THE
DONCASTER & BASSETLAW

Shared Care Protocol

For

Ciclosporin 0.1% Eye Drops

Shared care guideline developed by
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Version V1.1

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Review Date: Pending review – discussed at Doncaster and Bassetlaw PMOC Sept 2025 and approved for use until March 2026 when it is expected to have developed a SY document

NHS Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust

NHS Doncaster Clinical Commissioning Group

NHS Bassetlaw Clinical Commissioning Group

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Statement of Purpose

This shared care guideline (SCG) has been written to enable the continuation of care by primary care clinicians of patients initiated on ciclosporin 0.1% eye drops by the ophthalmologists at DBTH, where this is appropriate and in the patients' best interests. Primary care will only be requested to take over prescribing of ciclosporin 0.1% eye drops within its licensed indication unless specifically detailed otherwise below.

Responsibilities of specialist clinician (ophthalmologist)

- To discuss benefits and side effects of treatment with the patient/carer and obtain informed consent, in line with national guidance. To provide patient / carer with contact details for support and help if required;
- To initiate ciclosporin 0.1% eye drops in appropriate patients
- To stabilise any patients (single dosing regime)
- To prescribe until patient reviewed at second clinic visit and eye drops deemed to be of benefit.
- To contact patient's primary care prescriber to request prescribing and monitoring under shared care and send a link to or copy of the shared care guideline.
- To advise the primary care prescriber regarding continuation of treatment, including the duration of treatment
- To discuss any concerns with the primary care prescriber regarding the patient's therapy
- The patient will remain under the specialists' care, who will remain responsible for any ongoing assessment and monitoring.

Responsibilities of the primary care clinician

- To refer appropriate patients to secondary care for assessment
- Confirm the agreement and acceptance of the shared care prescribing arrangement and that supply arrangements have been finalised (see appendix for template letter). Or To contact the requesting specialists if concerns in joining in shared care arrangements,
- To report any serious adverse reaction to the appropriate bodies eg: MHRA and the referring specialist
- To continue to prescribe for the patient as advised by the specialist
- GPs are not expected to monitor the drug which is done under the hospital care

- To inform the specialist if the patient discontinues treatment for any reason
- To seek the advice of the specialist if any concerns with the patient's therapy
- To conduct an annual medication review (this should only involve checking that the patient is still under specialist care i.e. clinic letters, which will acknowledge the continuation of therapy, are continuing)

Responsibilities of Patients or Carers

- To be fully involved in, and in agreement with, the decision to move to shared care
- To attend hospital and primary care clinic appointments. Failure to attend will potentially result in the medication being stopped.
- Report any suspected adverse effects to their specialist or primary care prescriber whilst taking the prescribed preparation.
- To read the product information given to them.
- To administer the prescribed preparation.
- Inform the specialist, primary care prescriber or community pharmacist dispensing their prescriptions of any other medication being taken – including over-the-counter medication.

Indication

Severe keratitis in patients which has not improved despite treatment with tear substitutes (Ikervis)

Treatment of severe vernal keratoconjunctivitis (VKC) in children from 4 years of age and adolescents (Verkazia)

Selection of patients

Patients with dry eyes matching the above criteria

Dosage

Apply one drop to the affected eye at bedtime.

Contra-indications and Side effects

The details below are not a complete list and the BNF and the SPC remain authoritative

Usually limited to eye inflammation or discomfort, or blurred vision, but full list via:

https://www.medicinescomplete.com/#/content/bnf/_335847363?hspl=ciclosporin&hspl=eye&hspl=drops#DMD29950811000001104

Monitoring

- Monitoring to be done by the specialist in secondary care.
- Non-specialists in primary care can contact the below number if any queries are not answered by this guidance, although this should be a rarity.

Interactions

The details below are not a complete list and the current BNF and the SPC remain authoritative.
There are no significant interactions for topical ciclosporin preparations.

Additional information

Re-Referral guidelines

The patient will remain under the specialists' care. Ordering information

No specific requirements.

Contacts for Support, education and information

Contact: Office Hours – Specialist Mr. M. Khan

Telephone 01302 644281

Equality and Diversity

Nil

References

Full list of side-effects is given in the summary of product characteristics (SPC), available from www.emc.medicines.org.uk.

https://www.england.nhs.uk/wp-content/uploads/2018/03/responsibility-prescribing-between-primary-secondary-care-v2.pdf

As stated under primary care responsibilities, they should communicate with the specialist to confirm the agreement and acceptance of the shared care prescribing arrangement. This may be through a separate transfer of care form or the form on the sample letter below.

Template letter to primary care prescriber

Dear Prescriber

RE: _____ DOB:____/___/_____ NHS: _____

Address:_____Postcode: _____

Your patient is being started on treatment with ciclosporin 0.1% eye drops (1 drop in the left/right/both *(delete as appropriate)* eyes at night for:

- Severe keratitis in patients which has not improved despite treatment with tear substitutes (Ikervis)
- Treatment of severe vernal keratoconjunctivitis (VKC) in children from 4 years of age and adolescents (Verkazia) *(delete as appropriate)*

This treatment can be prescribed by primary care prescribers under the Traffic Light System under the "shared care" arrangements. This shared care guideline has been approved by the Doncaster and Bassetlaw Area Prescribing Committee.

Will you also please undertake to prescribe for your patient?

The responsibility for monitoring and assessment of the patient on the medication being prescribed will remain with the specialist.

Please acknowledge you are happy to take on shared care by completing and returning the slip below to above address or by secure email to _____

Do not hesitate to contact us if you have any concerns.

Yours sincerely

Clinician's Name/Title

IMPORTANT REMINDER

The prescriber is responsible for monitoring the patient on the medication being prescribed

RE: _____ DOB:____/___/_____ NHS: _____

Address:_____Postcode: _____

☐ I AGREE to take on shared care of this patient

☐ I DO NOT AGREE to take on shared care of this patient

Signed _____

Practice_____ Date_____

This is guidance on the management of a condition not a commissioning arrangement