The role of thiamine & Vit B Co Strong in alcohol-use disorders

Wernicke’s encephalopathy is a state of mental confusion, ataxia and ophthalmoplegia that may develop in problem drinkers. People who are alcohol-dependent are often malnourished and deficient in vitamins, particularly in thiamine (B1), due to poor diet, poor absorption, and a high demand for the vitamin – thiamine has a role as a co-enzyme in alcohol metabolism.

Patient assessment should involve a clinical history and examination, including LFTs. A full history of alcohol intake should also be taken. Dietary advice needs to be provided to reduce or prevent malnourishment.

WHO SHOULD BE OFFERED THIAMINE SUPPLEMENTATION AND WHAT DOSE SHOULD BE PRESCRIBED?

## Oral thiamine should be offered to dependent drinkers when:

- They have decompensated liver disease
- They are in acute alcohol withdrawal
- Medically-assisted alcohol withdrawal is planned and
  - They are malnourished or have a poor diet
  - There is weight loss/reduced BMI
  - There is a loss of appetite or nausea and vomiting are present

Unless there is severe malnutrition, oral thiamine should be prescribed as:

- thiamine 200 – 300mg per day (in divided doses) whilst the patient is undergoing assisted withdrawal, or are drinking excessively
- thiamine 50mg as a single daily dose during the maintenance stage following withdrawal, and for as long as malnutrition may be present.
- In chronic alcohol dependence oral thiamine may need to be continued indefinitely.

WHO SHOULD BE OFFERED VITAMIN B COMPOUND & VITAMIN B COMPOUND STRONG TABLETS?

- Vitamin B compound & vitamin B compound strong tablets are combinations of various B vitamins, including thiamine. They have been used historically in patients with alcohol-use disorder. However, NICE (CG 100) makes NO reference to the use of these preparations due to a lack of evidence – neither of these products contains enough thiamine for treatment/prophylaxis of Wernicke’s encephalopathy (1mg thiamine per Vit B co tab, 5mg thiamine per Vit B co strong tab).
- Vitamin B compound & vitamin B compound strong tablets are licensed for the treatment of clinical and subclinical vitamin B deficiency states. With the exception of vitamin B12, deficiency of B vitamins is rare in the UK and is usually treated by preparations containing thiamine (B1), riboflavin (B2) and nicotinamide.

Summary:

The use of Vitamin B Compound or compound strong in alcohol dependence for the treatment or prophylaxis of WKS is NOT recommended. IF using Vitamin B for other indications it is recommended to use vitamin B co strong tablets

*Vitamin B compound: 28 tablets = £26.63
*Vitamin B compound strong: 28 tablets = £1.55

The annual spend by GP & CSR CCGs for these items is considerable. Over the coming months the Medicines Optimisation Team will be reviewing the prescribing of all vitamin B products.

To contact the Medicines Optimisation Team please phone 01772 214302

Reference 1: https://www.nice.org.uk/guidance/CG100/chapter/1-Guidance