

Pharmacy Information Notice

From **Sarah McDonald – Principal Pharmacist
Clinical Services** *Number* **2025/01**

To **All prescribers, pharmacy and nursing staff** *Date* **17/01/2025**

Subject **Switch from unlicensed thiamine injection to Vitamins B + C Intravenous High Potency**

As a result of a shortage of Pabrinex® Intravenous (IV) injection and the discontinuation of Pabrinex® Intramuscular (IM) injection, an unlicensed preparation of thiamine injection has been in use in recent months as an alternative. A new generic Vitamins B + C Intravenous High Potency injection is now available for use. This product is similar to Pabrinex® Intravenous (IV) injection and contains two ampoules.

Ampoule 1 (5 ml) contains: Thiamine hydrochloride (Vitamin B1) 250 mg, Riboflavin (as Phosphate sodium) (Vitamin B2) 4 mg, Pyridoxine hydrochloride (Vitamin B6) 50 mg.

Ampoule 2 (5 ml) contains: Ascorbic acid (Vitamin C) 500 mg, Nicotinamide (Vitamin B3) 160 mg, Glucose (as monohydrate) 1000 mg.

Vitamins B + C Intravenous High Potency injection will now replace thiamine injection as the recommended treatment for the prophylaxis and treatment of Wernicke's encephalopathy (WE). The recommended dose is 2 pairs (of ampoules 1 and 2) IV three times daily. The dose should be diluted in 50-100 mL of sodium chloride 0.9% or glucose 5% and administered over 30 minutes.

If IV administration is not possible, IM thiamine may be considered at a dose of 200 mg twice daily for up to 7 days.

Thiamine is also currently being used for the prevention and management of Re-Feeding syndrome. Information circulated in the previous [Pharmacy Information Notice 2024/17](#) should continue to be followed, pending a full update of this guideline. A small stock of thiamine injection remains available for this purpose.

Actions:

- Stock lists have been updated and stock of Vitamins B + C Intravenous High Potency injection will be sent to all relevant clinical areas.
- Local guidelines for vitamin prophylaxis and treatment of WE and the prevention and management of Re-Feeding syndrome will be updated.
All new patients who require vitamin prophylaxis and treatment of WE should now be prescribed Vitamins B + C Intravenous High Potency injection

If you have questions please do not hesitate to contact a member of the pharmacy team.