





Reference: 2024/04/04/EDP/01

NOTICE: PUBLICATION OF CHAPTER 16: MENTAL HEALTH CONDITIONS AND CHAPTER 15: MENTAL HEALTH CONDITIONS & SUBSTANCE MISUSE IN THE PRIMARY HEALTHCARE (PHC) AND THE ADULT HOSPITAL LEVEL (AHL) STANDARD TREATMENT GUIDELINES (STGs) AND ESSENTIAL MEDICINES LIST (EML) (As part of the 2024 edition of the PHC and AHL STGs and EML)

The PHC: Chapter 16, Mental Health Conditions chapter and the Adult Hospital Level (AHL): Chapter 15, Mental Health Conditions and Substance Misuse chapter were prioritised for review in the 2020-4 PHC and Adult Hospital Level (AHL) review cycle. In March 2024 NEMLC published updates to both chapters. The 2020-4 review update includes the following key medicine revisions and additions to the chapter. Please refer to the chapter and corresponding NEMLC reports and evidence-based medicine reviews for detailed explanations of the medicine, editorial and general measures amendments made to the STGs and EML.

KEY MEDICINE AMENDMENTS: PHC CHAPTER 16: MENTAL HEALTH CONDITIONS

The PHC Mental Health Conditions Chapter, was updated to include "Doctor prescribed" for all schedule 5 medicines as PHC nurses with section 56(6) permit are prohibited to prescribe schedule 5 medicines.

- 16.1.2 AGGRESSIVE DISRUPTIVE BEHAVIOUR IN ADULTS
 - Olanzapine, IM & oro-dispersable: Added as per medicine review.
 - o Midazolam, IM: Deleted, replaced with olanzapine, IM or oro-dispersible.
 - o Haloperidol, IM: Déleted; as supply has been erratic in the South African market.
 - Promethazine, IM: Deleted; as was administered to improve efficacy and mitigate adverse effects of haloperidol, IM.
- 16.1.3 AGGRESSIVE DISRUPTIVE BEHAVIOUR IN CHILDREN AND ADOLESCENTS
 - Haloperidol, IM: Deleted with cross reference to Paediatric Hospital Level STGs and EML (2023 edition) for management, if unresponsive to benzodiazepines.
 - Promethazine, IM: Deleted; as was administered to improve efficacy and mitigate adverse effects of haloperidol, IM.
- 16.5.2 SCHIZOPHRENIA SPECTRUM DISORDERS (SCHIZOPHRENIA)
 - Haloperidol, Oral: Retained with amendment in dosage range as the dose was aligned to the Adult Hospital Level STG - lower end of the dosage range for oral haloperidol was amended for ease of dosing.
 - Flupenthixol decanoate, IM: Retained, with change in level of prescriber and initial dose aligned with maintenance dose.
 - Zuclopenthixol decanoate, IM: Retained, with change in level of prescriber and adjustment of dosing range to align with Adult Hospital level dosing.
 - Anticholinergic, e.g., Orphenadrine, Oral: Added to align with Adult Hospital Level for extrapyramidal side effects.

NOTICE: PUBLICATION OF CHAPTER 16: MENTAL HEALTH CONDITIONS AND CHAPTER 15: MENTAL HEALTH CONDITIONS & SUBSTANCE MISUSE IN THE PRIMARY HEALTHCARE (PHC) AND THE ADULT HOSPITAL LEVEL (AHL) STANDARD TREATMENT GUIDELINES (STGs) AND ESSENTIAL MEDICINES LIST (EML) (As part of the 2024 edition of the PHC and AHL STGs and EML)

16.9.1 SUBSTANCE USE DISORDERS

o For severe anxiety, irritability, and insomnia:

<u>Diazepam, oral:</u> Retained with duration of treatment lowered and aligned with Adult Hospital Level STGs and EML.

KEY MEDICINE AMENDMENTS: AHL CHAPTER 15: MENTAL HEALTH CONDITIONS & SUBSTANCE MISUSE

15.1 AGGRESSIVE DISRUPTIVE BEHAVIOUR IN ADULTS

Olanzapine, IM & oro-dispersable: Added.

Parenteral benzodiazepines (Lorazepam, IM or Midazolam, IM or Clonazepam, IM): Deleted; replaced with olanzapine, IM or oro-dispersible.

Haloperidol, IM: Deleted; as supply has been erratic in the South African market.

 Promethazine, IM: Deleted; as was administered to improve efficacy and mitigate adverse effects of haloperidol, IM.

Under specialist care in psychiatric wards:

- Zuclopenthixol acetate, IM: Retained with low dose initiation added for neuroleptic naïve patients.
- 15.5.2 SCHIZOPHRENIA SPECTRUM DISORDERS

Haloperidol, Oral: Retained with amendment in dosage range.

- Depot antipsychotic, IM (e.g., Flupenthixol decanoate OR Zuclopenthixol decanoate):
 Retained (With downward adjustment of lower dose of zuclopenthixol to be equivalent to the lower dose of flupenthixol).
- Chlorpromazine, Oral: Retained with maximum doses and guidance on divided doses.
- Olanzapine, Oral: Retained with revision from specialist to doctor initiated.
- 15.6 INSOMNIA

o If medication is needed to treat the insomnia:

- Short-acting benzodiazepines, oral (e.g.: Oxazepam): Retained with adjustment to starting dose of Oxazepam.
- 15.8.1 ALCOHOL WITHDRAWAL DELIRIUM (DELIRIUM TREMENS)

Management of hallucinations and agitation:

Haloperidol, Oral: Added.

- Severe agitation and restlessness persisting after adequate doses of benzodiazepines:
 - Haloperidol, IM/IV: Deleted; as supply has been erratic in the South African market.
- 15.8.2 OPIATE (e.g., HEROIN, UNGA, Whoonga, nyaope) WITHDRAWAL

o For Headaches:

Paracetamol, oral: Retained with dose range amended and maximum dose reiterated as per NEMLC approved pain chapters.

The STGs were further strengthened by inclusion of:

psychoeducation of the patient's family regarding certain mental health conditions;

risk assessment;

- management (importance of adherence to medication and psychotherapy/counselling);
- red flags to look out for when the patient is relapsing;

improved and updated definitions and terminology;

 details on policies on manual and mechanical restraint and consideration for pregnany patients requiring restraint;

monitoring and follow up of patients;

 promotion of multidisciplinary approaches (including social workers and occupational therapists) were appropriate;

registered counsellors, as this service is gradually rolling out in the public sector;

- referral of pregnant and breast-feeding women to a social worker to explore social and financial support;
 systems for the patient for better socioeconomic support;
- updated link to the South African Health Products Regulatory Authority (SAHPRA) valproate assessment of risk form and updated risk estimates of adverse effects for valproate;

NOTICE: PUBLICATION OF CHAPTER 16: MENTAL HEALTH CONDITIONS AND CHAPTER 15: MENTAL HEALTH CONDITIONS & SUBSTANCE MISUSE IN THE PRIMARY HEALTHCARE (PHC) AND THE ADULT HOSPITAL LEVEL (AHL) STANDARD TREATMENT GUIDELINES (STGs) AND ESSENTIAL MEDICINES LIST (EML) (As part of the 2024 edition of the PHC and AHL STGs and EML)

- caution box with supporting evidence in section 15.4 Trauma and Stress-Related Disorders to reiterate post-traumatic stress disorder (PTSD) in pregnancy;
- clarification on dose reduction of diazepam-equivalent benzodiazepines and how to adjust diazepam
 dosing if symptoms reappear in section 15.8.6 Benzodiazepine Withdrawal; and
- link to Al-anon, for family and or partners of people who use substances, provided in section 15.8
 Substance Use Disorders.

The updated PHC: Chapter 16, Mental Health Conditions and AHL: Chapter 15, Mental Health Conditions and Substance Misuse chapters with corresponding NEMLC reports and evidence-based medicine reviews can be accessed *via* the e-library on the Knowledge Hub platform (https://knowledgehub.health.gov.za/e-library) or alternatively at https://www.health.gov.za/nhi-edp-stgs-eml/. The STGs and EML will also be made available on the EMGuidance application platform in due course.

The National Department of Health acknowledges the external inputs and comments received during the call for comment phase of the chapter, which were deliberated by NEMLC to produce a locally relevant update of the mental health STGs.

Provinces and Healthcare Facilities are requested to distribute and communicate this information in consultation with the Pharmaceutical and Therapeutics Committees for immediate implementation. Kindly share with all healthcare professionals and relevant stakeholders.

Queries may be submitted via e-mail to:

E-mail: SAEDP@health.gov.za

Kind regards

K Jana ooder MS K JAMALOODIEN

CHIEF DIRECTOR: SECTOR-WIDE PROCUREMENT

DATE: 414 12024