Our ref: Pancreatic Enzyme Replacement Therapy (PERT) supplies update

24th February 2025

To all GPs, Pharmacies, secondary care providers, urgent treatment centres and out of hours providers

**Re: Pancreatic Enzyme Replacement Therapy (PERT) supply updates**

Dear colleagues,

Thank you for your ongoing work and commitment during these pressured times. As you will be very aware there has been a subsequent [National Patient Safety Alert](https://www.cas.mhra.gov.uk/ViewandAcknowledgment/ViewAlert.aspx?AlertID=103260) for PERT therapy e.g. Creon and Nutrizym. The ongoing shortages are set to continue into 2026 and whilst the current situation in Lancashire and South Cumbria seems stable, things could change rapidly with lead times varying for a number of licensed PERT preparations.

To manage this shortage, it is important we work together as a system to ensure that we continue to deliver safe and high-quality care to the patients of Lancashire and South Cumbria.

Following the large amount of guidance issued recently we feel that it would be helpful to summarise this to assist busy clinical teams.

1. **Please review patients in line with the National Patient Safety Alerts (NPSAs) and national position statements.**

Guidance states that patients must not be left without any PERT, as this can lead to hypoglycaemia, severe bowel symptoms, poor absorption of other medications and weight loss.

The NPSA alert ([May 2024](https://www.cas.mhra.gov.uk/ViewandAcknowledgment/ViewAlert.aspx?AlertID=103253)) provides primary care clinicians with practical steps to take, and consider, when issuing a prescription for PERT. This guidance should be followed whilst PERT shortages continue.

A [national position statement and advice for prescribers](https://www.psgbi.org/position-statement-pert-shortage/) (from the Nutrition Interest Group of the Pancreatic Society of Great Britain and Ireland (NIGPS), Cystic Fibrosis Specialist Group and Gastroenterology Specialist Group, British Dietetic Association) has also been developed. It is designed for **adult patients**, includes product equivalences and clinical management suggestions for prescribers and dietitians, as well as specific advice for adult patients, depending on their supply status and symptoms. A separate document is also available providing advice for patients.

**Specialist advice should be sought for children with pancreatic exocrine insufficiency (PEI).**

**Patients with cystic fibrosis will be under the care of a specialist centre, and they should contact their specialist team if they have any concerns.**

NPSA alert ([May 2024](https://www.cas.mhra.gov.uk/ViewandAcknowledgment/ViewAlert.aspx?AlertID=103253))

NPSA alert ([December 2024](https://www.cas.mhra.gov.uk/ViewandAcknowledgment/ViewAlert.aspx?AlertID=103260))

[National position statement and advice for prescribers](https://www.psgbi.org/position-statement-pert-shortage/)

[Neonatal and paediatric pharmacy group position statement](https://nppg.org.uk/pert/)

[Presentations from PERT shortage guidance for GPs and Pharmacists - Pancreatic Cancer UK](https://www.pancreaticcancer.org.uk/health-professionals/events-for-health-professionals/pert-shortage-gps-pharmacists-event-180924)

Disease specific advice:

People with Cystic Fibrosis (CF) will be under the care of a CF centre – please contact them for advice, [*Cystic Fibrosis Trust*](https://www.cysticfibrosis.org.uk/)*.*

People with Pancreatic Cancer: [*Pancreatic Cancer UK*](https://www.pancreaticcancer.org.uk/)*,* [*Pancreatic Cancer Action*](https://pancreaticcanceraction.org/)*.*

People with Neuroendocrine tumours: [*Neuroendocrine Cancer UK*](https://www.neuroendocrinecancer.org.uk/).

People with other GI diseases causing PEI (including chronic pancreatitis, post severe acute pancreatitis, benign pancreatic resection, ampullary/ duodenal/ cholangio cancers, gastrectomy, oesphagectomy): [*GUTS UK*](https://gutscharity.org.uk/)*.*

1. **Please issue paper prescriptions/ EPS tokens where possible.**

This will allow the most prompt, flexible access to medicines.

Electronic prescriptions (EPS) are often sent to the patient’s designated pharmacy - which may not have stock available or may be closed over the weekend / bank holiday periods.

Issue the PERT medication on a separate prescription form, from any other medicines, to enable it to be dispensed at any community pharmacy.

Prescriptions can be issued as EPS prescription tokens (prescription tokens are printed, if patient is present to collect, on green stationery at the GP practice). The PERT medication can also be prescribed and printed out as a paper FP10 prescription. Either method will allow the patient to get their prescription dispensed at any community pharmacy of their choice.

More information can be found here:

[Prescription and dispensing tokens - NHS Digital](https://digital.nhs.uk/services/electronic-prescription-service/prescription-and-dispensing-tokens)

[Medicine supply issues and use of the Electronic Prescription Service (EPS) - NHS Digital](https://digital.nhs.uk/services/electronic-prescription-service/medicine-supply-issues-and-use-of-the-electronic-prescription-service-eps)

1. **Ensure prescriptions for PERT are for a maximum of one month supply.**

To manage the stock shortage, and to avoid exacerbating further supply issues, prescribers are being asked to prescribe a maximum of one month’s supply of PERT at any one time.

There are [Serious shortage protocols (SSPs)](https://www.nhsbsa.nhs.uk/pharmacies-gp-practices-and-appliance-contractors/serious-shortage-protocols-ssps) in place for Creon® 25000 and 10000 for community pharmacies to limit supply to one month.

Ensure those patients who pay for prescriptions are aware of pre-payment certificates.

1. **Please check if a pharmacy has stock before sending a patient where possible.**

This is particularly important in certain patient groups e.g. paediatric patients, those with learning disability, cognitive impairment, dementia, those with limited supplies and symptomatic patients etc. to ensure no delay in treatment.

Given the nature of the shortage, at least five different community pharmacies may need to be contacted to find stock.

Some pharmacies have online stock checkers e.g. Boots have an [online stock checker](https://www.boots.com/online/psc/?msockid=043b31038e266d77365123eb8fc66cf4) for their stores.

Patients should not be left with the responsibility to liaise with community pharmacies on their own, especially if they are vulnerable. Where practically possible, healthcare teams should support patients by liaising with community pharmacies to try to obtain stock.

Pharmacies which are from large multiples, independents and small multiples should be tried because different pharmacies have different suppliers.

1. **Issue repeat prescriptions ahead of patients’ needs.**

Please can primary care practices allow patients to order their repeat prescriptions for PERT ahead of time.

Patients are being advised to allow at least three weeks ahead of need, to allow time for prescriptions to be filled and minimise impact on community pharmacies.

Please make sure that your GP practice prescription management teams are aware of this deviation from usual practice.

Do not post-date prescriptions, use the pharmacy text box to explain why an early prescription is being submitted.

1. **Please prescribe licensed PERT medication as first preference to unlicensed imports.**

Where possible, GP practices should prescribe licensed PERT medication.

The Specialist Pharmacy Service (SPS) has developed a [tool](https://www.sps.nhs.uk/articles/find-pert-alternatives-and-equivalences/) to match a patient’s current PERT therapy against equivalent UK licensed products.

The below medication conversion chart for licensed PERT is detailed in the [national position statement](https://www.psgbi.org/position-statement-pert-shortage/), which has been designed for adults:



If licensed alternatives are unavailable, consider prescribing unlicensed imports of PERT with patients consent.

**Unlicensed imports:** The ICB have secured/ring-fenced stock from Oxford Pharmacy Store of Pangrol®. Pangrol® is an unlicensed product, which is available in equivalent strengths to Creon® (a licensed product).

|  |  |
| --- | --- |
| **Licensed product** | **Equivalent unlicensed imports** |
| Creon® 10,000 | Pangrol® 10,000 | Pack size 200 capsules (2 x 100 packs banded together)  |
| Creon® 25,000 | Pangrol® 25,000 | Pack size 200 capsules (2 x 100 packs banded together)  |

When prescribing Pangrol®, prescribers should be aware that there is an administration difference between Pangrol® and Creon® for patients who are experiencing difficulty swallowing capsules whole:

* The Pangrol® PIL states: "If you have difficulty swallowing the capsule whole, you can also carefully open it over a suitable container by pulling it apart and swallowing only the contents with a little liquid immediately and without chewing."
* The advice for Creon® is that if the capsules cannot be taken whole, “they may be opened and the granules taken with acidic fluid or soft food, but without chewing”. Please see [Summaries of product characteristics (SmPC)](https://www.medicines.org.uk/emc/search?q=Creon).

The ICB would support practices prescribing the unlicensed product, Pangrol®, only where licensed alternative is unavailable and if prescribing is in line with the MSN/SPS advice.

Where a prescriber needs to prescribe an imported product, an acute FP10 paper prescription will be required (see also question 2) and the prescription clearly detailing the imported product:

* + Pangrol 10,000 or 25,000 gastro-resistant capsules (imported)
	+ Special Order
	+ Dosage instructions for the patient
	+ Quantity (note Pangrol® comes in 200 capsule packs)

The original PERT medication e.g. Creon, should remain on the patient’s repeat medication list for subsequent requests.

Patient’s PERT medication should be reviewed at each request.

Dispensing practices should follow guidance in question 7 to dispense imported Pangrol®.

**Patients should be informed of the rationale for the use of an unlicensed imported product and adequate justification provided. This should also be documented in the patient’s medical record as per** [**GMC requirements**](https://www.gmc-uk.org/professional-standards/the-professional-standards/good-practice-in-prescribing-and-managing-medicines-and-devices/prescribing-unlicensed-medicines)**.**

Any decision to prescribe an unlicensed medicine must consider the relevant guidance and NHS Trust or local governance procedures. Unlicensed imports do not undergo any central quality assessment or suitability evaluation. Therefore, any import must be locally assessed in line with local unlicensed medicines processes. Please see the links below for further information:

* [The supply of unlicensed medicinal products](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/373505/The_supply_of_unlicensed_medicinal_products__specials_.pdf), Medicines and Healthcare products Regulatory Agency (MHRA)
* [Professional Guidance for the Procurement and Supply of Specials](https://www.rpharms.com/Portals/0/RPS%20document%20library/Open%20access/Support/toolkit/specials-professional-guidance.pdf), Royal Pharmaceutical Society (RPS)
* [Prescribing unlicensed medicines](https://www.gmc-uk.org/ethical-guidance/ethical-guidance-for-doctors/good-practice-in-prescribing-and-managing-medicines-and-devices/prescribing-unlicensed-medicines), General Medical Council (GMC)
* [Understanding unlicensed medicines](https://www.sps.nhs.uk/articles/understanding-unlicensed-medicines/), SPS

A simplified pathway is shared in the appendix.

Please also see question 11 for section on neonates/children.

1. **Community pharmacies and unlicensed imports.**

In preparation for prescriptions of Pangrol®, please can community pharmacies set up an account with Oxford Pharmacy Store.

Community pharmacies should endorse the prescription as a non-Part VIIIB special [as per NHS BSA guidance](https://faq.nhsbsa.nhs.uk/knowledgebase/article/KA-03292/en-us).

* Amount dispensed over pack size (200) used
* Invoice price per pack size from which the order was supplied less any discount or rebate; make sure to include delivery cost
* Manufacturers’/importers’ (Target Healthcare) MHRA licence number which is; MS43086/ WDA(H)43086
* Batch number of the product supplied
* SP

Make sure you claim all costs associated with ordering this stock when you dispense it.

When dispensing please print and include the relevant Patient Information Leaflet (PIL):

* [Pangrol 10,000](https://www.cpsc.org.uk/application/files/3517/2865/3371/Pancreatin_10000_Ph.Eur._units_of_lipase_EC_capsules_Pangrol_-_Berlin_Chemie_-_Germany_-_Translated_PIL.pdf)
* [Pangrol 25,000](https://www.cpsc.org.uk/application/files/9217/2865/3371/Pancreatin_25000_Ph.Eur._units_of_lipase_EC_capsules_Pangrol_-_Berlin_Chemie_-_Germany_-_Translated_PIL.pdf)

Ordering imported Pangrol® stock for Lancashire and South Cumbria ICB:

* Order from the Oxford Pharmacy Store (OPS) with an expected lead time for delivery of 1-2 days.
* You will need an account with OPS: visit [OPS website](https://oxfordpharmacystore.co.uk/register-for-a-new-cccount/) to set one up (this may take up to 3 days). You will need to supply the following details: pharmacy name, address, email for remittance, ODS code.
* Ordering imported stock from OPS download [the order form](https://oxfordpharmacystore.co.uk/ordering-info/) and send orders to ops.orders@oxfordhealth.nhs.uk.
1. **What about vulnerable adult patients and patients under a secondary care specialist?**

Primary care/GP practices - please do not refer patients to secondary care, as there are no guarantees secondary care are going to have stocks any more than community pharmacies have stock. There is no diversion of stock to hospitals at present. Instead, if a patient is vulnerable and already under a secondary care specialist, primary care PCN/practice pharmacists should liaise with secondary care specialist team for advice.

1. **What is a Serious Shortage Protocol (SSP)?**

This specifies an alternative product or quantity that may be supplied (an alternative strength or formulation, or generic or therapeutic alternative or less of the product) by community pharmacies.

Pharmacies will be able to manage any serious shortages of medicines without needing to refer patients back to prescribers.

Community pharmacy contractors **must consider the SSP** and, if in the supervising pharmacist’s opinion, the alternative product or quantity is reasonable and appropriate for the patient, they may supply the alternative product or quantity (only as specified in the SSP and subject to any conditions in the SSP), provided that the patient consents/agrees to the alternative SSP supply.

These are dynamic documents in a fast-moving stock supply situation, so the most up to date protocol must be used. Full details are available here: [https://www.nhsbsa.nhs.uk/pharmacies-gp-practices-and-appliance-contractors/serious-shortage-protocols-ssps](https://gbr01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.nhsbsa.nhs.uk%2Fpharmacies-gp-practices-and-appliance-contractors%2Fserious-shortage-protocols-ssps&data=05%7C01%7Candrew.white6%40nhs.net%7C517841f3d4a04e34cd0008dae1c87f17%7C37c354b285b047f5b22207b48d774ee3%7C0%7C0%7C638070548479438005%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=lchbVHCnMo19ngL%2FovoiX%2B%2BVhys5rnBXWrUeBrk2lJM%3D&reserved=0)

There are currently two [Serious shortage protocols (SSPs)](https://www.nhsbsa.nhs.uk/pharmacies-gp-practices-and-appliance-contractors/serious-shortage-protocols-ssps) for Creon® 25000 and 10000 in place for community pharmacies to limit supply to one month.

1. **Safety Netting**

It is really important for prescribers and pharmacies to communicate about the availability of PERT to ensure the most appropriate treatment is supplied.

Please remind patients not to stockpile these medicines, as this will further drive the shortage.

Advise patients not to buy PERT preparations online (e.g., from Amazon) as they are not regulated, and strength/efficacy may not be equivalent.

If patients run out of their PERT and/or the patient’s condition deteriorates, getting advice and care is essential. Please be clear to patients how to access care and advice.

**Specialist advice should be sought for children with pancreatic exocrine insufficiency (PEI).**

**Patients with cystic fibrosis will be under the care of a specialist centre, and they should contact their specialist team if they have any concerns.**

Where PERT is prescribed to adults for indications other than cystic fibrosis, clinicians and prescribers should consider the following, described in more detail in the [National Patient Safety Alert](https://www.cas.mhra.gov.uk/ViewandAcknowledgment/ViewAlert.aspx?AlertID=103253) and [national position statement](https://www.psgbi.org/position-statement-pert-shortage/):

* + Prescribing a proton pump inhibitor or H2 receptor antagonist to reduce acid degradation of PERT and optimise efficacy.
	+ If a dose reduction may be suitable for patients based on severity of symptoms.
	+ Where symptoms remain despite a dose of ≥10,000 units lipase/kg/day or 100,000 units lipase with a meal, whether other causes of the symptoms should be investigated.
	+ Prescribing medication to manage symptom control – noting that this will not treat malabsorption and is not an alternative to PERT.
1. **Neonates and paediatric population.**

Specialist advice should be sought before changing children’s regular PERT medication. Please liaise with the patients Trust paediatric team.

The Neonatal and Paediatric Pharmacy Group have published a [position statement](https://nppg.org.uk/pert/) on the shortage of Pancreatic Enzyme Replacement Therapy (PERT) in neonates and children. This has been written in response to the National Patient Safety Alert.

Creon® 10000 capsules should, where possible, be reserved for people unable to take Creon® 25000 capsules e.g. some children and people who are unable to swallow larger capsules.

Creon® Micro Pancreatin 60.12mg capsules are prioritised for babies / young children and those with dysphagia who are unable to open the Creon® 25000 capsules.

The Pancreatic Society of Great Britain and Ireland (PSGBI) has also published a [position statement](https://www.psgbi.org/position-statement-pert-shortage/) on the management of PERT shortages in adults, and much of the information contained within this document is also likely to be useful to both professionals caring for paediatric patients and patients/families alike.

[Pancreatin for pancreatic insufficiency – Medicines For Children](https://www.medicinesforchildren.org.uk/medicines/pancreatin-for-pancreatic-insufficiency/)

1. **Summary of current supply issues of PERT medication**

GP practices and community pharmacies should register with the [Specialist Pharmacy Service Medicines Supply Tool](https://www.sps.nhs.uk/wp-login.php?redirect_to=https%3A%2F%2Fwww.sps.nhs.uk%2Fhome%2Ftools%2Fmedicines-supply-tool%2F&reauth=1) to obtain details of medicines supply shortages.

For PERT, there is a dedicated [page](https://www.sps.nhs.uk/articles/prescribing-and-ordering-available-pancreatic-enzyme-replacement-therapies/), which is regularly being updated and provides the supply status of all licensed PERT products.

1. **Patient advice**

A patient information leaflet has been developed which provides patients with background information to why there is a shortage of PERT across the UK, and practical steps that can be taken to ensure patients do not go without their PERT therapy.

The patient leaflet can be found in the appendix.

GP practices should consider sending this leaflet to all patients on Creon/PERT via their text messaging system to ensure consistency of messaging.

Patients/carer information is also provided by the [Cystic Fibrosis Trust](https://www.cysticfibrosis.org.uk/what-is-cystic-fibrosis/cystic-fibrosis-care/treatments-and-medication/creon-supply-update), who also operate a [helpline service](https://www.cysticfibrosis.org.uk/the-work-we-do/support-available/helpline?gad_source=1&gclid=Cj0KCQjwq_G1BhCSARIsACc7NxoKlg2vI2mn44ffvFRQFyQrQANKF9IlzC52H7rv2mpmkLM6KMadX2oaAsQcEALw_wcB). In addition, the manufacturers of Creon® and Nutrizym, have also set up a patient and healthcare professional advice line which can be contacted:

**For Creon®:** customer service line via 0800 8086410. The service will be active from Monday to Friday from 9:00 to 17:00. (Viatris UK has initiated a free Creon® customer service line dedicated to patients and healthcare professional affected by Creon® supply constraint. The purpose of the service is to provide the most up to date information on the supply of Creon®. The service will aim to provide information on the nearest pharmacies which have recently received supply).

**For Nutrizym:** Call 08000 902408 or email ukcustomerservices@zentiva.com. (There is a different number for your local pharmacist to use: 0844 879 3188).

We hope that this information is useful but please do let us know if you have any further queries.

Yours faithfully

Andrew White

ICB Chief Pharmacist

**Appendix**

**Patient leaflet**

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**Pathway**

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