

**Issue date**  
18 July 2022

**Distributed to:**

- Chief Executives
- Directors of Clinical Governance
- Director, Regulation and Compliance Unit

**Action required by:**

- Directors of Clinical Governance

**We recommend you also inform:**

- Drug and Therapeutics Committees
- Directors of:
  - Cardiology
  - Emergency
  - Intensive Care
  - Medical Imaging
  - Medical Services
  - Neurology
  - Nursing
  - Pharmacy
  - Surgical Services

**Expert Reference Group**

- Chief Pharmacist Unit
- ACI Medical Imaging, Cardiology and Stroke Networks
- HealthShare NSW
- State Preparedness and Response Branch

**Clinical Excellence Commission**

Tel: 02 9269 5500

[Email](#)

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[Intranet website](#)

**Review date**  
October 2022

**Disruption to supply – non-ionic iodinated contrast media agents**

*The information in this Safety Notice supersedes SA003/22 released on 17 May 2022.*

**Background**

There is an ongoing disruption to the supply of non-ionic iodinated contrast media. The disruption to supply is due to the recent COVID-19 lockdown in Shanghai, China which impacted on the operational capacity of the production facility and caused the shutdown of normal shipping and airfreight routes out of the city.

The stock situation of contrast media in NSW is gradually improving. The estimated resolution of this disruption to supply is expected in **September or October 2022**.

**Conserving supply and consideration of alternatives**

**The CEC no longer requires facilities to report their stock holdings each week.**

**As the date of normal supply resumption is unconfirmed, stock preservation strategies are to remain in place where required to ensure optimal usage of available supply. This advice is to be considered by Medical Imaging and other clinical departments that utilise contrast or radiology services.** RANZCR have released a statement which can be found [here](#). The American College of Radiology position statement can be found [here](#).

Remaining supply of non-ionic iodinated contrast media agents should be conserved for cases where there is no suitable alternative (for example, interventional neuroradiologists and cardiologists depend on non-ionic iodinated contrast media agents to perform time-critical treatment of acute stroke and myocardial infarction). Factors such as clinical acuity and the nature of the imaging procedure (i.e., interventional versus diagnostic) should be considered.

In the absence of the desired non-ionic iodinated contrast media agent(s), and based on the clinical needs of individual patients, the following actions may be considered:

- use of alternative contrast agents (iodinated and non-iodinated) after consideration of the patient's adverse drug reaction history, renal function and allergies
- use of alternative imaging modalities and/or performing scans without the use of contrast wherever appropriate. Alternative studies may include non-contrast CT, MRI with or without gadolinium-based contrast media, ultrasound with or without contrast agents, nuclear medicine, or PET/CT. For example, use non-contrast imaging for patients presenting to Emergency Departments with shortness of breath (rather than CT angiography) and if necessary, follow up with a VQ scan if pulmonary embolism is suspected
- minimising individual doses administered to conserve stock (lower dose regimes can have comparable efficacy to higher dose regimes)
- reserving high concentration (mg iodine per mL) agents for angiographic studies and multiphase studies, which require optimal vascular visualisation
- delay of scans that are not clinically urgent.

**Contact your local Clinical Product Manager to discuss availability of contrast agents within your facility.**

**Required actions for the Local Health Districts/Networks**

1. Distribute this Safety Notice to all relevant clinicians and clinical departments where non-ionic iodinated contrast media agents are used.
2. Ensure a system is in place to document and review actions taken in response to this Safety Notice and any incidents related to this disruption to supply are notified in the local incident management system.
3. Confirm receipt and distribution of this notice **within 72 hours** to [CEC-MedicationSafety@health.nsw.gov.au](mailto:CEC-MedicationSafety@health.nsw.gov.au)