

BACKGROUND

Following recent [MHRA advice to healthcare professionals](#), the EKHUFT Drug and Therapeutics Committee and East Kent Prescribing Group have agreed to change the status of hydrochlorothiazide and hydrochlorothiazide containing medicines to restricted use, not to be initiated as treatment for hypertension. There are a wide range of alternative drugs available for the treatment of hypertension so we do not anticipate any detrimental effect on patient care with this change in status. Comparative trials have established inferiority in this indication to medications such as indapamide.

The MRHA recommended health professionals to advise patients taking hydrochlorothiazide-containing products of the cumulative, dose-dependent risk of non-melanoma skin cancer, particularly in long-term use, and the need to regularly check for (and report) any suspicious skin lesions or moles. Counsel patients to limit exposure to sunlight and UV rays and to use adequate sun protection.

There are a number of other rarer indications where hydrochlorothiazide has been used. Most, if not all, appear to have medication alternatives. The expectation is that any new specialist initiation is fully justified, and done in the context of this alert and its action points. In such circumstances repeat prescribing in primary care would be appropriate, as this is a medication with a historically widely understood and established safety profile.

The only group of patients established on hydrochlorothiazide-containing products where substitution has been recommended to be considered by the MRHA are those with previous skin cancer.

Prescribing Update Hydrochlorothiazide and medicines containing hydrochlorothiazide

ACTION POINTS

- Do not initiate treatment in East Kent NHS patients with hydrochlorothiazide and medicines containing hydrochlorothiazide for hypertension and use in other indications only if no alternative.
- Be aware of the [MHRA advice to healthcare professionals](#) in case of patient contact before GP review:
 - Pharmacoepidemiological studies have shown a dose-dependent increased risk of non-melanoma skin cancer (basal cell carcinoma [BCC] and squamous cell carcinoma [SCC], including SCC lip cancer) with exposure to increasing cumulative doses of hydrochlorothiazide
 - Inform patients taking hydrochlorothiazide-containing products (and document this in the medical record) of the risk of non-melanoma skin cancer, particularly in long-term use, and advise them to regularly check for and report any new or changed skin lesions or moles
 - Reconsider the use of hydrochlorothiazide in patients who have had previous skin cancer
 - Examine all suspicious moles or skin lesions (potentially including histological examination of biopsies)
 - Advise patients to limit their exposure to sunlight and UV rays and use adequate protection when exposed to sunlight and UV rays to minimise the risk of skin cancer if they are on hydrochlorothiazide

For further information please:

Discuss with your clinical pharmacist or CCG Medicines Optimisation team
Within EKHUFT call Medicines Information on 723-6001

Utilise Trust formulary to access safety information on a medicine

<http://www.ekhuftformulary.nhs.uk/>