
NHS Kent and Medway Medicines Management

Mercaptopurine (Puri-Nethol®) for Inflammatory Bowel Disease

Shared Care Guideline For Prescribing

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Contact Details:

Document history:

Version	Created by	Date	Main Changes/Comments
1	R Brown	20.02.2012	Preparation of document
	Dr B. Baburajan	08.03.2012	Remove requirement for amylase test in asymptomatic patients
2	R Brown	14.03.2012	Changes recommended by APC, mainly 6-Mercaptopurine to Mercaptopurine

Shared Care Guideline

Shared Care Guideline for prescribing Mercaptopurine (6-Mercaptopurine, Puri-Nethol®)

INDICATION

The use of Mercaptopurine for the treatment of inflammatory bowel disease is off-label. However, there is evidence for it being an effective treatment for both active disease and maintaining remission in Crohn's disease and ulcerative colitis.

AREAS OF RESPONSIBILITY FOR SHARED CARE

This shared care agreement outlines suggested ways in which the responsibilities for managing the prescribing of Mercaptopurine for inflammatory bowel disease can be shared between the specialist and general practitioner (GP). GPs are invited to participate. If the GP is not confident to undertake these roles, then he or she is under no obligation to do so. In such an event, the total clinical responsibility for the patient for the diagnosed condition remains with the specialist. If a specialist asks the GP to prescribe this drug, the GP should reply to this request as soon as practicable.

Sharing of care assumes communication between the specialist, GP and patient. The intention to share care is usually explained to the patient by the doctor initiating treatment. It is important that patients are consulted about treatment and are in agreement with it.

The doctor who prescribes the medication legally assumes clinical responsibility for the drug and the consequences of its use.

REFERRAL AND INITIATION

Shared Care is only appropriate if it provides the optimum solution for the patient.

- Patients will only be referred to the GP once the GP has agreed in each individual case

Specialist Responsibilities

1. Discuss benefits and side effects of treatment with patient. Provide any relevant written information to the patient e.g. from British Society for Gastroenterology <http://www.bsg.org.uk>
2. Pre-screen for thiopurine methyltransferase (TPMT) deficiency if required and determine initiation dose and alternative monitoring strategy to that specified below if appropriate. Individuals with an inherited deficiency of TPMT may be unusually sensitive to the myelosuppressive effect of 6-Mercaptopurine.
3. Check full blood count (FBC), liver function tests (LFT) at baseline and week 2; check FBC and LFT at week 4; communicate results to GP and act on any abnormalities.
4. Prescribe medication until the dose is stabilised.
5. Give patient a copy of this guideline and ensure patient has given informed consent for their treatment.
6. Forward a copy of this guideline to GP with a request for sharing care.
7. If the GP does not accept shared care the total clinical responsibility for the patient for the diagnosed condition remains with the specialist. Ensure GP is kept informed of response to treatment and progress of the disease.
8. Continue to monitor clinical response and communicate any changes in biochemistry or dose to the GP as appropriate.
9. To be available for advice if the patient's condition changes.
10. To ensure that procedures are in place for the rapid re-referral of the patient by the GP.
11. To liaise with the GP on any suggested changes in prescribed therapy.
12. Review concurrent medication for potential interactions.

General Practitioner Responsibilities

1. Notify consultant in writing of decision regarding sharing of care within two weeks of request from consultant.
2. Prescribe Mercaptopurine as part of a shared care arrangement (once patient stabilised on dose). Do not prescribe as 6-mercaptopurine as clinical incidents have occurred when prescribed as 6-mercaptopurine.
3. Arrange for FBC and LFT to be checked every 12 weeks and if results abnormal discuss with specialist regarding appropriate action.
4. Check recent FBC/LFT's are available prior to issuing a prescription.

5. Monitor concordance with therapy and signs of toxicity e.g. unexplained bleeding, bruising, purpura, sore throat, malaise.
6. Review concurrent medication for potential interactions.
7. Report to and seek advice from the specialist on any aspect of patient care that is of concern to the GP and may affect treatment.
8. Follow the specialist's advice on any changes in treatment.

Patient's role (or that of carer)

1. Adhere to the treatment plan agreed with the specialist.
2. Use written and other information on the medication.
3. Report to the specialist or GP if he or she does not have a clear understanding of the treatment or has any concerns relating to treatment.
4. Attend appropriate GP and other follow up appointments and co-operate with assessments.
5. Seek help urgently if side effects are suspected, or are otherwise unwell.
6. Inform the Consultant or the GP of any other medication being taken, including herbal or over the counter products.

SUPPORTING INFORMATION

See Summary of Product Characteristics (SPC) for full prescribing information.

www.medicines.org.uk

Dosage and Administration

Dose is usually 1mg/kg/day when used for inflammatory bowel disorders.

Contraindications

Hypersensitivity to any component of the preparation.

Special Warnings and Precautions

Mercaptopurine is an active cytotoxic agent – see SPC for a full description of special warnings and precautions.

Immunisation with live organism vaccines is not recommended.

Side Effects

See SPC

Drug Interactions

See SPC

References

1. Summary of Product Characteristics (last updated 05/07/2011) for Puri-Nethol 50mg. www.medicines.org.uk – accessed 27/02/2012
2. British Society of Gastroenterology. Patient Information. www.bsg.org.uk – accessed 27/02/2012
3. NHS Brighton and Hove, Brighton and Sussex University Hospitals NHS Trust. Shared Care Guideline 6-Mercaptopurine for Inflammatory Bowel Disease (August 2010).
4. NHS Lincolnshire, United Lincolnshire Hospitals NHS Trust. Shared Care Guideline: Unlicensed use of Mercaptopurine for the treatment of Inflammatory Bowel Disease (February 2009).