

**DH CIRCULAR No. 203/2012**
DH 1555/20129th July 2012**Attention All:** Consultants
Medical Officers
Pharmacists
Pharmacy Technicians
Nurses**Re: Statins**

1. Your attention is being drawn once again to DH Circular No. 105/2012 Re: HMG CoA Reductase Inhibitors (Statins).

The old statins request form is no longer being accepted. Only the new request form (Annex I) will be processed for approval of a protocol regulated statin.

Simvastatin is no longer protocol regulated.

Fluvastatin is to be used in patients with Chronic Kidney Disease and patients intolerant to simvastatin. It is regulated by protocol 71.

Atorvastatin will be approved when the target LDL is not achieved with another statin. It is regulated by protocol 12.

2. Simvastatin tablets

Simvastatin tablets can be prescribed by all medical practitioners. Simvastatin 10mg tablets should not replace higher doses of simvastatin. The maximum daily dose of simvastatin 10mg should not exceed one tablet daily.

Schedule V cards with 'Statins' on it are still valid. Patients are not to be sent to change their Schedule V card to 'Simvastatin', 'Atorvastatin' or Fluvastatin

3. Deletion of Fluvastatin 20mg from the Government Formulary List

After consultation with the expert clinicians, a decision was taken by the Government Formulary List Advisory Committee (GFLAC) to delete fluvastatin 20mg from the Government Formulary List.

When all stock is exhausted, patients on fluvastatin 20mg should be referred to their GP for guidance.



Increase in dose of fluvastatin can also be done by a medical practitioner. Therefore, a prescription from a GP is enough to change the dose of fluvastatin from 20mg to 40mg or 80mg. Change in dose of Atorvastatin has to be authorized by a consultant.

Only if the doctor feels that simvastatin and fluvastatin are inadequate should the patient be referred to the consultant.

4. Fluvastatin 80mg Prolonged Release Tablets

Fluvastatin 80mg Prolonged Release Tablets have been procured through the Central Procurement and Supplies Unit and are now available for use as per protocol for fluvastatin (MP 71).

The recommended dose is one tablet once daily.

5. Atorvastatin 80mg tablets

Atorvastatin 80 mg tablets have been procured through the Central Procurement and Supplies Unit and are now available for use as per protocol for atorvastatin (MP 12).

The recommended dose is one tablet once daily.

6. Rosuvastatin 20mg and 40mg Tablets

Rosuvastatin 20mg and 40mg tablets have been recommended by the Government Formulary List Advisory Committee and approved by the Superintendent of Public Health for introduction onto the Government Formulary List.

Rosuvastatin is protocol-regulated and the protocol number is 177 (annex 2). Consultants can prescribe Rosuvastatin tablets in patients where the target level is not achieved with maximum dose of Atorvastatin supplied through NHS.

Consultants can apply for rosuvastatin using the new statin form attached (annex 1).

Rosuvastatin 20mg and 40mg tablets have been procured through the Centralised Procurement and Supplies Unit and are now available for use.

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STATINS REQUEST FORM

Patient's Name and Surname: _____	
Date of Birth: _____	I.D. Card No: _____
Address: _____	
Age: _____	Tel/Mob No: _____
Date of application: _____	
First Application <input type="checkbox"/>	Renewal <input type="checkbox"/>
FLUVASTATIN	
Schedule V Condition:	
<input type="checkbox"/> Chronic Kidney Disease	
Schedule V Condition:	
<input type="checkbox"/> Cerebrovascular Disease	<input type="checkbox"/> Hypertension
<input type="checkbox"/> Diabetes Mellitus	<input type="checkbox"/> Ischaemic Heart Disease
<input type="checkbox"/> Genetic Dyslipidaemia	<input type="checkbox"/> Peripheral Vascular Disease
Reason why fluvastatin is requested: _____	
ATORVASTATIN (to be used when target LDL level is not achieved with fluvastatin/simvastatin)	
High Risk: LDL* >2	Low Risk: LDL* >3
Schedule V Condition:	Schedule V Condition:
<input type="checkbox"/> Cerebrovascular Disease	<input type="checkbox"/> Hypertension
<input type="checkbox"/> Chronic Kidney Disease	<input type="checkbox"/> Genetic Dyslipidaemia
<input type="checkbox"/> Diabetes Mellitus	
<input type="checkbox"/> Ischaemic Heart Disease	
<input type="checkbox"/> Peripheral Vascular Disease	
ROSUVASTATIN (to be used when target LDL level is not achieved with maximum dose of Atorvastatin supplied through NHS)	
High Risk: LDL* >2	Low Risk: LDL* >3
Schedule V Condition:	Schedule V Condition:
<input type="checkbox"/> Cerebrovascular Disease	<input type="checkbox"/> Hypertension
<input type="checkbox"/> Chronic Kidney Disease	<input type="checkbox"/> Genetic Dyslipidaemia
<input type="checkbox"/> Diabetes Mellitus	
<input type="checkbox"/> Ischaemic Heart Disease	
<input type="checkbox"/> Peripheral Vascular Disease	
*Lipid profile MUST be attached with application for request to be processed	
_____ Signature of Consultant	_____ Name in Block Letters and Medical Council Reg. Number
Date _____	
For office use only:	
Atorvastatin/Rosuvastatin: Lipid profile attached <input type="checkbox"/>	Approved <input type="checkbox"/>
	Not Approved <input type="checkbox"/>
_____ Pharmacist's Signature	_____ Name in Block Letters
	_____ Date

Kindly fill ALL required sections

Data Protection Statement

All personal data is required to provide you with health care services as necessary, and is processed in accordance with the Data Protection Act, and as permitted by law. Further information about your data can be obtained on request.

Rosuvastatin 20mg and 40mg Tablets

Prescriber Criteria: Consultant

Out-patient and In-patient use:

1. Cerebrovascular Disease
2. Chronic Kidney Disease
3. Diabetes Mellitus
4. Genetic Dyslipidaemia
5. Hypertension
6. Ischaemic Heart Disease
7. Peripheral Vascular Disease

To be used when the target level is not achieved with maximum dose of Atorvastatin supplied through NHS:

- Low risk level: LDL[#] >3
 1. Hypertension
 2. Genetic Dyslipidaemia
- High risk level: LDL[#] >2
 1. Cerebrovascular Disease
 2. Chronic Kidney Disease
 3. Diabetes Mellitus
 4. Ischaemic Heart Disease
 5. Peripheral Vascular Disease

[#]Lipid profile MUST be attached with application for request to be processed

Duration of Approval:

10 years