Shortage of Co-codamol 30mg/500mg Tablets

Information for patients

What is happening?

There is a **temporary national shortage of co-codamol 30mg/500mg tablets**. This means that there will be very limited supplies until at least the start of June 2026.

There are other strengths of co-codamol tablets but **there are not enough supplies** of these to move everyone onto them.

This is also the same for codeine tablets.

This means your GP or pharmacist may not be able to give you your usual tablets during this time. Paracetamol 500mg tablets are fully available and there is enough to cover the increased demand

What does this mean for me?

If you already take co-codamol 30/500mg tablets regularly:

Co-codamol contains codeine. People who take codeine for a long time can become dependent on it. We don't usually advise people to take co-codamol for a long time. Over the longer term, It often doesn't help your pain as much as you think it does.
Using co-codamol for a long time can cause problems like:

- your body becoming dependent on it
- needing to take more to get the same effect (tolerance)
- side effects such as feeling sleepy, sick or being constipated

We are asking **all** patients (apart from patients who are having treatment for cancer) to start reducing the number of tablets they take. You should do this gradually over the next few weeks and then stop completely.

If you are taking your co-codamol tablets every day, you need to start reducing your tablets now. Do this using the supply you have at this time. The section below (How should I reduce my dose?) explains how you can reduce the number of tablets you take gradually.

If you are not currently taking co-codamol 30/500mg tablets:

No new patients will be started on this medicine until supply levels return to normal.

Why do I need to reduce my dose slowly (taper)?

Stopping co-codamol is not harmful although you should try not to do it too quickly if you are on a higher dose. If you stop taking co-codamol suddenly you might get:

- Headaches
- Feeling sick (nausea)
- Sweating
- Flu-like symptoms
- More pain

These are some of the signs of **withdrawal from codeine**. These withdrawal symptoms are unpleasant, but they are not dangerous. They should settle down as your body adjusts. Slowly reducing the amount of codeine you take can help lower the chances of these withdrawal symptoms happening.

If you have been taking co-codamol for a long time, you might find that your pain increases as you reduce your co-codamol. This is normal and should settle as your body adjusts.

How should I reduce my dose?

If you are taking your co-codamol tablets on a regular (daily) basis you need to start reducing your tablets now, using the supply you have at this time.

The easiest way to do this is to reduce your daily dose of co-codamol by one less co-codamol tablet daily for the first week. You could replace this tablet with one paracetamol 500mg tablet instead.

This means if you used to take 8 co-codamol tablets a day, you should take 7 co-codamol tablets each day for the first week. Then take 6 co-codamol tablets each day for the next week, and so on.

Carry on taking one less co-codamol tablet each day for a week until you only take one or two tablets of co-codamol a day in total. At this point you can completely stop taking co-codamol

Please remember, each co-codamol tablet also contains paracetamol 500mg. Adults can take two 500mg paracetamol tablets, 4 times in 24 hours. You must wait at least 4 hours between doses. Co-codamol tablets also count towards your daily paracetamol total.

The most paracetamol you can take in 24 hours is eight 500mg tablets.

Contact your GP, pharmacist or pain team if you are finding it difficult to reduce the amount of co-codamol you're taking.

What can I do to help?

- **Only take the amount you need.** Follow the plan or other advice your GP or pharmacist has given you to slowly reduce your dose.
- Do not take extra doses
- Don't share your co-codamol with anyone else
- Please do not keep more co-codamol than you need - this makes shortages worse
- Use this as a chance to look at whether co codamol is still right for you.

When will supplies go back to normal?

Supplies may improve **from early June 2026**, but this might change. Your healthcare team will keep you updated.

Who can I contact for help?

You should follow the information in this leaflet about how to reduce the amount of co-codamol you're taking. If you are struggling with this, you can contact:

- Your GP practice – for review of pain control and how to slowly reduce the amount of co-codamol you're taking
- NHS 24 (111) – if you have symptoms that worry you outwith your GP practice or pharmacy opening hours

Additional useful resources:

- The Great Opioid Side Effect Lottery leaflet
- NHS Inform chronic pain
- Ten Footsteps to Living Well with Pain
- Flippin Arthritis webinar
- Flippin Fibromyalgia webinar

How we keep your health information secure

NHS Lanarkshire take care to make sure that only people who are allowed to can access your personal information. Our staff have a legal duty to keep information about your health safe, secure and private.

If you want to learn more about how we do this, you can visit our website at **https://www.nhslanarkshire.scot.nhs.uk/data-protection-notice** You can also ask a member of staff for a copy of our Data Protection Notice.

NHS Lanarkshire - for local services and the latest health news visit www.nhslanarkshire.scot.nhs.uk

NHS Lanarkshire General Enquiry Line: 0300 30 30 243

NHS inform - The national health information service for Scotland.
www.nhsinform.scot
Tel No: 0800 22 44 88

For NHS staff only -

For advice on how to get a leaflet translated for your patients, please contact: **patientinformation@lanarkshire.scot.nhs.uk**

For patient letters, records etc. please email: **translation.services@lanarkshire.scot.nhs.uk**

We may use Copilot to assist in the production of patient leaflets where appropriate.

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