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Teriparatide 20mcg/80mcL Pre-Filled Pen

Prescriber criteria: Consultant Rheumatologist
Consultants Endocrinology & Diabetes

Outpatient and Inpatient use:

- Chronic Asthma
- Chronic Kidney Disease
- Chronic Liver Disease
- Chronic Obstructive Pulmonary Disease
- Chronic Respiratory Failure
- Cystic Fibrosis
- Dermatomyositis/Polymyositis
- Inflammatory Bowel Disease
- Lupus Erythematosus
- Malignancy
- Multiple Sclerosis
- Myasthenia Gravis
- Polyarteritis Nodosa
- Polymyalgia Rheumatica
- Rheumatoid Arthritis
- Spondyloarthritis
- Systemic Sclerosis

Patients with the above-mentioned Schedule V condition, with steroid induced osteoporosis where long-term steroids are prescribed; at risk of vertebral fracture (i.e. low Trabecular Z scores).

Duration of Approval:
2 years

Note:
The Summary of Product Characteristics states that the maximum total duration of treatment should be 24 months. The 24-month course should not be repeated over a patient's lifetime.