

Guidance for managing Vitamin B12 (Hydroxocobalamin) injections in primary care during the coronavirus pandemic

Should I switch patients from Vitamin B12 injections onto oral treatment?

RCGP has advised¹ that administration of Vitamin B12 can continue if capacity allows. It is also possible to defer injection until the next dose is due. There may be a minority of patients who get symptoms of fatigue when the B12 injection is delayed, despite apparently adequate levels. For these patients GPs should use individual clinical judgement and adjust frequency to match the severity of the symptoms, or consider switching to an oral preparation.

For each patient consider indication, patient factors (e.g. diet, compliance), and available resources.

It is important to explain to patients if they experience any neurological and/or neuropsychiatric symptoms (e.g. pins and needles, burning legs/feet, numbness), they must contact the GP via the telephone, as this could be the first signs of nerve damage due to lack of B12. See [shared care pathology](#) for causes & symptoms of vitamin B12 deficiency.

Options for patients on lifelong therapy with Vitamin B12:

1. **Continue with the 3 monthly injection where possible** is the preferred option
The need for intramuscular (IM) hydroxocobalamin should be discussed with each patient individually. Screening questions for COVID-19 infection should be asked before patients attend their GP surgeries. Alternatives to attending the GP surgery such as local pharmacies or home administration by district nurses should be explored.

If continuing with 3 monthly injection is not possible then

2. **Delay the next Vitamin B12 injection**
(British Society for Haematology⁴ state liver stores last for a year and hence levels of B12 will not be affected if one to two 3 monthly injections are omitted in patients on maintenance parenteral B12 supplements. BSH supports omitting B12 injections even in this group during COVID19 outbreak at least until the surge has passed.)

If above are not viable the options and the patient needs to continue with treatment then consider switching to:

3. **High dose oral cyanocobalamin 1000micrograms* (1mg) daily** as an alternative for suitable patients, to cover for the current coronavirus pandemic, provided there is good compliance with treatment. (British Obesity & Metabolic Surgery Society recommended⁵ dosage) However, the patient may not achieve the desired levels of B12 through the oral route in comparison to the IM.

Oral vitamin B12 is poorly absorbed. For patients with pernicious anaemia or patients with neurological symptoms, oral supplementation is not appropriate and should be excluded.

Cyanocobalamin 1mg tablets are available as a food supplement or as a prescription-only medicine (monthly cost £9.99, significantly more expensive). These products may be purchased online or prescribed** if necessary. Prescribers should be aware and explain to patients the risk of using unlicensed products.

If prescribed, ensure mechanism in place to identify and **switch back to IM hydroxocobalamin once pandemic period is over.**

See **appendix 1** for example of oral cyanocobalamin products available to purchase.

*cyanocobalamin has been classified **GREY** for the interim COVID-19 period when prescribed in accordance to this guideline.

**medically diagnosed deficiency, including for those patients who may have a lifelong or chronic condition or have undergone surgery that results in malabsorption

Appendix 1- Where can I buy oral vitamin B12?

Below information are taken from the British Obesity & Metabolic Surgery Society (BOMSS) website.

BOMSS, Royal College of General Practitioners and the British Dietetic Association do not endorse any particular brand of oral supplementation, however patients may wish to source oral vitamin B12 as below. Details are correct at the time of writing.

Note the symbol for micrograms is µg and this may be used on some ingredient lists

Holland and Barrett <https://www.hollandandbarrett.com/>

These are available to order online or by telephone. By telephone, call 0330 058 2025 and select 'option 0'. Opening times for calls are 8:30am - 8:00pm Monday to Friday, 9:00am - 5:00pm on Saturday and 10:00am - 5:00pm Sunday Free standard delivery on orders over £25 otherwise £2.99 for delivery

Vitamin B12 100 Tablets 500microgram - take two daily Timed Release Vitamin B12 100 Tablets 1000 micrograms - take one daily Solgar Vitamin B12 1000microgram 100 Nuggets - take one daily

Myprotein www.myprotein.com

£3.99 delivery charge Vitamin B12 1000microgram 60 tablets -one daily

Reference

1. <https://www.rcgp.org.uk/-/media/Files/Policy/A-Z-policy/2020/covid19/RCGP%20guidance/202003233RCGPGuidanceprioritisationroutineworkduringCovidFINAL>
2. <https://b-s-h.org.uk/guidelines/guidelines/diagnosis-of-b12-and-folate-deficiency/>
3. Derbyshire shared care pathology guidelines- haematology- B12 and folate <https://www.uhdb.nhs.uk/shared-care-pathology-guidelines>
4. <http://perniciuos-anaemia-society.org/articles/b12-injections-stopped-in-part-of-uk-due-to-covid-19-virus/> access via <https://b-s-h.org.uk/about-us/news/covid-19-updates/>
5. <https://www.bomss.org.uk/wp-content/uploads/2020/04/BOMSS-COVID-19-and-vitamin-B12.pdf>

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