

Reference:	FOI.9961.22
Subject:	Thyroid disorders and T3/Liothyronine
Date of Request:	30 September 2022

Requested:

Please make available details of the policies, guidelines/guidance, etc., within Hywel Dda regarding:

1. Testing blood for Free T3
2. Prescribing Liothyronine
3. Dispensing of Liothyronine

These should include GP and hospital/consultant levels.

Response:

1. Hywel Dda University Health Board (UHB) has provided a copy of its guidance for the blood testing of Free T3 at Attachment 1.
2. & 3. The UHB operates in accordance with the 'Medicines Identified as Low Priority for Funding in NHS Wales' guidance issued by the All Wales Medicines Strategy Group (AWMSG), which can be accessed via this link: <https://awttc.nhs.wales/files/guidelines-and-pils/medicines-identified-as-low-priority-for-funding-in-nhs-wales-november-2019-update-pdf/>

For ease, the UHB can confirm the recommendation detailed within the guidance is:

“Within NHS Wales it is recommended that liothyronine is not routinely prescribed for treating primary hypothyroidism in patients who are not under the care of an endocrinologist. After initiation and a period of oversight by the endocrinologist, it may be appropriate for ongoing prescribing of liothyronine to be continued in primary care.

In rare situations where patients experience continuing symptoms whilst on levothyroxine (that have a material impact upon normal day to day function), and other potential causes have been investigated and eliminated, **a 3 month trial with additional liothyronine may occasionally be appropriate. This is only to be initiated by a consultant NHS endocrinologist. Following this trial the consultant NHS endocrinologist will advise on the need for ongoing liothyronine.** Many endocrinologists may not agree that a trial of levothyroxine/liothyronine combination therapy is warranted in these circumstances and their clinical judgement is valid given the current understanding of the science and evidence of the treatments.”

Within the UHB, patients taking liothyronine in Primary Care were reviewed before the pandemic to ensure they were all undergoing regular thyroid function tests and that they were under the care of a Consultant. We would not expect a GP to start liothyronine without the involvement of a Consultant.

Additionally, GPs will only be able to prescribe on an NHS prescription if the guidance is met: "Patients who are currently obtaining supplies via private prescription or self-funding should not be offered NHS prescribing unless they meet the criteria in this guidance".