

## Information from BOB ICB – September 2025

### **Levemir® (insulin detemir) FlexPen® 100units/ml solution for injection 3ml pre-filled pens and Levemir® Penfill 100units/ml solution for injection 3ml**

Clinicians should not initiate new patients on any Levemir product and must start to implement insulin switches for all existing Levemir patients in line with the following guidance: [Levemir Discontinuation Guideline Final\\_110825\\_17d277acd3.pdf](#) and [Medicines Supply Notification \(MSN\), MSN/2025/036U](#)

Within BOB there are 1,932 people on Levemir. This includes people with type 1, type 2, type 3c (pancreatic), and gestational diabetes. Levemir will be unavailable from December 2026. Due to the significant numbers of patients and complexities of switching, we recommend clinicians should start to identify and switch patients at their **next annual review**. To help identify patients, Ardens Searches can be found under Population Reporting > Ardens Searches > 2.15 Prescribing – CAS alerts > Supply Disruptions.

### **Who should action the switch?**

Clinical review by a competent clinician is essential before switching to an alternative insulin. **The clinician responsible for the patient's diabetes care should carry out the review and switch at their next annual review.** This may be the GP, secondary care specialist team or the community diabetes service. The ICB is working closely with the specialist diabetes teams to co-ordinate identification of people using Levemir whose diabetes care they are responsible for.

### **Key Points**

Clinicians should:

- not initiate new patients on any Levemir® product; and
- begin implementing insulin switches for all existing Levemir® patients in line with the [clinical guidance](#).

Local teams should avoid initiating widespread switches without checking the current supply overview of alternative insulins to reduce the risk of precipitating a supply disruption of these products.

As recommended in the clinical guidance, clinicians should aim to diversify prescribing across available alternatives to reduce supply risk where possible.

In addition to consulting the clinical guidance, when prescribing alternatives, consider manual dexterity, vision, and whether additional support is required for administration, and:

- ensure that all patients/carers are counselled on dose to be administered
- specifically tell patients/carers that the delivery device will be changing as a result of switching insulins
- provide patients/carers with training on the use of their new device, as well as appropriate ancillaries, including signposting to training videos; and
- advise patients that closer monitoring of blood glucose levels is required initially, and their insulin dose may need to be adjusted.

The following table is correct on date of publication (Aug 2025), see [Specialist Pharmacy Services \(SPS\) Shortages Tracker](#) for the most up to date information :

Insulin type		Supply overview	
Insulin type	Brand name and devices	Stock status	Ability to support increased demand
Insulin glargine U100 (Long acting)	Abasaglar KwikPen	In stock	Cannot support
	Abasaglar cartridges	In stock	Cannot support
	Lantus SoloStar	In stock	Can support
	Lantus cartridges	In stock	Can support
	Semglee pre-filled pens (biosimilar)	In stock	Can support
Insulin glargine U300 (Ultralong acting)	Toujeo SoloStar	In stock	Can support
	Toujeo DoubleStar	In stock	Can support
Insulin degludec (Ultralong acting)	Tresiba U100 FlexTouch	Out of stock until early January 2026	Cannot support
	Tresiba U100 cartridges	In stock	Can support
	Tresiba U200 FlexTouch	In stock	Can support
Human isophane insulin (intermediate acting)	Humulin I KwikPen	In stock	Cannot support
	Humulin I cartridges	In stock	Cannot support

*Please note, Semglee is the first line Insulin Glargine across BOB for those where pre-filled pens are preferred – see local formularies.*

If there is any uncertainty seek advice and guidance or refer to community / specialist diabetes services, or discuss at your next Diabetes MDT meeting.

- Bucks: 01494 323030 / [buc-tr.communitydiabeticspecialistnurses@nhs.net](mailto:buc-tr.communitydiabeticspecialistnurses@nhs.net)
- Oxon: [diabetesdialogue@nhs.net](mailto:diabetesdialogue@nhs.net)

- Berks West: 0118 904 1750 / [diabetesnursereferrals@berkshire.nhs.uk](mailto:diabetesnursereferrals@berkshire.nhs.uk)