Department of Health & Social Care

NHS England

Medicine Supply Notification

MSN/2026/033

Nifedipine 10mg, 20mg, 30mg and 60mg modified-release tablets

Tier 2 – medium impact*
Date of issue: 23/07/2026
Link: Medicines Supply Tool

Summary

Various brands and strengths of nifedipine modified-release tablets are experiencing supply issues:

- Tensipine® MR 10 and 20 tablets will be out of stock from early August 2026 and early October 2026 respectively. The resupply dates for both strengths are to be confirmed.
- Dexipress® MR 20mg tablets are currently out of stock until November 2026.
- Adalat® LA 30 tablets are out of stock from late July 2026 until late November 2026.
- Adanif® XL 30mg and 60mg tablets have been discontinued.
- Neozipine® XL 30mg and 60mg tablets are currently out of stock until early August 2026.
- Alternative brands of nifedipine modified-release tablets remain available and can support increased demand.
- Coracten® SR 10mg and 20mg capsules, and Coracten® XL 30mg and 60mg capsules remain available and can support increased demand.

Actions Required

Prescribers should not initiate new patients on affected preparations until the supply issues have resolved noting that Adanif® XL products have been discontinued, and ensuring patients are switched to a preparation that has the same dosing frequency e.g. patients on a once daily preparation should be switched to an alternative once daily product.

Where patients have insufficient supplies of **Tensipine® MR 10 tablets** (twice daily preparation) to last until the re-supply date, prescribers should:

- consider prescribing Nifedipress® MR 10 tablets or Coracten® SR 10mg capsules (both twice daily preparations).

Where patients have insufficient supplies of **Tensipine® MR 20 tablets or Dexipress® MR 20mg tablets** (both twice daily preparations) to last until the re-supply date, prescribers should:

- consider prescribing Nifedipress® MR 20 tablets or Valni® 20 Retard tablets or Coracten® SR 20mg capsules (all twice daily preparations).

Where patients have insufficient supplies of **Adalat® LA 30 tablets or Neozipine® XL 30mg tablets** to last until the re-supply date, or are currently prescribed the discontinued **Adanif® XL 30mg tablets** (all once daily preparations), prescribers should:

- consider prescribing Coracten® XL 30mg capsules (once daily preparation); and
- where capsules are unsuitable, review patients on a case-by-case basis; consider prescribing an alternative once daily calcium channel blocker, taking into account licensed indication, allergies, intolerance to any of the excipients, and ensure they are counselled on the change in treatment

*Classification of Tiers can be found at the following link:
https://www.england.nhs.uk/publication/a-guide-to-managing-medicines-supply-and-shortages/

(see Supporting information); or consider reserving some available supplies of Neozipine® XL 30mg tablets (once daily preparation) from early August 2026 as this product can support a partial uplift in demand.

Where patients have insufficient supplies of **Neozipine® XL 60mg tablets** to last until the re-supply date, or are currently prescribed the discontinued **Adanif® XL 60mg tablets** (both once daily preparations) prescribers should:

- consider prescribing Coracten® XL 60mg capsules (once daily preparation); and
- where capsules are unsuitable, review patients on a case-by-case basis; consider prescribing an alternative once daily calcium channel blocker, taking into account licensed indication, allergies, intolerance to any of the excipients, and ensure they are counselled on the change in treatment (see Supporting information).

When prescribing Coracten® capsules (see Supporting information), ensure that the gelatin content is acceptable to patients, there is no intolerance to any of the excipients, and patients are counselled on the change in brand and formulation.

When switching between brands of nifedipine or to an alternative calcium channel blocker, patients may require closer monitoring initially to ensure blood pressure/angina/other symptoms remain controlled, and they should be advised to report any adverse effects.

Supporting information

Clinical Information

Nifedipine 10mg, 20mg, 30mg and 60mg modified-release tablets and capsules are licensed for the treatment of hypertension and the prophylaxis of chronic stable angina pectoris.

For both formulations, the 10mg and 20mg strength are administered twice daily whereas the 30mg and 60mg strength are administered once daily.

The capsule formulation may not be acceptable to some patients on cultural or religious grounds due to its gelatin content.

The BNF highlights that different brands of modified release nifedipine preparations may not have the same clinical effect. To avoid confusion between these different formulations, prescribers should specify the brand to be dispensed.

Amlodipine and felodipine are licensed for the treatment of hypertension and chronic stable angina pectoris. Lercanidipine and lacidipine are only licensed for the treatment of hypertension.

Links to further information
BNF Nifedipine
SmPC Tensipine® MR
SmPC Nifedipress® and Dexipress® MR
SmPC Valni® 20 Retard tablets
SmPC Adalat® LA 30mg
SmPC Neozipine® XL 30mg tablets
SmPC Neozipine® XL 60mg tablets
SmPC Adanif® XL
SmPC Coracten® modified release capsules

Enquiries

If you have any queries, please contact DHSCmedicinesupplyteam@dhsc.gov.uk.