

GP Communication - Sacubitril valsartan
Initiation / Titration Letter

Dear colleague
This patient has been recommended for the initiation of Sacubitril valsartan (Entresto) for treatment of their heart failure.

Name	
Date of birth	
NHS number	
Address	
GP	
Consultant Cardiologist (contact details)	
Specialist Nurse (contact details)	

In accordance with NICE TA 233 the patient meets the following indications for use:

- Chronic stable heart failure – New York Heart Association (NYHA) class II-IV
- Left ventricular systolic dysfunction with ejection fraction <35%
- Stable on an Angiotensin-Converting Enzyme (ACE) inhibitors or Angiotensin II Receptor Blocker (ARB) at a therapeutic dose - see below

ACE inhibitor / ARB	East Kent Minimum Dose Criteria
Enalapril	10mg bd
Lisinopril	10mg od
Perindopril	2mg od
Ramipril	2.5mg bd or 5mg od
Losartan	50mg od
Candesartan	16mg od
Valsartan	160mg od
Irbesartan	150mg od

Please can you prescribe the sacubitril / Valsartan (Entresto) strength indicated as a twice daily dose for a period of 14 / 28 days (nurse to specify duration):

- Entresto 50mg – Sacubitril 24mg / Valsartan 26mg film-coated tablet**
- Entresto 100mg – Sacubitril 49mg / Valsartan 51mg film-coated tablet**
- Entresto 200mg – Sacubitril 97mg / Valsartan 103mg film-coated tablet**

The normal initiation regime is Sacubitril 49mg / Valsartan 51mg bd for 2 – 4 weeks, increasing to Sacubitril 97mg / Valsartan 103mg bd as tolerated by the patient.

Patients prescribed sacubitril valsartan must not be prescribed ACE inhibitors, ARBs or aliskiren concurrently. Please ensure that these are removed from the patient's medication list.

Patients prescribed sacubitril valsartan are required to stop ACE inhibitors for a period of 48hrs prior to the first dose. Please see treatment plan below. This is to allow sufficient time for drug washout to reduce the risk of angioedema.

Patients taking an Angiotensin Receptor Blocker (ARB) do not need the washout period – they can replace the ARB the following day/dose

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Treatment Plan	
Current therapy of ACE inhibitor final dose to be taken (Ramipril / Perindopril / Enalapril / Lisinopril / Captopril / Quinapril / Combination product) <i>*Delete as appropriate</i>	___/___/___
Start Sacubitril / Valsartan (Entresto) twice daily dose <input type="checkbox"/> Entresto 50mg – Sacubitril 24mg / Valsartan 26mg film-coated tablet <input type="checkbox"/> Entresto 100mg – Sacubitril 49mg / Valsartan 51mg film-coated tablet <input type="checkbox"/> Entresto 200mg – Sacubitril 97mg / Valsartan 103mg film-coated tablet	___/___/___ ___/___/___ ___/___/___
Monitoring to be undertaken by cardiac nurse team following initiation: <input type="checkbox"/> Monitor renal function and U&Es 7-10 days post initiation <input type="checkbox"/> Monitor for signs of symptomatic hypotension	
Adverse reactions	
1. Cough	Not an indication to stop – unless distressing
2. Hypotension	Consider reviewing alternative causes of hypotension – diuretics / anti-hypertensives – if required, consider reducing sacubitril valsartan dose – seek advice
3. Renal dysfunction	Monitor for decline in function – Seek advice if any decline below e GFR 60ml/min
4. Hyperkalaemia	Consider other causes of rise in K+ - (diarrhoea / vomiting / infection) If K+ > 5.4 consider reducing / stopping sacubitril valsartan
5. Angioedema	STOP IMMEDIATELY & CALL 999
INTERACTIONS	
Sacubitril valsartan should not be administered concomitantly with ACE inhibitors / ARBs or Aliskiren	
<i>Caution with:</i>	
<i>Potassium sparing diuretics / Aldosterone Antagonists</i>	
<i>Lithium – monitor levels closely</i>	
<i>NSAIDS</i>	
<i>Statins – monitor for adverse effects.</i>	
PLEASE ENSURE ALL ACE INHIBITORS/ARBs ARE REMOVED FROM THE REPEAT PRESCRIPTION	

The patient will be seen regularly by the cardiac nurse team until their dose of sacubitril valsartan has been titrated to a maintenance dose and they are considered to be stable.

Once established on a maintenance dose the patient should have their BP, renal function and potassium checked at least every 6 months.

Should you require any further advice please contact the patient's cardiologist or heart failure / Cardiac Nurse Specialist.

Specialist Nurse _____ Date _____

Prescribing Information can be accessed at <http://tinyurl.com/jx2fx87> and <https://www.medicines.org.uk/emc/medicine/31244>

Cardiac Nurse Team, locality Offices: Canterbury 0300 123 1412, Dover/Deal 01304 865457, Shepway 01303 858931, Thanet 0300 123 3027, Ashford 0300 7900 272.

Approved by: East Kent Prescribing Group (Representing Ashford CCG, Canterbury and Coastal CCG, South Kent Coast CCG and Thanet CCG)

Date: June 2016