

Gastroenterology Specialist formulary list








****Other indications for particular drugs may be included on completion of further specialist lists****








For information on use of unlicensed medicines or medicines used 'off-label' - [click here](#)








The following medicines are approved for prescribing by or on the recommendation of a prescribing gastroenterology specialist:











In the event of a broken link please forward details to carol.walkinshaw@nhs.scot






Please include the location and full title of the link

MEDICINE	SUMMARY OF RESTRICTED INDICATION	CATEGORY	PROTOCOL
Esomeprazole for intravenous infusion	Prevention of re-bleeding following therapeutic endoscopy for severe bleeding gastric or duodenal ulcers.	 Red	Guidance for Management of Upper GI Bleed on the Acute Medical Unit (NHS Tayside Staffnet intranet link only)
Sucralfate liquid/tablets (Antepsin®)	Prevention of re-bleeding following oesophageal/gastric variceal banding (unlicensed use 'off-label').		
Loperamide capsules	High output stoma [unlicensed use 'off-label'] - up to a maximum of 80mg/day. For doses above 16mg/day ECG monitoring is recommended every 3 years in a specialist Gastroenterology outpatient clinic.		NHS Tayside Inpatient Management of High Output Stoma UKMI Q&A: High dose loperamide to reduce stoma output BAPEN - The use of high dose loperamide in patients with intestinal failure, April 2018
Sulfasalazine	Induction and maintenance of remission of ulcerative colitis; treatment of active Crohn's Disease.		Gastroenterology GP letter - sulfasalazine
Methylprednisolone intravenous injection or infusion (Solu-Medrone®)	Severe exacerbation of inflammatory bowel disease (IBD).		
Azathioprine tablets	Steroid dependent ulcerative colitis (UC) or Crohn's disease or where there are frequent relapses or severe disease (unlicensed use 'off-label').		Shared care Agreement – Azathioprine/Mercaptopurine for inflammatory bowel disease (NHS Tayside Staffnet intranet link only)
Mercaptopurine tablets	Steroid dependent UC or Crohn's disease or where there are frequent relapses or severe disease (alternative where azathioprine has been beneficial but patient unable to tolerate side effects)(unlicensed use 'off-label').		

	Mercaptopurine is an option where azathioprine has been beneficial but patient is unable to tolerate its side effects.		
Budesonide prolonged release tablets 9mg (Cortiment®)	Induction of remission in patients with active microscopic colitis. Mild to moderate active ulcerative colitis (UC) where aminosalicylate (5-ASA) treatment is not sufficient for induction of remission. Restricted to use in patients with UC who present with active left-sided disease and/or proctosigmoiditis who are not suitable for oral prednisolone, as an alternative to budesonide rectal formulations or off-label oral budesonide.	 Amber	
Budesonide gastro-resistant capsules 3mg (Budenofalk®)	Symptomatic relief of chronic diarrhoea in those with collagenous colitis	 Amber	
Budesonide gastro-resistant granules 9mg (Budenofalk®)	Symptomatic relief of chronic diarrhoea in those with collagenous colitis	 Amber	
Budesonide orodispersible tablets (Jorveza®)	Eosinophilic oesophagitis (EoE) in adults unsuccessfully treated with proton pump inhibitors Patients are reviewed after a 12 week induction course. All patients prescribed maintenance treatment should receive a maximum 48 week course; if clinical relapse occurs patients require specialist re-assessment and PPI therapy.	 Amber	
Methotrexate subcutaneous injection (Metoject®) ONCE WEEKLY	Induce remission in severe Crohn's disease (unlicensed use 'off-label').	 Amber	Methotrexate Shared Care Agreement
Methotrexate (oral) 2.5mg tablets ONCE WEEKLY	Maintenance of remission in severe Crohn's disease (unlicensed use 'off-label')	 Amber	(NHS Tayside Staffnet intranet link only)
Adalimumab (Amgevita®) subcutaneous injection	Treatment of severe active Crohn's disease which has not responded to a full and adequate course of therapy with a corticosteroid and /or immunosuppressant; or who are intolerant to or have contraindications to such therapies.	 Red	NICE MTA 187 <ul style="list-style-type: none"> Brand name must be stated on prescriptions for adalimumab



Infliximab (Remsima®) intravenous infusion	Alternative to adalimumab in patients with fistulating Crohn's disease or issues with compliance to weekly/fortnightly adalimumab therapy at home. Option for treating moderately to severely active ulcerative colitis in adults whose disease has responded inadequately to conventional therapy or have medical contraindications for, such therapies. Use must be in line with the NICE Technology Appraisals.	 Red	NICE MTA 187 NICE MTA 329 <ul style="list-style-type: none">Brand name must be stated on prescriptions for infliximab
Ustekinumab (Stelara®) intravenous infusion and subcutaneous injection	Treatment of adult patients with moderately to severely active Crohn's disease or ulcerative colitis who have had an inadequate response with, lost response to, or were intolerant to either conventional therapy or a TNF-alpha antagonist or have medical contraindications to such therapies.	 Red	
Golimumab (Simponi®) subcutaneous injection	Option for treating moderately to severely active ulcerative colitis in adults whose disease has responded inadequately to conventional therapy or have medical contraindications for, such therapies. Use must be in line with the NICE Technology Appraisal.	 Red	NICE MTA 329
Upadacitinib (Rinvoq®▼) prolonged-release tablets	Moderately to severely active ulcerative colitis in adults who have had an inadequate response, lost response to or were intolerant to either conventional therapy or a biologic agent. 1st choice JAK inhibitor.	 Red	
Filgotinib (Jyseleca®▼) tablets	Alternative JAK inhibitor for moderately to severely active ulcerative colitis in adults who have had an inadequate response with, lost response to, or were intolerant to either conventional therapy or a biologic agent.	 Red	
Tofacitinib (Xeljanz®) tablets	Alternative JAK inhibitor for moderately to severely active ulcerative colitis in adults who have had an inadequate response, lost response, or were intolerant to either conventional therapy or a biologic agent.	 Red	
Vedolizumab (Entyvio®) subcutaneous injection and intravenous infusion	Adult patients with moderately to severely active ulcerative colitis who have had an inadequate response to, relapsed with, or were intolerant to,	 Red	










	<p>infliximab or golimumab.</p> <p>Adult patients with moderately to severely active Crohn's disease who have had an inadequate response with, lost response to, or were intolerant to adalimumab or infliximab.</p>		
Rifaximin (Targaxan®)	<p>Reduction in recurrence of episodes of overt hepatic encephalopathy (HE) in patients ≥18 years of age.</p> <p>Second line - in combination with lactulose, after standard lactulose therapy.</p>	 Amber	Local treatment protocol (NHS Tayside Staffnet intranet link only)
Colesevelam tablets	Bile acid malabsorption in patients who do not tolerate colestyramine (unlicensed use 'off-label')	 Amber	NICE ESUOM22. Bile acid malabsorption: colesevelam, October 2013
Obeticholic acid tablets (Ocaliva®▼)	Primary biliary cirrhosis in combination with ursodeoxycholic acid in adults with an inadequate response to ursodeoxycholic acid or as monotherapy in adults unable to tolerate ursodeoxycholic acid.	 Amber	
Propranolol (oral)	Primary or secondary prophylaxis of variceal bleeding in portal hypertension.	 Amber	
Carvedilol tablets	Alternative to propranolol (if not tolerated) for primary or secondary prophylaxis of variceal bleeding in portal hypertension (unlicensed use 'off-label').	 Amber	
Terlipressin acetate intravenous injection (Variquel®)	Bleeding from oesophageal varices.	 Red	Guidance for Management of Upper GI Bleed on the Acute Medical Unit (NHS Tayside Staffnet intranet link only)
Ferric carboxymaltose (Ferinject®)	Treatment of iron deficiency anaemia when oral iron preparations are ineffective or cannot be used. Restricted to administration by intravenous infusion.	 Red	
Dioralyte® double strength solution (10 sachets in 1L) (Unlicensed use 'off label')	Electrolyte disturbance in those with intestinal failure and high output stomas.	 Amber	Guidelines for Management of Patients with a Short Bowel (GUT 2006)
Magnesium Glycerophosphate (4mmol) Chewable tablets (MagnaPhate®)	Hypomagnesaemia	 Amber	
Selenium-ACE®+D	Selenium and vitamin A, C, D & E deficiency in prolonged parenteral nutrition.	 Red	


Pabrinex® I/V High Potency injection	Prophylaxis and treatment of Wernicke-Korsakoff syndrome or in patients receiving artificial nutrition.	 Red	
Co-trimoxazole (oral)	Treatment and prophylaxis of Spontaneous Bacterial Peritonitis (SBP) (unlicensed use 'off-label'). Antibiotic prophylaxis for variceal bleeding in patients with liver cirrhosis (unlicensed use 'off-label').	 Red	Antimicrobial Treatment and Prophylaxis of Spontaneous Bacterial Peritonitis and Antibiotic Prophylaxis for Variceal Bleeding in Patients with Liver Cirrhosis protocol
Piperacillin with tazobactam injection for intravenous infusion	Severe Spontaneous Bacterial Peritonitis (SBP) with step down to co-trimoxazole to complete course when clinically improved (if patient usually on prophylaxis give complete course as piperacillin with tazobactam).	 Red	
Naldemedine (Rizmoic®▼) tablets	Prescribed under the direction of a specialist for treatment of opioid-induced constipation in adult patients who have previously been treated with first line osmotic and stimulant laxatives at maximum tolerated doses (including docusate and bisacodyl) and have had an inadequate response	 Amber	Naldemedine Local Treatment Protocol
Prucalopride tablets	Patients who remain symptomatic with gastroparesis despite diet modification and use of conventional (non-pro-kinetic) anti-emetics. Re-assessment after 1 month with all follow up from Gastroenterology in secondary care.	 Amber	

National Clinical Guidelines for the treatment of HCV in adults have been issued to NHS Boards – [CLICK HERE](#).



The following medicines are approved for prescribing by or on the recommendation of a prescribing gastroenterology or infectious diseases specialist in Blood Borne Viruses:

MEDICINE	SUMMARY OF RESTRICTED INDICATION	CATEGORY	PROTOCOL
Peginterferon alfa-2a (Pegasys®)	Monotherapy in chronic hepatitis B infection. In combination with ribavirin for chronic hepatitis C infection (monotherapy if ribavirin not tolerated or contra-indicated).	 Red	
Ribavirin capsules, oral solution (Rebetol®)	Chronic hepatitis C in combination with peginterferon	 Red	

	alfa.		
Eltrombopag tablets (Revolade®)	Thrombocytopenia in patients with chronic hepatitis C infection where thrombocytopenia is inhibiting optimal interferon-based therapy.	 Red	
Sofosbuvir tablets (Sovaldi®▼)	In combination with other treatments for the treatment of chronic hepatitis C in adults. Indicated for dual or triple therapy for 12 or 24 weeks depending on patient's genotype and whether unsuitable for or intolerant to peginterferon based therapy. Use in treatment-naïve patients with genotype 2 or 24-week (interferon free) regimen restricted to those unsuitable for, or unable to tolerate peginterferon alfa.	 Red	
Ledipasvir and sofosbuvir tablets (Harvoni®▼)	Treatment of chronic hepatitis C in adults. Treatment of chronic hepatitis C genotypes 1 and 4. Treatment of chronic hepatitis C genotype 3 in patients who are ineligible for or unable to tolerate interferon.	 Red	
Sofosbuvir and velpatasvir tablets (Epclusa®)	Treatment of chronic hepatitis C virus (HCV) infection in adult patients with genotype 3 chronic HCV infection.	 Red	
Elbasvir 50 mg, grazoprevir 100mg film-coated tablet (Zepatier®▼)	Treatment of chronic hepatitis C (CHC) in adult patients with genotype 1 CHC.	 Red	
Tenofovir disoproxil tablets (Viread®)	Chronic hepatitis B infection with either compensated liver disease or decompensated liver disease. First line treatment.	 Red	
Lamivudine tablets (Zeffix®)	Chronic hepatitis B infection either with compensated or decompensated liver disease when first-line treatments cannot be used.	 Red	
Entecavir tablets (Baraclude®)	Chronic hepatitis B infection with compensated liver disease in lamivudine resistant patients in whom interferon has failed, is contra-indicated or not tolerated.	 Red	
Sofosbuvir/velpatasvir/voxilaprevir (Vosevi®▼)	Treatment of chronic hepatitis C virus (HCV) infection in adults. SMC restriction: for patients who:	 Red	

	<p>(1) Have failed to achieve a sustained virologic response (SVR) with a direct-acting anti-viral (DAA) or</p> <p>(2) are DAA-naïve, have genotype 3 (GT3) HCV infection, with or without cirrhosis, and are suitable for treatment with an eight-week course.</p>		
Glecaprevir/pibrentasvir (Maviret®)	Treatment of chronic hepatitis C virus (HCV) infection in adults	 Red	

Traffic light status information

 Red	To be prescribed by Hospital Specialists Only.
 Amber	Can be prescribed in General Practice under the direction of a Specialist.

For further information on local gastroenterology clinical guidelines see the Acute Medicine Unit website on Staffnet – [click here](#) (NHS Tayside Staffnet intranet link only).

For further information on treatment of gastrointestinal infections refer to the NHS Tayside Guide to Antibiotic Use website – [click here](#).

Updated: 5th December 2023