

Guidance for Switching Phyllocontin® (aminophylline MR tablets) to Uniphyllin Continus® (Theophylline MR tablets)

Aminophylline and theophylline are methylxanthine medicines used in the management of bronchospasm associated with asthma, COPD and chronic bronchitis in adults, and in the management of asthma in children.

In February 2021 an alert was issued advising that Phyllocontin® (aminophylline MR tablets) are to be discontinued in the UK. The alert can be accessed [here](#).

The alert advises that all patients are reviewed and their inhaled therapies optimised, however, due to the number of patients within Barnsley who will be affected it is not possible for all patients to be reviewed before supplies will be exhausted.

Patients can be switched in line with the recommendations below and discussions are underway with the relevant specialist teams to plan how these patients can be scheduled for treatment review.

Current dose of Phyllocontin®	Recommended dose of Uniphyllin Continus®
225mg twice daily	200mg twice daily
225mg mané and 450mg nocté	300mg twice daily
350mg twice daily	300mg twice daily
450mg twice daily	400mg twice daily

The CAS alert states that therapeutic drug level monitoring should be undertaken when patients are switched from aminophylline to theophylline. However local opinion from clinical experience is that monitoring of theophylline levels is not routinely required for patients switching from Phyllocontin® to Uniphyllin Continus®. Patients should be advised to report symptoms suggestive of toxicity or a reduction in disease control. Side effects that could indicate toxicity include nausea, vomiting, epigastric pain, haematemesis, restlessness, hypertonia, exaggerated limb reflexes, convulsions, hypotension and sinus tachycardia.

For any doses outside of the above range, patient specific advice can be obtained via the Medicines Information service at Barnsley Hospital: email medicine.information@nhs.net or tel 01226 432857.