • A&E consultants | • Intensive care nursing staff (adult) |
| • A&E departments | • Intensive care nursing staff (paediatric) |
| • A&E nurses | • Intensive care units |
| • All departments | • Intensive care, directors of |
| • Cardiologists | • Medical directors |
| • Cardiology departments | • Neonatal nurse specialists |
| • Cardiology nurses | • Neonatology departments |
| • Cardiothoracic surgeons | • Neonatology directors |
| • Cardiothoracic surgery directors | • NHS walk-in centres |
| • Cardiothoracic departments | • Occupational health departments |
| • Chief pharmacists | • Outpatient clinics |
| • Clinical governance leads | • Paediatric intensive care units |
| • Clinical Procurement Specialists | • Paediatric medicine, directors of |
| • Community hospitals | • Paediatric nurse specialists |
| • Community nurses | • Paediatric oncologists |
| • Community children's nurses | • Paediatric surgeons |
| • Day surgery units | • Paediatric surgery, directors of |
| • District nurses | • Paediatric wards |
| • EBME departments | • Paediatricians |
| • Emergency Preparedness and Response officer | • Paediatrics departments |
| • Equipment stores | • Palliative care teams |
| • Equipment libraries and stores | • Paramedics |
| • Haematologists | • Pharmaceutical advisors |
| • Hospital pharmacies | • Pharmacists |
| • Hospital pharmacists | • Purchasing managers |
| • Intensive care medical staff/paediatrics | • Respiratory specialists |
| | • Risk managers |

- School nurses
- Special care baby units
- Supplies managers
- Walk-in centres

NHS England Regional Offices

For onward distribution to all relevant staff including:

- Community pharmacists

General Practice

For onward distribution to all relevant staff including:

- General practitioners
- Nutritional nurse specialists
- General practice managers
- General practice nurses
- Non-medical prescribers in General Practice

Independent distribution**Establishments registered with the Care Quality Commission (CQC) (England only)**

- Adult placement
- Care homes providing nursing care (adults)
- Care homes providing personal care (adults)
- Clinics
- Domiciliary care providers
- Further education colleges registered as care homes
- Hospices
- Hospitals in the independent sector
- Independent treatment centres
- Nursing agencies
- Private medical practitioners

Enquiries

England

Send enquiries about this notice to the DHSC Medicines Supply Team, quoting reference number **SDA/2021/04**

Email: DHSCmedicinesupplyteam@dhsc.gov.uk

Addressees may take copies for distribution within their own organisations