

**JOINT STATEMENT OF THE NORTH CAROLINA MEDICAL AND  
PHARMACY BOARDS CONCERNING CFC AND HFA ALBUTEROL  
METERED DOSE INHALERS**

The United States Food and Drug Administration has ruled that by December 31, 2008, manufacturers may no longer use chlorofluorocarbon (CFC) based propellants in prescription drugs formulated for inhalation, such as albuterol metered dose inhalers. Accordingly, manufacturers are shifting production to metered dose inhalers that use a hydrofluoroalkane (HFA) propellant. As a result, drug wholesalers and pharmacies are experiencing progressively worsening shortages of CFC-based albuterol inhalers as manufacturers phase them out. These shortages will, of course, only increase over time.

The Medical and Pharmacy Boards recognize that patients must have timely access to albuterol as a means of avoiding the morbidity and increased health-care costs associated with poor control of asthma and other respiratory disorders. Furthermore, the medical literature available on the subject indicates no clinical problems associated with substituting CFC-propellant albuterol inhalers with HFA-propellant albuterol inhalers. Finally, recognizing substitution of CFC-propellant albuterol inhalers with HFA-propellant albuterol inhalers will reduce both the number of call-backs to prescribers and the frustration of patients.

Under North Carolina law governing drug product selection, when a prescriber indicates on the prescription that product selection is permitted, pharmacists may substitute HFA-propellant albuterol inhalers for CFC-propellant albuterol inhalers. Therefore, a prescriber who wishes to maintain a patient on a CFC-based albuterol product must clearly indicate on the prescription that no substitution occur. As discussed above, however, CFC-based albuterol inhalers are being phased out and are increasingly unavailable to patients.

Prescribers and pharmacists should consult with their patients who use albuterol inhalers and explain the reason for any switch to an HFA-based product. Prescribers and pharmacists should also take care to reassure these patients that they are continuing to receive the same drug that they previously have used to control their respiratory problems.