

## SHARED CARE AGREEMENT



**Name of medicine**      ***Liraglutide (Saxenda®)***

**Indication**                      ***As an adjunct to a reduced-calorie diet and increased physical activity for weight management in adult patients***

Version: **1.0**

Approval date: **December 2023**

Review date: **December 2026**

The Shared Care Agreement (SCA) is intended to facilitate the accessibility and safe prescribing of complex treatments across the secondary/primary care interface. It does not contain all of the relevant product information, which should be sought using the current British National Formulary and manufacturer's Summary of Product Characteristics. The SCA must be used in conjunction with the NHS Lothian Procedure for the Shared Care of Medicines, available [here](#).

### Roles and responsibilities

Listed below are specific responsibilities that are additional to those included in the NHS Lothian Policy and Procedures for Shared Care. Please refer to the policy for core roles and responsibilities that apply to all Shared Care Agreements.

#### Consultant/ Specialist Dietitian

- *Patients will have an initial assessment with a specialist dietitian, and then will be reviewed by medical consultant attached to the Specialist Weight Management Service.*
- *Treatment will be initiated by specialist and supply made via hospital based prescription pad for the first 16 weeks. During this time the specialist service will titrate the dose weekly up to their maximum tolerated daily dose.*
- *Provide advice regarding monitoring, adverse effects and dose modifications.*
- *Counselling the patient on the risk of liraglutide in pregnancy and breastfeeding and the need for contraception as appropriate.*
- *Patients will be monitored during the titration period by the specialist dietitians whilst attending adjunct lifestyle group education and any issues will be escalated to medical consultant.*
- *After 12 weeks on the maintenance dose, patients will be assessed by dietitians to make sure they have achieved 5% weight loss prior to a further 4 week prescription being issued.*
- *Making arrangements for the patient to be reviewed by a specialist dietitian every 3 months for 2 years.*
- *Communicating with the GP - after the initial assessment, at point when GP is to take over prescribing and when liraglutide should be discontinued.*

#### General Practitioners and primary care non-medical prescribers

- Prescribing of GLP-1 therapy in conjunction with the specialist service after the initial 16 weeks.
- Although monitoring is routinely carried out by the specialist team during clinic visits, the GP would be required to carry out annual reviews for any associated conditions.
- Patients should be prescribed the Saxenda® brand of liraglutide.

#### Patient, relatives, carers

- As listed in NHS Lothian Policy and Procedures for the Shared Care of Medicines.
- Patient to take hospital-based prescription from medical consultant to community pharmacy for first 16 weeks of treatment (4 weeks titration and 12 weeks on maintenance dose).
- Patients can access advice via the dietetics helpline by calling 0131 537 9169

### Support and Advice for the GP and primary care non-medical prescribers

Healthcare professionals can also contact the NHS Lothian weight management service for advice using the following email address: [weight.management@nhslothian.scot.nhs.uk](mailto:weight.management@nhslothian.scot.nhs.uk). E-mail requests should copy in the practice's clinical e-mail address and ask that the reply is sent to all, so that the reply is picked up even if the sender is not available.

## Key Information on the Medicine

Refer to current edition of the British National Formulary (BNF), available at [www.bnf.org](http://www.bnf.org), and Summary of Product Characteristics (SPC), available at [www.medicines.org.uk](http://www.medicines.org.uk) for detailed product and prescribing information and specific guidance.

## Background to disease and use of drug for the given indication

Two thirds of the adult population in Scotland have a BMI in the overweight or obese category, and over 1 in 4 adults have clinical obesity. Overweight and obesity increases the risk of developing chronic health conditions, such as type 2 diabetes and cardiovascular disease, and increases cost to the NHS. Glucagon-like peptide 1 receptor agonists act by binding to, and activating, the GLP-1 (glucagon-like peptide-1) receptor to increase insulin secretion, suppress glucagon secretion, and slow gastric emptying – resulting in weight loss.

## Indication

Body Mass Index (BMI) greater than or equal to 35kg/m<sup>2</sup> in adults over 18 years with:

- Non-diabetic hyperglycaemia (prediabetes) at high risk of type 2 diabetes which is defined as having either:
  - Fasting plasma glucose level of 5.5 to 6.9mmol/L or
  - HbA1c of 42 to 47mmol/mol

## And a

- High risk of cardiovascular disease (CVD):
  - Total cholesterol greater than 5mmol/L, or
  - High-density lipoprotein (HDL) less than 1.0mmol/L for men and less than 1.3mmol/L for women, or
  - Systolic blood pressure (SBP) greater than 140mmHg

## And

- Patient needs to be treated within a NHS specialist weight management service.

Please note: this criteria is specific to Liraglutide's use within weight management services; other criteria are associated with Liraglutide's use for people with type 2 diabetes.

## Dosage and administration

*Dose to be advised by specialist*

*Once daily subcutaneous injection, independent of meals. It should be administered in the abdomen, thigh or upper arm. If a dose is missed within 12 hours from when it is usually taken, the patient should take the dose as soon as possible. If there is less than 12 hours to next dose, the patient should not take the missed dose and resume the once-daily regimen with the next scheduled dose.*

## Monitoring

There are no specific monitoring requirements for the GP.

**Cautions, contraindications** - Refer to current Summary of Product Characteristics: [www.medicines.org.uk](http://www.medicines.org.uk)

## Fertility, Pregnancy and Lactation

Any patients planning to conceive should speak to the specialist team for further advice. Patients wishing to breastfeed should also seek specialist advice from the consultant/specialist dietitian. For full details please refer to current Summary of Product Characteristics: [www.medicines.org.uk](http://www.medicines.org.uk) for full detail.

**Adverse effects** - Refer to current Summary of Product Characteristics: [www.medicines.org.uk](http://www.medicines.org.uk) for full detail.

**Drug interactions** - Refer to current Summary of Product Characteristics: [www.medicines.org.uk](http://www.medicines.org.uk) for full detail.

The presence of this SCA does not compel a primary care prescriber to prescribe if they feel that it is out with the scope of their competencies (as per GMC guidance on safe prescribing) or resources, as ultimate responsibility lies with the prescribing, not the recommending, clinician.

## For office use only:

Approved by the General Practice Prescribing Committee (GPPC) on 5<sup>th</sup> December 2023