

Nalmefene Prescribing Pathway

Background

Nalmefene is an opioid system modulator with antagonistic activity at the μ - and δ -opioid receptors and partial agonist activity at the κ -opioid receptors. It is licensed for the reduction of alcohol consumption in adult patients with alcohol dependence who have a high drinking risk level (DRL), without physical withdrawal symptoms and who do not require immediate detoxification. It should only be prescribed in conjunction with continuous psychosocial support focused on treatment adherence and reducing alcohol consumption, and initiated only in patients who continue to have a high DRL two weeks after initial assessment. It is licensed to be taken as-needed: one tablet (containing Nalmefene 18.06mg) should be taken, preferably 1-2 hours prior to the anticipated time of drinking, or as soon as possible after drinking has commenced.

NICE Guidance

NICE. (2014). *Nalmefene for reducing alcohol consumption in people with alcohol dependence*. Available: <http://www.nice.org.uk/guidance/TA325>. Last accessed 01/May/2015.

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| Developed By | Dylan Kerr, Clinical Nurse Manager, HAGA Dr Pardeep Grewal, Consultant Psychiatrist and Clinical Lead for Substance Misuse Services BEH MHT |
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| Policy owner and designation | Dylan Kerr (HAGA) |

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Pathway Action Key

| | |
|--|--------------|
| | GP |
| | Shared tasks |
| | HAGA staff |

Nalmefene is indicated for the reduction of alcohol consumption in adult patients with alcohol dependence who have a high drinking risk level (DRL), without physical withdrawal symptoms, and who do not require immediate detoxification.

· A high DRL is defined by the World Health Organisation (WHO) as alcohol consumption $\geq 60\text{g}$ (7.5units)/day for men and $\geq 40\text{g}$ (5 units)/day for women.

· Reducing alcohol intake is a positive step towards abstinence and Nalmefene should only be prescribed in conjunction with continuous psychosocial support focused on treatment adherence and reducing alcohol consumption to achieve this.

· It is not suitable for immediate detoxification and will not protect against alcohol withdrawal effects.

Caution should be exercised when prescribing Nalmefene to patients with:

- elevated ALT or AST (>3 times ULN) as these patients were excluded from the clinical development programme. i.e. patients with mild or moderate hepatic impairment.
- patients with moderate renal impairment.

Avoid prescribing Nalmefene where patient is prescribed opioid analgesics – associated with serious interactions.

- Patient presents at GP Practice requesting a supply of Nalmefene. GP checks patients meets the inclusion criteria.
- GP refers Patient to Alcohol Specialist worker at [HAGA \(Haringey Alcohol Treatment Service provider\)](#) – allowing for at least a seven-day gap between initial positive identification of patient for Nalmefene and re-screening.
- Alcohol Specialist worker to re-screen using the **AUDIT** screening test and review of drinking behavior over last one to two weeks or high DRL behavior still taking place.

If patient scores positively to AUDIT screen (>15) or satisfies High DRL criteria and doesn't have physical withdrawal characteristics. Plan for Extended Brief intervention (EBI) session approximately 2 weeks hence. These EBI sessions could be delivered via Voice over internet protocol (VOIP) – for example: Skype in-line with HAGA's consenting procedure

If patient scores less than 16 on AUDIT or doesn't satisfy High DRL drinking (>7.5 units for male, >5 units for female) – patient to be given brief advice only OR if patient is alcohol dependent with physical withdrawals refer for detoxification.

Alcohol specialist worker to write to GP and suggest prescribing for one months' supply of Nalmefene 18mg tablets – to be collected by patient from GP surgery. Number of tablets to be prescribed should match number of drinking days e.g. drinking twice a week will require 8 doses over four weeks. DrinkCoach™ smartphone app tool will be promoted to patient for support between EBI sessions.

Nalmefene is not effective without accompanying EBI sessions – if these are not attended by the patient prescription of Nalmefene should cease.

EBI sessions will be offer every two weeks for the first month, then monthly thereafter by the HAGA worker. At 3 months the HAGA worker will notify the GP regarding further prescribing (if required).

Nalmefene prescribing notes:

Initiate Nalmefene at dose of 18mg tablets as a single daily dose, on a "when required" basis, if the patient perceives the need for alcohol. **The maximum dose is one tablet per day.**

- One tablet to be taken, preferably 1-2 hours prior to the anticipated time of drinking with or without food.
- Prescription should be monthly - patient can only have 2 repeats. **NOT BATCH PRESCRIPTIONS**
- If the patient has started drinking alcohol without taking Nalmefene, the patient should take one tablet as soon as possible.

DO NOT PRESCRIBE FOR MORE THAN 6 MONTHS (from date of first prescription).

GP REFERRAL FORM

Please email: harccg.haga@nhs.net

Or fax: 020 8801 4619 (Attn: Duty Worker) & call 0208 800 6999 to confirm

receipt

| | | | |
|-------------------------|--|-------------------------|--|
| Referrer Name | | Date of Referral | |
| Agency | | Telephone | |
| R/ship to Client | | Email | |

| | | | |
|-----------------------|--|---------------------------|--------|
| Client Name | | Ethnicity | |
| Date of Birth | | Gender | |
| Address | | Can we send mail? | YES NO |
| Telephone No/s | | Can leave message? | YES NO |
| Skype Name | | Online Appointment | YES NO |

| | |
|-----------------------------------------------------------------------------------------------|--|
| Client's pattern of Alcohol/ Drug use in last 28 days (frequency & amount per day) | |
| Age of first use | |


| | | |
|---------------------------------------------|-----------|-----------|
| Patient Goal | Reduction | Cessation |
| Is the client aware of the referral? | YES | NO |
| Children | YES | NO |












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|--------------------------------------------------------------------|
| Details (inc. name/dob for children, carer/guardian status) |
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|---------------------------------------------------------------|
| Medical history, including medicines and mental health |
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| | | |
|--------------------------------|-----|----|
| Criminal Justice Issues | YES | NO |
|--------------------------------|-----|----|

| |
|----------------|
| Details |
| |



| | | | | | | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|  1 UNIT 1/2 pint 4% beer, lager or cider |  1 UNIT 1 small glass of wine 9% |  1 UNIT 1 single 25ml measure of spirits (40%) |  1 UNIT 1 small 50ml glass of sherry (17.5-20%) |  2 UNITS A pint of "regular" beer, lager or cider (4%) |  3 UNITS A pint of "premium" beer, lager or cider (5%) |  1.5 UNITS Alcopop (5%) or a 275ml bottle of regular lager (4%) |  2 UNITS 440ml can of "regular" lager or cider (4%) |  4 UNITS 440ml can of "super strength" lager (9%) |  2 UNITS 175ml glass of wine (12%) |  3 UNITS 250ml glass of wine (12%) 9-10 UNITS bottle of wine (12%) |
|------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

| Questions | Scoring system | | | | | Your score |
|-------------------------------------------------------------------------------------------------------------------------------------------|----------------|-------------------|-------------------------------|--------------------|---------------------------|------------|
| | 0 | 1 | 2 | 3 | 4 | |
| 1. How often do you have a drink containing alcohol? | Never | Monthly or less | 2-4 times per month | 2-3 times per week | 4+ times per week | |
| 2. How many units of alcohol do you drink on a typical day when you are drinking? (See unit guidance above.) | 1-2 | 3-4 | 5-6 | 7-9 | 10+ | |
| 3. How often have you had 6 or more units if female, or 8 or more if male, on a single occasion in the last year? | Never | Less than monthly | Monthly | Weekly | Daily or almost daily | |
| 4. How often during the last year have you found that you were not able to stop drinking once you had started? | Never | Less than monthly | Monthly | Weekly | Daily or almost daily | |
| 5. How often during the last year have you failed to do what was normally expected from you because of your drinking? | Never | Less than monthly | Monthly | Weekly | Daily or almost daily | |
| 6. How often during the last year have you needed an alcoholic drink in the morning to get yourself going after a heavy drinking session? | Never | Less than monthly | Monthly | Weekly | Daily or almost daily | |
| 7. How often during the last year have you had a feeling of guilt or remorse after drinking? | Never | Less than monthly | Monthly | Weekly | Daily or almost daily | |
| 8. How often during the last year have you been unable to remember what happened the night before because you had been drinking? | Never | Less than monthly | Monthly | Weekly | Daily or almost daily | |
| 9. Have you or somebody else been injured as a result of your drinking? | No | | Yes, but not in the last year | | Yes, during the last year | |
| 10. Has a relative or friend, doctor or other health worker been concerned about your drinking or suggested that you cut down? | No | | Yes, but not in the last year | | Yes, during the last year | |

TOTAL

SCORING

0 –7 Lower risk

8 –15 Increasing risk

16 –19 Higher risk

Date AUDIT completed: _____ (NB: must be in past two weeks, and done with client)



**171 Park Lane
Northumberland Park
London N17 0HJ
Tel: 0208 800 6999 Fax: 0208 802 0081
Email: staff.member@nhs.net
Mobile: 0XXXXXXXXXX**

?th Month 0000

**Dr (name)
(medical practice/surgery)
(address line 1)
(address line 2)
(postcode)**

**RE: (CLIENT'S NAME) DOB: 00.00.0000
(address line 1)
(address line 2)
(postcode)**

Dear (Doctor's name),

I am the specialist alcohol worker with HAGA. I have carried out an assessment on (client's full name) on the (date of assessment long form). (client's name) has been consuming up to (xx) units of alcohol per day, for a period of (xx weeks/months/years). To my knowledge based on my assessment, (client's name) has no symptoms or conditions that would prevent the medicine from being prescribed. (client's name) would appear to be in need of pharmacological support to reduce their and I would like to request the prescription for Nalmefene 18mg for X days over the next month with support of HAGA psychosocial support fortnightly in-line with the NICE guidance for the medicine.

I will contact you after one month to inform you of progress and request further prescriptions in-line with Haringey's Nalmefene pathway. Please feel free to contact me to discuss this request further.

Yours sincerely,

Staff member
Specialist alcohol worker
HAGA