

Perampanel (*Fycompa*[®])

ESCA: For the adjunctive treatment of partial seizures with or without secondary generalisation in patients over 12 years of age

AREAS OF RESPONSIBILITY FOR THE SHARING OF CARE

This shared care agreement outlines suggested ways in which the responsibilities for managing the prescribing of perampanel for epileptic seizures can be shared between the specialist and general practitioner (GP). You are **invited** to participate however, if you do not feel competent to undertake this role, then you are under no obligation to do so. In such an event, the total clinical responsibility for the patient for the diagnosed condition remains with the specialist.

Sharing of care assumes communication between the specialist, GP and patient. The intention to share care will be explained to the patient by the specialist initiating treatment. It is important that patients are consulted about treatment and are in agreement with it. Patients with epileptic seizures are usually under regular specialist follow-up, which provides an opportunity to discuss drug therapy.

The doctor who prescribes the medication legally assumes clinical responsibility for the drug and the consequences of its use.

RESPONSIBILITIES and ROLES

Specialist responsibilities

1. Confirm the diagnosis of epileptic seizures
2. Discuss the potential benefits, treatment side effects, and possible drug interactions with the patient
3. Ask the GP whether he or she is willing to participate in shared care before initiating therapy so that appropriate follow on prescribing arrangements can be made
4. Do baseline monitoring prior to initiation of perampanel
5. Initiate treatment and stabilise dose of perampanel
6. Review the patient's condition and monitor response to treatment regularly
7. A written summary to be sent promptly to the GP i.e. within 10 working days of a hospital outpatient review or inpatient stay
8. Report serious adverse events to the MHRA
9. Ensure clear backup arrangements exist for GPs, for advice and support (Please complete details below)

General Practitioner responsibilities

1. Reply to the request for shared care as soon as practicable i.e. within 10 working days					
2. Prescribe perampanel at the dose recommended					
3. In the patient's notes, using the appropriate read code listed below, denote that the patient is receiving treatment under a shared care agreement					
GP Prescribing System	Read Code	Description	GP Prescribing System	Read Code	Description
EMIS and Vision	8BM5.00	Shared care prescribing	SystemOne	XaB58	Shared care
4. Monitor patient's response to treatment; make dosage adjustments if agreed with specialist					
5. Report to and seek advice from the specialist or clinical nurse specialist on any aspect of patient care that is of concern to the GP, patient or carer and may affect treatment					
6. Refer back to specialist if condition deteriorates					
7. Report serious adverse events to specialist and MHRA					
8. Stop treatment on advice of specialist					

Patient's role

1. Report to the specialist, clinical nurse specialist or GP if he or she does not have a clear understanding of the treatment
2. Share any concerns in relation to treatment with perampanel with the specialist, clinical nurse specialist or GP
3. Report any adverse effects to the specialist or GP whilst taking perampanel
4. Attend regular outpatient appointments with the specialist

BACK-UP ADVICE AND SUPPORT

Trust	Contact details	Telephone No.	Email address:
	Consultant:-		
	Specialist Nurse		

SUPPORTING INFORMATION

Indication	Adjunctive treatment for partial seizures with or without secondary generalisation in patients over 12 years of age	
Dosage and Administration	<p>Perampanel at doses of 4 mg/day to 12 mg/day has been shown to be effective therapy in partial onset seizures.</p> <p>Treatment with perampanel should be initiated with a dose of 2 mg/day.</p> <p>The dose may be increased based on clinical response and tolerability by increments of 2 mg (either weekly or every 2 weeks as per half-life considerations described below) to a maintenance dose of 4 mg/day to 8 mg/day.</p> <p>Depending upon individual clinical response and tolerability at a dose of 8 mg/day, the dose may be increased by increments of 2 mg/day to 12 mg/day.</p> <p>Patients who are taking concomitant medicinal products that do not shorten the half-life of perampanel should be titrated no more frequently than at 2-week intervals.</p> <p>Patients who are taking concomitant medicinal products that shorten the half-life of perampanel should be titrated no more frequently than at 1-week intervals.</p>	
Renal Impairment	Mild	No dose adjustment is required
	Moderate	Not recommended
	Severe	
Hepatic impairment	Mild	Dose increases in patients with mild and moderate hepatic impairment should be based on clinical response and tolerability.
	Moderate	
		For patients with mild or moderate hepatic impairment, dosing can be initiated at 2 mg. Patients should be up-titrated using 2 mg doses no faster than every 2 weeks based on tolerability and effectiveness.
		Perampanel dosing for patients with mild and moderate impairment should not exceed 8 mg
	Severe	Not recommended
Contra-indications / Special precautions	Please refer to SPC	
Side Effects	Please refer to SPC	
Monitoring	<p>No additional monitoring required than is standard for anti-epileptic medication. As with all AEDs monitor for signs of suicidal ideation and behaviours and consider appropriate treatment</p> <p>Patient's response should be monitored when they are switching from concomitant non-inducer anti-epileptic medicinal products to enzyme inducing medicinal products and vice versa. Depending upon individual clinical response and tolerability, the dose may be increased or decreased 2 mg at a time.</p>	
Drug Interactions	Please refer to SPC	

Please note the information included in this document is correct at the time of writing. The manufacturer's Summary of Product Characteristics (SPC) and the most current edition of the British National Formulary should be consulted for up to date and more detailed prescribing information.

References

[Perampanel SmPC](#)

Perampanel BNF

I agree to participate in this shared care agreement for the treatment of the below named patient with perampanel for epileptic seizures.

General Practitioner

Name (please print) _____ Signature _____ Date _____

Hospital Specialist/Consultant

Name (please print) _____ Signature _____ Date _____

Patient's name	Date of birth	Sex	Home Address	Hospital Number
				NHS Number

Please keep a copy of this agreement for your own records and forward the original to the above named Consultant at: