

## Apomorphine Shared Care Guidelines

|   |  |                        |
|---|--|------------------------|
| <b>Introduction</b>                         | <b>Specialist Details</b><br><br>Name: _____<br><br>Location: _____  | <b>Patient Details</b> |
| <b>Hospital Specialist Responsibilities</b> | <p><b>Indication:</b> Apomorphine is a dopamine agonist licensed for use in patients with advanced Parkinson's disease who have frequent and/or severe akinesia ("off periods") not controlled by levodopa or other dopaminergic treatments. It is given as a continuous subcutaneous infusion, usually over 12 hours, or as an intermittent injection, at the onset of an "off-period".</p> <p><b>Adult Dosage and administration:</b> Dose calculated for individual patient dependant on Apomorphine challenge, and will be confirmed for each patient in the Clinic Letter. Doses would not <i>normally</i> exceed 4mg/hour.</p> <hr/> <p><b>Initial investigations:</b> ECG, FBC, reticulocyte count and Coombes test(haemolytic anaemia)<br/><b>Initial regimen:</b> Domperidone pre-loading to reduce nausea and vomiting. Threshold dose and effective dose determined during a period of in-patient monitoring. Patient and carer education prior to discharge.</p> <p><b>On-going Clinical monitoring:</b> For effectiveness and adverse effects. Reduction of domperidone after 2-3 months. On-going adjustment of apomorphine dose.<br/><b>Frequency:</b> Initially as inpatient, typically 1 to 3 monthly until stabilised, either as outpatient or home visit monitoring.</p> <p><b>Safety monitoring:</b> FBC, reticulocyte count and Coombes test.<br/><b>Frequency:</b> at outset.</p> <p><b>Prescribing arrangements:</b> Hospital initiated. Transferred to GP once stabilised (minimum 3 months).<br/><b>Documentation:</b> Clinic letters including treatment changes to GP, copies to patient.</p> |                        |

**GP  
Responsibilities**

**Maintenance prescription:**

s/c infusion: 1-4mg per hour, doses will not normally exceed 100mg/per day.  
Intermittent s/c injection: individualised dose as at transfer of care.

**Clinical monitoring:** Routine care

Frequency: As required for routine care.

**Safety monitoring:** FBC, Reticulocyte count and Coombes test at 6 months and every 6 months thereafter.

**Duration of treatment:** Indefinite, or until no longer considered appropriate.

**Documentation:** Blood results and adverse events - letter to consultant.

**Adverse Effects,  
Precautions and  
Contraindications**

| Adverse Event  | Action   |
|--|--|
| Nausea , vomiting  | Domperidone 10 mg 3 times per day, if not contra-indicated following ECG |
| Significant clinical deterioration( motor, confusion, hallucinations, psychosis) | Contact consultant or movement disorder nurse specialist                 |
| Significant skin irritation/nodules  | Contact movement disorder nurse specialist                               |
| Abnormal FBC   | Contact consultant or movement disorder nurse specialist                 |
| Haemolysis and/or +ve Coombes test   | Contact consultant or movement disorder nurse specialist                 |

**Contraindications:**

- Pregnancy and breast feeding
- Respiratory or CNS depression
- Hepatic impairment
- Neuropsychiatric problems or dementia

As with all medication for Parkinson's Disease, and as a factor of the disease patients may develop hypotension.

**Other  
information**

It is usually possible to withdraw domperidone after 2 to 3 months (this will be managed by the hospital team). Other anti-parkinsonian medication maybe reduced or withdrawn by the specialist team. Movement disorder Nurse Specialist is available if concerns arise.

Supplies of apomorphine, along with sundries will be made direct to patient's requested pharmacy.

Once mixed for use apomorphine is only stable for 48 hours.

Communication

Patients are provided with contact details of Movement disorder team and contact for Britannia Pharma helpline (0844 880 1327). All clinic letters will be copied to patient.  
Movement Disorder Specialist Nurses,  
Darlington Memorial Hospital, Hollyhurst Road,  
Darlington, County Durham  
DL3 6HX  
Tel: 01325 743000

This document can not be inclusive of all prescribing information and potential adverse effects. Full prescribing information is available from the manufacturers Summary of Product Characteristics available at [emc.medicines.org.uk](http://emc.medicines.org.uk)

**Written: August 2011, updated January 2015 Sister Alison Rose.**

Approved by County Durham & Darlington Area Prescribing Committee March 2015

**Review Date: January 2018**