July 16, 2024

Philip Dickison, PhD, RN
Chief Executive Officer
National Council of State Boards of Nursing
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Chicago, IL 60601-4277
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Dear Dr. Dickison:

The purpose of this letter is to bring to the attention of the National Council of State Boards of Nursing (NCSBN) information related to injectable compounded drug products containing semaglutide or tirzepatide. We encourage you to share the information in this letter with your members for their awareness and consideration.

FDA is aware of increased interest in compounded semaglutide and tirzepatide products. Compounded drug products can serve an important medical need for certain patients. However, compounded drug products, including compounded semaglutide and tirzepatide products, are not FDA-approved. They do not undergo premarket review by FDA for safety, effectiveness, or quality.

FDA has received reports describing patients who experienced adverse events following the administration of compounded semaglutide or tirzepatide products in doses exceeding the recommended dosing or titration schedule for FDA-approved semaglutide and tirzepatide products. The adverse events described in the reports included nausea, vomiting, fatigue, stomach pain, shortness of breath, headache, heartburn, weakness, intestinal blockage, hypoglycemia, impacted bowels, electrolyte imbalances, bowel infection, ketoacidosis, pancreatitis, and rhabdomyolysis. Some of these are serious adverse events and some of the patients reported seeking medical attention for their symptoms.

FDA's ability to derive conclusions about safety concerns from these reports is limited because, for example, compounding pharmacies that are not registered with the FDA as outsourcing facilities generally do not submit adverse event reports to the FDA, and among the reports submitted, reported information varies. However, certain factors noted in the reports that may have contributed to the adverse events include the following:

- Prescribers started patients on doses that were approximately two to four times higher than the recommended starting doses of FDA-approved semaglutide and

tirzepatide products.
- Compounded semaglutide products were prescribed to be administered twice a week instead of once weekly, which is the recommended frequency of administration for FDA-approved semaglutide and tirzepatide products.
- Prescribers titrated the patients' doses every one to two weeks instead of every four weeks, which is the recommended titration schedule of FDA-approved semaglutide and tirzepatide products.

Health care providers and your members may consider information about the potential for adverse events when doses, dose frequencies, or titration schedules vary from those of the FDA-approved products, and when weighing the risks versus benefits and determining appropriate doses and titration and dosing schedules for patients.

FDA encourages health care professionals and compounders to report adverse events or quality problems experienced with the use of compounded drugs to FDA's MedWatch Adverse Event Reporting program:

- Complete and submit the report online at MedWatch: The FDA Safety Information and Adverse Event Reporting Program or

- Download and complete the form, then submit it via fax at 1-800-FDA-0178.

We are also sending this letter to the Alliance for Pharmacy Compounding (APC), the Federation of State Medical Boards, the National Association of Boards of Pharmacy, and the Outsourcing Facility Association, for your awareness.

We look forward to continuing to work with you on matters related to drug compounding. If you have questions, please contact the Office of Compounding Quality and Compliance at compounding@fda.hhs.gov.

Sincerely,

Shannon N. Glueck -S

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