

Modified NPT monitoring during COVID-19

To help delay the spread of coronavirus, protect patients and reduce pressure on NHS services at this challenging time the Rheumatology specialty have agreed to modify the NPT monitoring requirements for a number of medications. Please note the following guidance is intended for use in the context of results that are within accepted parameters as per current NPT agreement. If blood test results fall outwith accepted parameters please discuss with specialty involved. These guidelines will be reviewed by 28 February 2021 or at the end of the COVID outbreak whichever comes sooner.

Many thanks with your ongoing assistance,
GGC Rheumatology MCN

Drug name	Current monitoring requirements	Modified monitoring during COVID-19
Methotrexate	<p>Every 2 weeks until patient on stable dose for 6 weeks Then monthly for 3 months Then once every 3 months (providing patient not also co-prescribed leflunomide)</p> <p>If dose increase - increase blood tests to every 2 weeks for 6 weeks then revert to previous schedule</p>	<p>2 weeks after start of treatment 6 weeks after start of treatment 3 months after start of treatment Then once every 6 months (until end of temporary monitoring guidance (31st October 2020) and review of ongoing monitoring protocol(providing patient no also co-prescribed leflunomide when monitoring should not exceed once every 2 months)</p> <p>If dose increase – needs blood tests to at 2 weeks, 6 weeks, 12 weeks then 6 monthly</p>
Sulfasalazine	<p>Every 2 weeks until patient on stable dose for 6 weeks Then monthly for 3 months Then once every 3 months for 1 year</p> <p>If dose increase - increase blood tests to every 2 weeks for 6 weeks then revert to previous schedule</p>	<p>2 weeks after start of treatment 6 weeks after start of treatment 3 months after start of treatment Then once every 6 months Monitoring can stop after 12 months if stable</p> <p>If dose increase – needs blood tests to at 2 weeks, 6 weeks, 12 weeks then 6 monthly</p>

Leflunomide	<p>Every 2 weeks until patient on stable dose for 6 weeks Then monthly for 3 months Then once every 3 months (providing patient not also co-prescribed methotrexate)</p> <p>If dose increase - increase blood tests to every 2 weeks for 6 weeks then revert to previous schedule</p>	<p>2 weeks after start of treatment 6 weeks after start of treatment 3 months after start of treatment Then once every 6 months until end of temporary monitoring guidance period (31st October) and decision made regarding ongoing monitoring protocol(providing patient no also co-prescribed methotrexate when monitoring should not exceed once every 2 months)</p> <p>If dose increase – needs blood tests to at 2 weeks, 6 weeks, 12 weeks then 6 monthly</p>
Azathioprine	<p>Every 2 weeks until patient on stable dose for 6 weeks Then monthly for 3 months Then once every 3 months</p> <p>If dose increase - increase blood tests to every 2 weeks for 6 weeks then revert to previous schedule</p>	<p>2 weeks after start of treatment 6 weeks after start of treatment 3 months after start of treatment Then 6 monthly until end of temporary monitoring guidance (31st October) and decision made regarding ongoing monitoring regarding ongoing monitoring protocol</p> <p>If dose increase – needs blood tests to at 2 weeks, 6 weeks, 12 weeks then 6 monthly</p>
Penicillamine	<p>Every 2 weeks until patient on stable dose for 6 weeks Then monthly for 3 months Then once every 3 months</p> <p>If dose increase - increase blood tests to every 2 weeks for 6 weeks then revert to previous schedule</p>	<p>2 weeks after start of treatment 6 weeks after start of treatment 3 months after start of treatment Then once every 6 months until end of temporary monitoring guidance (31st October) and decision made regarding ongoing monitoring protocol</p> <p>If dose increase – needs blood tests to at 2 weeks, 6 weeks, 12 weeks then 6 monthly</p>