Amber with Guidance= To be initiated and titrated to a stable dose in secondary care with follow up prescribing and monitoring by primary care where deemed appropriate.







## **Acamprosate**

Background Information	Acamprosate is thought to reduce drinking by modulating the brain glutamate function implicated in withdrawal symptoms. The response to this in vivo is that it suppresses the urge to drink in response to learned cues. It is therefore often referred to as the "anti-craving" drug. It is licensed for use in maintaining abstinence in alcohol dependent patients. It is most effective when prescribed as part of a psychosocial treatment package.		
BNF therapeutic	4.10. Drugs used in substance depend	danca	
class	https://doi.org/10.18578/BNF.871371846		
Indication	Maintenance of abstinence in alcohol dependence		
Dosage and administration	<ul> <li>The dose is dependent on the patients' weight: Patients &gt;60kg should take 333mg x 2, three times a day (total 6 tablets)</li> <li>Patients &lt; 60kg should take 333mg x four per day divided throughout the day (total 4 tablets)</li> <li>The recommended treatment period is 12 months and should only be continued for longer following liaison with specialist services.</li> <li>The treatment can be stopped abruptly although many patients prefer to reduce slowly as it gives them more confidence.</li> <li>If a patient has a lapse it may be worth continuing the treatment for a while (e.g. 4 - 6 weeks) as they may re-achieve abstinence. The acamprosate will still be present in the body and levels will not have dropped. If it is clear the patient is not going to re-achieve abstinence the acamprosate should be withdrawn.</li> </ul>		
Cautions and	Cautions:		
Contraindications	Continued alcohol use		
	Contraindications:  Severe hepatic failure e.g. a combination of the following symptoms - ascites, bilirubin > 51, prolonged prothrombin time  Renal failure – avoid if serum creatinine greater than 120 micromol/litre  Pregnancy or breastfeeding		
Adverse Drug Reactions	These are usually mild and transient. The most common are gastro-intestinal symptoms.		
	Side Effect	Suggested Action	
	Abdominal pain/cramps	Should cease, if severe or persistent	
		discuss	
	Nausea/vomiting	Take after food	
	Diarrhoea	Keep hydrated, if severe discuss and	
		consider discontinuation	
	Mood changes/irritability	consider discontinuation Discuss	
	Mood changes/irritability Skin rash/pruritus		
		Discuss	

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Monitoring	Initiation should be by specialist services (Substance Misuse Team or Shared Care GP practices). There are no specific recommendations regarding monitoring of LFTs, however, it may be prudent to check them every 6 months.  Patients should be monitored for abstinence at least monthly for 6 months, less frequently if continued on treatment after 6 months.  Because the interrelationship between alcohol dependence, depression and suicidality is well-recognised and complex, it is recommended that alcohol-dependent patients, including those treated with acamprosate, be monitored for such symptoms.
Interactions	None reported. Acamprosate does not interact with alcohol.

## **Contact names and details**

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## **References**

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This guidance was approved at the APC on 14<sup>th</sup> October 2020.

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