*IMPORTANT - UPDATE re IV PABRINEX SHORTAGE**

IV Pabrinex will be out of stock from August 24 and supplies are now limited. Additional national guidance is awaited.

It is essential to rationalise prescribing and reserve stock for patients at risk of / requiring treatment for Wernicke Korsakoff Syndrome (WKS). Please refer to the table below for approved indications and doses:

Indication	Pabrinex Dose	Notes
Patients at risk of alcohol	2 pairs TDS for 3 days followed by	Commence on CIWA initiation as per
withdrawal	oral thiamine 100mg BD.	EPR. IV administration is essential
		for rapid correction of brain
	Check magnesium level and correct	thiamine levels.
	hypomagnesaemia promptly	
		Magnesium deficiency can impair
		the therapeutic benefit of Pabrinex,
Following initial 24-hour CIWA	Review Pabrinex prescription.	resulting in extended prescribing
monitoring for patients who	consider switching to oral thiamine	
DO NOT require a detox regime	100mg BD for patients who DO NOT	
	have symptoms of WKS	
	(ophthalmoplegia, ataxia, confusion.	
	Maintain high index of suspicion in	
	patients with unexplained	
	hypothermia, hypoglycaemia, coma,	
	unconsciousness)	
Symptoms of WKS	2 pairs TDS for 5 days, if ongoing	
	symptoms OR evidence of	
	improvement, continue Pabrinex 1	
	pair OD for 3-5 days OR as long as	
	improvement continues.	
	Prescribe oral thiamine 100mg BD	
	thereafter	
Re-feeding syndrome:	1 pair OD for 3 days	Patients with oral access/enteral
Patients with no enteral		absorption should receive thiamine
absorption or oral access (e.g.,		100mg BD with Forceval 1 OD for 10
TPN patients) or those who are		days either orally or via feeding tube
severely malnourished and at		
high risk of WKS)		
Hyperemesis gravidarum in	1 pair once weekly, increasing to	
patients unable to tolerate oral	daily/TDS dosing in patients	
thiamine	considered at severe risk of	
	refeeding syndrome	

• Please seek advice from the Alcohol Liaison Team (Ext 5495, bleep 1671) for patients presenting with alcohol withdrawal or Zein Zakir, Clinical Pharmacist, Nutrition Support Team (Bleep 1866) for patients with re-feeding syndrome.