

## EFFECTIVE SHARED CARE AGREEMENT OF AZATHIOPRINE FOR THE TREATMENT OF INFLAMMATORY BOWEL DISEASE (UNLICENSED INDICATION)

### RESPONSIBILITIES and ROLES

<b>Specialist responsibilities</b>	
1.	Discuss the benefits and side effects of treatment with the patient.
2.	Assess TPMT function, if this is very low or absent azathioprine should not be prescribed
3.	Check for possible drug interactions with azathioprine and the patient's regular medication. Avoid prescribing interacting drug e.g. allopurinol, clozapine, ribavirin
4.	Assess likelihood of compliance.
5.	Ensure patient is given sufficient information about their treatment.
6.	Perform all baseline tests (including FBC, U&Es and LFTs)
7.	Initiate and stabilise treatment with azathioprine. Stabilisation will usually take ~3 months
8.	Supply medication until care is transferred to GP.
9.	Ask the GP whether he or she is willing to participate in shared care and explain the intention to share care with patient/carer and obtain consent.
10.	Monitor appropriately as stated on the monitoring requirement and record this information in the IBD registry.
11.	Inform GP of the dose to be prescribed, any changes in dose, when to stop treatment and when to refer the patient back to specialist.
12.	Periodically review the patient's condition and communicate promptly with the GP when treatment is changed.
13.	Monitor for side effects and report adverse events to the MHRA and GP where appropriate.
14.	Inform GP if patient does not attend specialist appointments and action to be taken.
15.	Have a mechanism in place to receive rapid referral of a patient from the GP in event of deteriorating clinical condition.
16.	Ensure that clear backup arrangements exist for GPs to obtain advice and support.
17.	Advise the GP when the patient should receive the pneumococcal vaccine.
<b>General Practitioner responsibilities</b>	
1.	Reply to the request for shared care as soon as possible.
2.	Prescribe azathioprine at the dose recommended once patient is established on treatment.
3.	Ensure compatibility with other concomitant medication.
4.	Adjust the dose as advised by the specialist.
5.	Contact with the specialist if you suspect the patient is not complying with their medication
6.	Check for possible drug interaction when prescribing new medication and avoid prescribing interacting drugs.
7.	Stop treatment on the advice of the specialist or immediately if an urgent need to stop treatment arises.
8.	Refer the patient to the specialist if his/her condition deteriorates.
9.	Report any suspected adverse events to specialist team and any severe adverse events to MHRA.
10.	Recommend the patient receives an influenza vaccine yearly and pneumococcal vaccine as required.
<b>Patient's / Carer's role</b>	
1.	Report to the specialist or GP if he / she does not have a clear understanding of the treatment.
2.	Take Azathioprine as recommended by specialist.
3.	Request repeat prescriptions from the GP at least 5 days before the next supply is needed.
4.	Attend scheduled appointments with specialist, GP and for monitoring.
5.	Share any concerns in relation to treatment with GP or specialist.
6.	Inform specialist or GP of any other medication is being taken, including over-the-counter products
7.	Do not take any herbal remedies without checking with the specialist.
8.	Inform specialist or GP if you feel you are having problems taking your medication or have stopped taking it.
9.	Alert physician prior to any vaccine administration that you are taking azathioprine e.g. yellow fever is contraindicated
10.	Ensure that you receive the influenza vaccine annually from your GP.
11.	Take adequate precautions to avoid exposure to ultraviolet light i.e. wear sunscreen / protective clothing, all women should attend regular cervical smear screening.
12.	Report any adverse effects to the specialist or GP.

## SUPPORTING INFORMATION EFFECTIVE SHARED CARE AGREEMENT

Information on therapeutic indication, dosage, method of administration, side effects and management considerations in special populations can be found in the Summary of Product Characteristics for Azathioprine available from [www.medicines.org.uk](http://www.medicines.org.uk)

**N.B if there is a dosage increase the monitoring should revert to weekly until the results are stabilised.**

### Monitoring requirements

Monitoring	Full blood count	LFTs	U&Es	Inflammatory markers (CRP/ESR)	GP or Consultant
Baseline	✓	✓	✓	✓	Consultant
Weekly for 6 weeks	✓	✓		✓	Consultant
Monthly for three months	✓	✓			Consultant
Three monthly after 18 weeks (ongoing)	✓	✓			Consultant
Annually			✓	✓	Consultant

### Primary Care Costs

Product	Pack size	Cost per OP*
Generic Azathioprine 25mg tablets	28 tablets	£3.06
Generic Azathioprine 50mg tablets	56 tablets	£3.11

\*Cost from online December 2015 Drug tariff

### BACK-UP ADVICE AND SUPPORT

Contact details	Telephone No.	E mail
<b>IBD Nurse Specialist prescribers:</b> Annette Rowlinson Stephanie Bourne <b>IBD specialist nurses:</b> Claire Fallows Gina Harrison  <b>Specialist:</b> Dr Fiona Leslie Dr Robert Glass Dr Alan Bohan Dr Alison Brind Dr Sandip Sen Dr Kar Lau Dr Srisha Hebbar Dr Alick Nkhoma Dr Shahid Jamal  Pharmacy Dept: medicines information <b>Other: IBD telephone monitoring clinic</b>	01782 675360 01782 671154  01782 675360  Via Secretary 674635 Via secretary 674633 Via secretary 672704 Via secretary 674637 Via secretary 672099 Via secretary 674633 Via secretary 672704 Via secretary 674633 Via secretary 674633  01782674537  01782 675360	Annette.Rowlinson@uhns.nhs.uk Stephanie.Bourne2@uhns.nhs.uk  Claire.Fallows@uhns.nhs.uk Gina.Harrison@uhns.nhs.uk  Fiona.Leslie@uhns.nhs.uk Robert.Glass@uhns.nhs.uk Alan.Bohan@uhns.nhs.uk Alison.Brind@uhns.nhs.uk Sandip.Sen@uhns.nhs.uk Kar.Lau@uhns.nhs.uk Srisha.Hebbar@uhns.nhs.uk Alick.Nkhoma@uhns.nhs.uk Shahid.Jamal@uhns.nhs.uk  Medicines.Informations@uhns.nhs.uk