

Pathway for the management of patients with significant hyperkalemia using potassium binder therapies. Lokelma (Sodium zirconium cyclosilicate) and Veltassa (Patiromer)

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Introduction

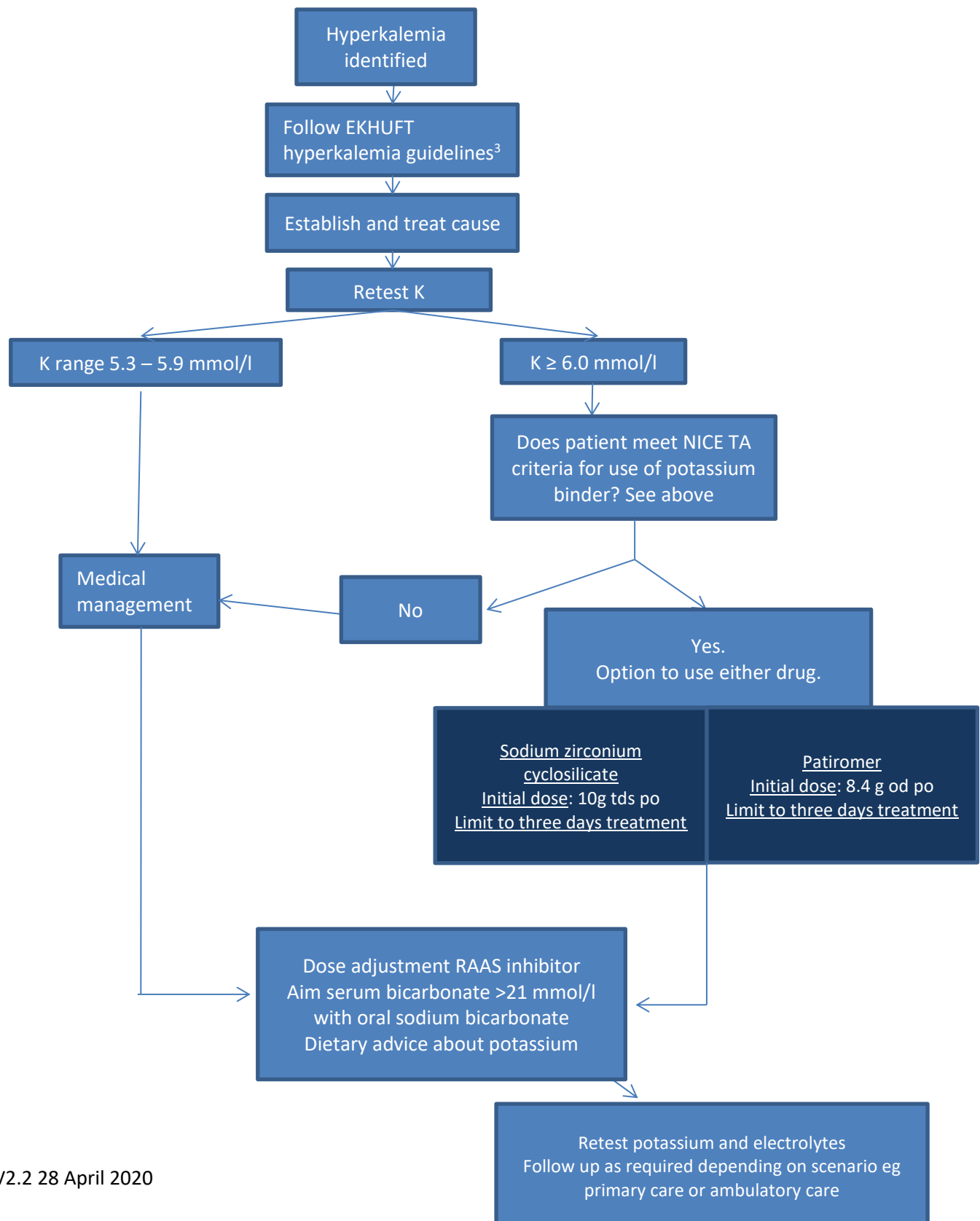
NICE Technology appraisal guidance [TA599]¹ was published for Sodium zirconium cyclosilicate on 4 September 2019. Later, on 13 February 2020, a further [TA623]² was published for Patiromer. These medications are both recommended as an option for treating hyperkalaemia in adults.

There are strict NICE criteria in place for use of these potassium binders, namely in the following scenarios:

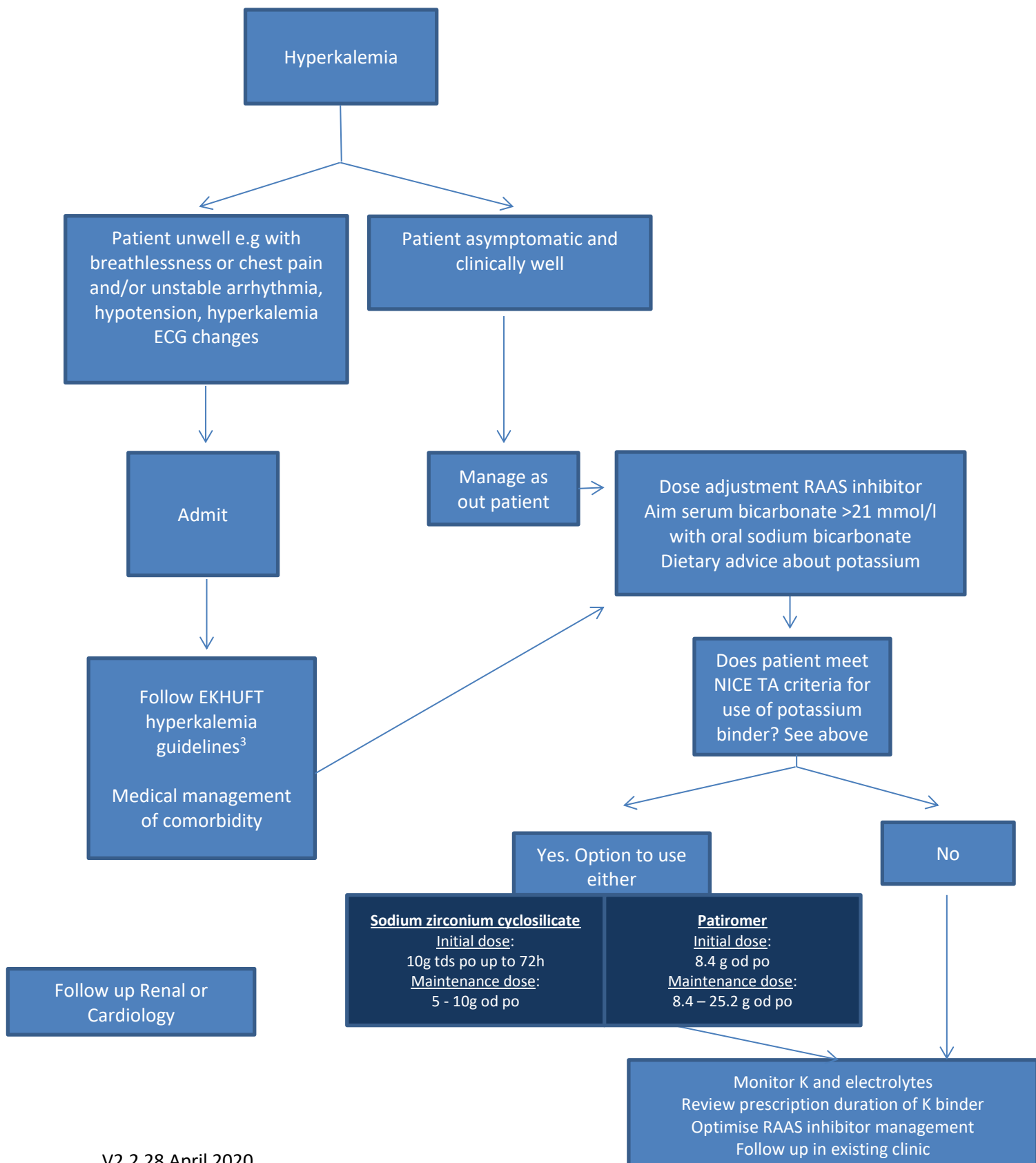
- 1) In emergency care for acute life-threatening hyperkalaemia **alongside** standard care or
- 2) In outpatient care for people with persistent hyperkalaemia and chronic kidney disease stage 3b to 5 or heart failure, if they:
 - a) have a confirmed serum potassium level of at least 6.0 mmol/l
 - b) are not taking an optimised dosage of renin-angiotensin-aldosterone system (RAAS) inhibitor because of hyperkalaemia and
 - c) are not on dialysis

This document covers the use of potassium binders in the above scenarios.

Inpatient pathway or for patients presenting to Accident and Emergency Department with hyperkalemia



Pathway for Outpatient management of patients found to have hyperkalemia



References

- 1) <https://www.nice.org.uk/guidance/ta599/chapter/1-Recommendations>
- 2) <https://www.nice.org.uk/guidance/TA623>
- 3) <http://kchspprd03/DocumentCentre/SitePages/Policies%20and%20Procedures.aspx?RootFolder=%2FDocumentCentre%2FDocument%20Centre%2FSpecialist%20Services%2FRenal&FolderCTID=0x01200031F4AA06110C9B4587F031A8F74CEFB3&View=%7B1F0753C8%2DB6CC%2D4008%2D8796%2D9DF96AE556FC%7D>