

SHARED CARE AGREEMENT



Name of medicine Dornase alpha

Indication Management of cystic fibrosis patients with a forced vital capacity (FVC) of greater than 40% of predicted and over 5 years of age to improve pulmonary function.

Version: **3.0**

Approval date: **June 2022**

Review date: **June 2025**

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

- Initiating and supplying the first 28 days of treatment
- Training of patient/carer in the use of the medicine
- Promoting patient compliance/ adherence
- Lung function assessment pre- and post- first dose to check for bronchospasm and ongoing monitoring of clinical parameters including lung function

General Practitioners and primary care non-medical prescribers

- Prescribing after first 28 days of treatment in addition to the standard responsibilities listed in NHS Lothian 'Policy and Procedures for the Shared Care of Medicines'

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

Contact Points (Paediatrics)

CF secretaries for CF nurses and consultants
Steve Cunningham, Consultant Respiratory Paediatrician
Kenny MacLeod, Consultant Respiratory Paediatrician
Dr Don Urquhart, Consultant Paediatrician
Emilie Tennant, Senior Clinical Pharmacist
Carolyn Aitken-Arbuckle, CF Physiotherapist
Zoe Johnstone, CF Physiotherapist

Tel: 0131 312 0454

Tel: 0131 312 0591 Bleep: 9156
Tel: 0131 312 1047 Bleep: 9163
Tel: 0131 312 1047 Bleep: 9163

Contact Points (Adults)

Specialist Cystic Fibrosis Nurses, WGH
Dr Usma Koser, Consultant Physician, WGH
Dr Robert Gray, Consultant Physician, WGH
Dr Crichton Ramsay, Consultant Physician, WGH
Dr Helen Rodgers, Consultant Physician, WGH
Douglas McCabe, Senior Respiratory Pharmacist, WGH

Tel: 0131 537 1783
Tel: 0131 537 1783
Tel: 0131 537 1783
Tel: 0131 537 1783
Tel: 0131 537 1783
Tel: 07816172703

Key Information on the Medicine

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

Background to disease and use of drug for the given indication

Patients with cystic fibrosis (CF) have thick tenacious sputum, which contributes to exacerbation of infection and reduced pulmonary function when retained in the airways. The mainstay of treatment is daily physiotherapy to clear the airways in association with antibiotic therapy to control infection.

The thick bronchial secretions contain a high proportion of extracellular DNA, which accumulates due to infection and is responsible for the viscosity of secretions. Recombinant human dornase alfa (Pulmozyme®) is a genetically engineered version of the naturally occurring enzyme, which cleaves extra cellular DNA. Both *in vitro* and *in vivo* studies have shown that dornase alfa reduces the viscoelasticity of sputum which results in a significant improvement in lung function and a reduction in the frequency of infective exacerbations compared to the placebo.

Indication

Management of cystic fibrosis patients with a forced vital capacity (FVC) of greater than 40% of predicted and over 5 years of age to improve pulmonary function.

Dosage and Administration

Please refer to www.bnf.org and www.medicines.org.uk

Monitoring

There are no specific monitoring requirements for the GP. All monitoring will be carried out by the CF clinics.

Adverse effects - Refer to current Summary of Product Characteristics (SPC): www.medicines.org.uk

Drug interactions - Refer to current Summary of Product Characteristics (SPC): www.medicines.org.uk

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.

Approved by the General Practice Prescribing Committee (GPPC) on 7th June 2022