

COVID-19 Care in the Community - Case Management in Pharmacy Operational Guide

March 2022 v3

Medication Management Consult: Clozapine

Eligibility Criteria:

- Clozapine clients in COVID-19 mandatory isolation including:
 - Clients who are COVID-19 positive.
 - Clients who are considered household contacts of a person who is COVID-19 positive.
- Referrals for this service may come from:
 - Prescriber via email or phone or noted on prescription.
 - Welfare or other agencies such as Tihei Mauri Ora and the local hubs who provide support.
 - Health Hawke's Bay.
 - General Practice.
 - DHB services.
 - Pharmacy staff.
 - Client self-referral.
- This service allows for and funds:
 - A pharmacist to provide in-depth medication management of clozapine
- Other services which can also be claimed separate to this service, if required, are:
 - Prescription Co-payment Reimbursement
 - Medication Delivery

Background

Blood monitoring is a mandatory requirement for clients taking clozapine to manage their risk of experiencing agranulocytosis. Blood tests are generally taken weekly during the first 18 weeks of treatment. If no abnormalities are detected in the first 18 weeks, the interval is normally increased to four-weekly.

Risks to consider in clozapine clients who are self-isolating are:

- Clients will not be able to leave home to get a blood test.
- Self-isolating clients may change their smoking habits, affecting plasma clozapine levels.
- Self-isolating clients may change diet and activity increasing the risk of constipation.
- Clozapine metabolism may be affected by infection.
- Some of the symptoms of COVID-19 and agranulocytosis overlap.
- Clozapine and COVID-19 infection are both associated with a small but significant risk of myocarditis.

Planning for COVID-19 in the community

It strongly recommended that the Pharmacy plan for the event of a clozapine client isolating by discussing:

- Contact details:

- Ensure the pharmacy has the current contact details for the client, the G.P and the case worker.
- Ensure the client has the current details for the pharmacy, the G.P and the case worker.
- Symptoms of infection

It is important to educate all clozapine clients on symptoms of infection, so that they know when to contact their prescriber and case worker. Symptoms of infection include fever, sore throat and flu-like symptoms.

Steps to take once is in isolation

Once the Pharmacy is alerted that the clozapine client is isolating;

1. Contact the client and discuss the following:

If this happens...	...then do this
Symptoms of mild infection, including fever, sore throat and flu-like symptoms.	Liaise with their G.P. and/or case worker to consider an in-home blood test .
Symptom of <u>SEVERE</u> infection, fever with shaking and sweating, significant fatigue eg unable to get out of bed, and significant flu like symptoms	Liaise with case work to arrange an <u>URGENT</u> in-home blood test +/- clinical assessment by doctor.
Constipation <i>Moderate to severe abdominal pain which lasts for more than one hour.</i>	Start laxatives at home. Contact case worker if laxatives not available at home. <i>Urgent review is needed, contact their GP or case worker immediately.</i>
Sedation, , new onset hypersalivation, Severe constipation, Severe respiratory symptoms	Call case worker and arrange urgent mental health team review. <i>Urgent review is needed, contact their GP immediately.</i>
Chest pain, tachycardia.	<i>Urgent review is needed, contact their GP Or advise to call 111</i>
Changes in smoking habits.	If the clozapine client is a smoker, discuss that smoking has an impact on clozapine levels. If a clozapine client stops smoking, their clozapine levels can become elevated. Check whether they have access to cigarettes. Nicotine Replacement Therapy may be considered but does not have the same effect as cigarette smoke. Advise the client of adverse effects of increased clozapine levels to monitor, e.g sedation and new onset hypersalivation or constipation. If the client ceases smoking for more than two weeks, advise that they may require a blood test and to discuss this with their case worker.

2. Connect with the client's case worker and discuss what the plans are for the following:
 - Blood testing arrangements.

Decisions and arrangements for blood tests will be made by the case worker and/or prescriber. There is no need for a client to have a blood test while they are in isolation if they have no signs of infection. Clients who are due for a blood test while they are in isolation may have their testing period extended until they are out of isolation.

- Quantity of supply medicines

Clients who are due for a new prescription of clozapine while they are in isolation may have a top up supply prescribed by the client's usual prescriber until they reach the end of their isolation period and are able to have a blood test.

For further information on the process for management of clozapine patients please refer to the national document: Caring for clozapine clients in self-isolation for COVID-19 Care in the Community Programme [online]. Jan 2022. Available from:

https://www.health.govt.nz/system/files/documents/pages/caring_for_clozapine_clients_in_self-isolation_for_covid-19_care_in_the_community_programme.docx

Tools available:

- [Patient fact sheet: COVID-19 Seeking medical help – when and how](#)
- [ISBAR communication framework between health care workers](#)

References:

1. MOH, Caring for clozapine clients in self-isolation for COVID-19 Care in the Community Programme [online]. Jan 2022. Available from: https://www.health.govt.nz/system/files/documents/pages/caring_for_clozapine_clients_in_self-isolation_for_covid-19_care_in_the_community_programme.docx (accessed Feb 2022).
2. Medsafe. Clozapine and achy breaky hearts (myocarditis and cardiomyopathy). Prescriber Update 2008;29:10–2.

Authored by: Brendan Duck

Reviewed by: Riani Albertyn

Acknowledgements: Thanks to Sue Watson for content contribution and guidance.

Disclaimer: The information and advice contained in this document is intended for health professionals and based upon evidence from available resources at our disposal at the time of publication, and reflects best practice. However, this information is not a substitute for clinical judgment and individualised medical advice. Health Hawke's Bay accepts no responsibility or liability for consequences arising from use of this information.