

Medicines

Optimisation intervention brief

Medicines Optimisation Incentive Scheme 18/19 – NHSE (Items which should Not be routinely Prescribed in primary care) Interventions - perindopril

TITLE?
INP1.14 Prescribe perindopril generically as the erbumine salt.
WHAT?
<ul style="list-style-type: none"> In December 2017 NHS England¹ made the following recommendations regarding perindopril arginine: <ul style="list-style-type: none"> Prescribers in primary care should not initiate perindopril arginine for any new patient All existing patients should have their perindopril arginine stopped as part of a review of their ongoing treatment Where a clinical need for ongoing treatment exists, patients should be switched to the lower-acquisition-cost salt formulation perindopril erbumine, also known as perindopril tert-butylamine.
WHY?
<ul style="list-style-type: none"> Coversyl[®] Arginine is a brand version of the ACE-inhibitor perindopril arginine and Coversyl[®] Arginine Plus is a combination product containing perindopril arginine and indapamide. The manufacturer discontinued the original Coversyl[®] (perindopril erbumine) brand when they brought out Coversyl[®] Arginine. Perindopril erbumine remains available as a generic. The reason for the change in salt formulation from erbumine to arginine was to improve stability, making it better suited to extremes of climate. This is of minor consequence in the UK climate.² Coversyl[®] Arginine (perindopril arginine) has no clinical benefit over generic perindopril. Perindopril erbumine and perindopril arginine are bioequivalent.⁴ National Institute for Health and Care Excellence (NICE) hypertension guidelines³ advise prescribing non-proprietary drugs of low acquisition cost as first line choices of drug therapy.
WHO?
<ul style="list-style-type: none"> All patients with a repeat prescription for Coversyl[®] Arginine, perindopril arginine, Coversyl[®] Arginine Plus or perindopril arginine and indapamide as a combination product.
TIPS?
<ul style="list-style-type: none"> Commence new patients on perindopril erbumine, where perindopril is the appropriate angiotensin converting enzyme (ACE) inhibitor of choice. Any branded prescriptions written just as Coversyl[®] could also mean the branded product, Coversyl[®] Arginine is dispensed. Caution is needed when selecting treatment on clinical prescribing systems to prevent inadvertent selection of perindopril arginine instead of perindopril erbumine.
HOW?
<ul style="list-style-type: none"> Search for patients taking Coversyl[®] Arginine, perindopril arginine, Coversyl[®] Arginine Plus or



perindopril arginine and indapamide as a combination product.

- Review efficacy of treatment with perindopril or perindopril plus indapamide and continued need for these agents
- Clinicians may wish to choose other options according to the clinical needs of the patient.² This could include a trial of discontinuing treatment gradually, where antihypertensive medication is no longer needed for people whose blood pressure has been well controlled for years and who have favourable factors. These include:
 - When only one antihypertensive drug has been needed
 - Younger age
 - Lower blood pressure
 - Person has successfully adopted lifestyle measures such as losing weight, not misusing alcohol, exercising regularly, and restricting salt consumption
- If treatment is discontinued, follow the manufacturer's guidance on withdrawing the antihypertensive gradually. Follow-up the patient carefully (e.g. at about 4-week intervals for 6 months, then 2 or 3 times a year) to detect any recurrence of hypertension. This is most likely to happen in the first 6 months, although it can happen later.²
- For those patients who are to remain on perindopril, agree with the practice how the switch to perindopril erbumine will be carried out (e.g. letter, note on script).
- Blood pressure should be monitored in line with usual practice for those patients who require a change to their dose of indapamide or who are switched to alternative agents.
- Action the switch according to the following guidance:

Coversyl® Arginine or perindopril arginine alone

The recommended dose equivalence is shown below.

Current treatment	Switch to
Perindopril arginine (Coversyl® Arginine) 2.5mg once daily	Perindopril erbumine 2mg once daily
Perindopril arginine (Coversyl® Arginine) 5mg once daily	Perindopril erbumine 4mg once daily
Perindopril arginine (Coversyl® Arginine) 10mg once daily	Perindopril erbumine 8mg once daily

Coversyl® Arginine Plus or perindopril arginine and indapamide combination product

- Contain perindopril arginine 5mg and indapamide 1.25mg as a once a day preparation.
- A direct alternative combination product containing perindopril erbumine does not exist
- Prescribing perindopril erbumine 4mg plus an appropriate diuretic as a separate component is the best option, as it provides greater flexibility of dosing
- Indapamide is not available as a 1.25mg tablet but modified release 1.5mg tablets are available

Current treatment	Possible switch alternatives
Perindopril arginine plus indapamide (Coversyl® ArgininePlus) 5mg/1.25mg	Perindopril erbumine 4mg and indapamide 1.5mg modified release as separate items
	Perindopril erbumine 4mg and indapamide 2.5mg immediate release as separate items
	Alternative antihypertensive treatment according to clinical need.

SO WHAT?

- NHS England guidance implemented.



- Savings due to difference in acquisition cost between the salts are realised.

FURTHER INFORMATION

1. Items which should not routinely be prescribed in primary care: Guidance for CCGs. NHS England December 2017 <https://www.england.nhs.uk/wp-content/uploads/2017/11/items-which-should-not-be-routinely-prescribed-in-pc-ccg-guidance.pdf>
2. <https://www.prescripp.info/-perindopril-arginine/category/89-perindopril-arginine>
3. NICE CG127 Hypertension in adults: diagnosis and management. November 2016 <https://www.nice.org.uk/guidance/cg127>
4. Perindopril arginine: benefits of a new salt of the ACE inhibitor perindopril. Telejko E. Curr Med Res Opin. 2007 May;23(5):953-60 https://www.redorbit.com/news/health/962390/perindopril_arginine_benefits_of_a_new_salt_of_the_ace/
5. WHCCG Policy Statement reference no. [PS007](#)

