

# Prescribing prednisolone for patients requiring soluble tablets / liquid formulation

### **KEY MESSAGES**

- Plain prednisolone tablets are still significantly less expensive than soluble ones and should be the preferred option for most patients.
- Soluble tablets are more time consuming than plain tablets for parents, carers, and nursing staff.
- Patients taking soluble tablets should be reviewed regularly with a view to changing to plain where appropriate.
- Older children may find plain tablets more convenient to take than soluble ones.

# 1<sup>st</sup> line: Prednisolone standard (plain) 1mg and/or 5mg tablets dispersed in water 2<sup>nd</sup> line: Prednisolone soluble tablets or Prednisolone 5mg/5ml oral solution unit dose

### Rationale

#### Prednisolone plain tablets

- Prednisolone 5mg soluble tablets currently cost approximately 59 times as much as the plain 5mg tablets in primary care<sup>1</sup> (£1.78 per soluble tablet compared to £0.03 per plain tablet).
- Plain prednisolone tablets are available in 1mg and 5mg strengths, are relatively small tablets and do not present a problem in swallowing for most patients. Children can be taught to swallow tablets see the following for useful resources: www.justonenorfolk.nhs.uk/childhood-illnesses/taking-medicine/
- It has been established that many brands of plain, 'non-soluble' prednisolone tablets disperse easily, with some dispersing almost immediately and others taking two to five minutes<sup>2</sup>. The taste of the solution is similar, regardless of whether a plain or a soluble prednisolone tablet is used. [Note that this would mean using a licensed product outside the terms of that licence – unlicensed use.]
- The plain tablet can also be crushed and mixed with a small amount of soft food such as yoghurt, honey, or jam<sup>3</sup>. [Note this is unlicensed use of the product.]
- As crushing or dispersing plain tablets in water before administration is unlicensed use, it is important that this is done with patient consent and written instructions on administering these tablets are included in the prescription. For example, written instructions "Disperse FOUR 5mg tablets (20mg) in a glass of water or squash once a day in the morning for five days. Drink all the resulting solution immediately"
- There are a variety of strengths available of the plain tablets, which allows the prescriber to make small changes to the dose (for example dose of 7mg) without the patient having to change the method of administration or to take additional measurements to get the required dose.
- NNUH<sup>4</sup> currently advise patients to use standard prednisolone tablets dispersed in water if a soluble preparation is needed

## Clinicians should be aware that there are situations where dispersing/ crushing the plain tablets cannot be used for example in patients with fine-bore enteral feeding tubes.

### Prednisolone 5mg/5ml oral solution unit dose and soluble tablets

- The Prednisolone 5mg/5ml oral solution unit dose (£1.14 per 5mg dose) is a licensed formulation which is currently less expensive than Prednisolone 5mg soluble tablets (£1.78 per tablet) but more expensive than Prednisolone plain tablets (£0.03 per tablet).
- The solution or soluble tablets should only be used in exceptional circumstances e.g. lactose intolerance<sup>4</sup>
- There is a measuring spoon provided with each pack of oral solution unit dose for partial dosing at increments of 1.25ml, 2.5ml and 3.75ml.
- Each Prednisolone 5mg/5ml oral solution unit dose contains 1.5g of sucrose. This needs to be considered for patients with diabetes, especially where they are using a high dose of prednisolone.
- Prednisolone 5mg/5ml oral solution unit dose should not be prescribed for doses exceeding 30 mg daily, because opening more than 6 containers in a day may increase the risk of dosing errors. As a result the license of the product has been restricted to those with a dose of 30 mg/day or below (see SPC at https://www.medicines.org.uk/emc/product/1753/smpc#gref for more information on Prednisolone 5mg/5ml oral solution).

## Please note: A higher strength oral solution is also available 10mg/1ml £55.50 / 30ml - £0.93 / 0.5ml (5mg dose)

• Due to the potential for an inadvertent high dose to be given/ taken please avoid prescribing this formulation unless high doses are required. I which case ensure directions are clearly stated and understood.

#### References

- 1. The Drug tariff November 2023 accessed online 22.11.23 www.nhsbsa.nhs.uk/924.aspx
- The NEWT Guidelines Prednisolone. Available at http://access.newtguidelines.com/P/Prednisolone.html (accessed 22.11.23 - Needs password)
- Position statement on prescribing Prednisolone for patients requiring soluble tablets / liquid formulation, Herts Valley Clinical Commissioning Group https://hertsvalleysccg.nhs.uk/application/files/3515/3847/7754/Position\_Statement\_on\_Predn isolone\_for\_patients\_requiring\_soluble\_tablets\_or\_liquid\_formulation\_v2.pdf. (accessed 22.11.23)
- 4. NNUH Medicines Information phone call confirmation 17.03.2021

| Title                       | Prescribing prednisolone for patients requiring soluble tablets / liquid formulation   |  |  |
|-----------------------------|--|--|--|
| Description of policy       | To inform healthcare professionals   |  |  |
| Scope                       | To inform local healthcare professionals about a prescribing reference group decision  |  |  |
| Prepared by                 | Prescribing & Medicines Management Team  |  |  |
| Evidence base / Legislation | <ul> <li>Level of Evidence:</li> <li>A. based on national research-based evidence and is considered best evidence</li> <li>B. mix of national and local consensus</li> <li>C. based on local good practice and consensus in the absence of national research based information.</li> </ul> |  |  |
| Dissemination               | Is there any reason why any part of this document should not be available on the public web site? $\Box$ Yes / No $\boxtimes$  |  |  |
| Approved by                 | Update agreed by TAG – Jan 2024  |  |  |
| Authorised by               | Norfolk & Waveney Prescribing Reference Group (8.2.18), Medicines<br>Optimisation Senior Team (16.3.21)  |  |  |
| Review date and by whom     | Will return to TAG Jan 2026  |  |  |

### Version Control (To be completed by policy owner)

| Version | Date     | Author  | Status | Comment   |
|---------|----------|---|--------|---|
| 0.1     | 29.1.18  | Prescribing & Medicines<br>Management Team<br><i>(EK)</i> | Draft  |   |
| 1.0     | 21.2.18  | Prescribing & Medicines<br>Management Team<br>(EK/MC)     | FINAL  | Ratified at the Prescribing Reference Group 8.2.18  |
| 1.1     | 02.02.21 | Medicines Optimisation<br>Team (MC)                       | Draft  | Logo changed to AGEM & N&W CCG  |
| 1.2     | 13.07.21 | Medicines Optimisation<br>Team (MC)                       | FINAL  | Minor changes ratified at the Medicines<br>Optimisation Senior Team meeting 16.3.21.<br>July cost updated 13.7.21. No reply from Out of<br>Hours Service so ref. removed. Information on<br>higher strength solution added.   |
| 1.3     | 22.11.23 | Medicines Optimisation<br>Team (MC)                       | update | DT checked and prices updated. Reference<br>source information checked. The following new<br>link / additional information added:<br>Children can be taught to swallow tablets – see<br>the following for useful resources:<br>www.justonenorfolk.nhs.uk/childhood-<br>illnesses/taking-medicine/ |