

Valsartan (Diovan®) Shortage

December 2016

A number of suppliers (Actavis UK and Dexcel Pharma) have recently announced they are discontinuing manufacture of valsartan. A third company Aurobindo Pharma – Milpharm Ltd have announced that they have no current stock of valsartan and are unsure of when further supplies will be available. Clinicians are advised that there is likely to be a shortage of valsartan and problems with supply for the foreseeable future. Clinicians may need to consider alternative medication for patients currently prescribed valsartan.

Management options include: 1) Switch patients to an Angiotensin-Converting Enzyme Inhibitor (ACEI) where there is no documented intolerance to an ACEI 2) Prescribe an alternative Angiotensin II Receptor Antagonist (A2RA) 3) Consider a Calcium-Channel Blocker in line with NICE CG127.

When prescribing an alternative A2RA, refer to local joint formularies and keep in mind the following:

- Candesartan, losartan and irbesartan are all cost-effective alternatives. Their licensed indications vary.
- Information on dose equivalents for A2RAs is not available. Therefore, when changing a patient from one A2RA to another, the dosing range within which the dose falls should be taken into account (i.e. bottom, middle or top of the dosing range). See table for approximations. Individual responses may vary so blood pressure should be taken following the switch and dosage adjusted accordingly. Consider checking U&Es following the change.
- Patients on a twice daily dosing regimen of valsartan will need to be advised of a change to a once daily regimen on switching to an alternative A2RA, to reduce the risk of a dosing error.
- It should be noted that valsartan is the only A2RA licensed for use in the post MI setting and specialist advice should be sought if an alternative A2RA is required when valsartan is being prescribed for this indication.

A2RA	Licensed indications ²	Approximate dose conversions*			
Valsartan	Hypertension, heart failure, post MI prophylaxis	40mg DAILY§	80mg DAILY§	160mg DAILY§	320mg DAILY§
Candesartan	Hypertension, heart failure Ω	4mg once a day	8mg once a day	16mg once a day	16mg – 32mg once a day
Losartan	Hypertension, heart failure, diabetic nephropathy in T2DM, CV risk reduction	25mg once a day	50mg once a day	100mg once a day	-
Irbesartan	Hypertension, renal disease in hypertensive T2DM	75mg once a day	150mg once a day	300mg once a day	-

*Dose equivalencies are approximate and individual responses may vary so blood pressure should be monitored following the switch and dosing adjusted accordingly, if needed. 1 § Dose may be given as two divided doses depending on indication Ω drug of choice for heart failure

References:

1. Therapeutic Research Center. Angiotensin Receptor Blocker (ARB) Antihypertensive Dose Comparison (Full update February 2012). Prescriber's Letter 2012; 28 (3):280322; 2. BNF 71