



Medicine Supply Notification

MSN/2023/081

Pilocarpine hydrochloride 2% eye drops

Tier 2 – medium impact*

Date of issue: 22/08/2023

Link: [Medicines Supply Tool](#)

Summary

- Pilocarpine hydrochloride 2% eye drops are out of stock until late-September 2023.
- Pilocarpine hydrochloride 1% eye drops remain available and will be able to support increased demand.

Actions Required

Primary care clinicians should work with the initiating specialist team on management options.

Ophthalmology teams should:

- not initiate patients on pilocarpine hydrochloride 2% eye drops for long term use until the shortage has resolved;
- review patients on pilocarpine hydrochloride 2% eye drops for long term use and establish if they have sufficient supplies until the resupply date. If further supplies are required:
 - consider prescribing pilocarpine hydrochloride 1% eye drops in the interim, if appropriate and adjust the dose frequency if needed to control intraocular pressure; or
 - consider other therapies if appropriate (such as prostaglandin analogues, betablockers, carbonic anhydrase inhibitors and sympathomimetics) to control intraocular pressure.

Supporting information

Clinical Information

Pilocarpine is the only topical miotic licensed in the UK for the treatment of glaucoma. It is formulated as 1%, 2% and 4% eye drops and indicated for:

- chronic simple (open angle) glaucoma
- acute (closed angle) glaucoma alone, or in conjunction with other agents to decrease intra-ocular pressure prior to surgical treatment
- miosis to counteract the effects of cycloplegic or mydriatic eye drops.

In the treatment of open angle glaucoma, the dosage is one or two drops every six hours or as prescribed by the physician. The strength of the preparation and the frequency of use are determined by the severity of the condition and the response to treatment.

*Classification of Tiers can be found at the following link:

<https://www.england.nhs.uk/publication/a-guide-to-managing-medicines-supply-and-shortages/>

When used prior to surgery for acute attacks of closed-angle glaucoma, the dosage is one drop every five minutes until miosis is obtained or as directed by the physician.

To overcome weaker mydriatics, the normal dosage is one drop every five minutes until the effect is counteracted or as directed by the physician.

In [NICE guidance](#) on management of ocular hypertension, a generic prostaglandin analogue (PGA) is first line treatment option. If this is not tolerated, the first choice should be an alternative generic PGA, and if this is not tolerated, a beta-blocker should be offered. If neither of these options is tolerated, alternatives include a non-generic PGA, carbonic anhydrase inhibitor, sympathomimetic, miotic, or a combination of treatments.

Links to further information

[SmPC – pilocarpine](#)

[BNF – pilocarpine](#)

[BNF- Glaucoma and ocular hypertension](#)

[NICE guideline \[NG81\]: Glaucoma: diagnosis and management](#)

Enquiries

If you have any queries, please contact DHSCmedicinesupplyteam@dhsc.gov.uk.