Medicine Shortage Communication

6 February 2026

Natpar (parathyroid hormone) 25, 50, 75 and 100 micrograms/dose powder and solvent for solution for injection: end of supply due to marketing cessation (discontinuation)

Dear Healthcare Professional,

Takeda is notifying healthcare professionals about a permanent upcoming stock-out of Natpar.

Overview of situation

- **Due to unresolved manufacturing challenges with Natpar, manufacturing of the 100mcg dose was discontinued in 2022 and manufacturing of all other strengths was discontinued globally at the end of 2024. This information was previously communicated in October 2022[1].**
- **The company has continued to supply any remaining stock where available but will cease distribution prior to the planned withdrawal of the marketing authorisation of Natpar, scheduled on 01 July 2026.**
- **The last lot of pen devices of Natpar will expire on 30 Jun 2026; patients should be advised not to use the Natpar pen beyond its expiry date. Patients should be informed that, after this date, any remaining packs should be returned to the pharmacy or hospital from which they were received.**
- **Below are the current anticipated stock-out dates in <insert country>: Please note these dates are approximate and are based on historical trends in usage, which may not accurately reflect future demand.**

  25mcg: <insert date here>

  50mcg: <insert date here>

  75mcg: <insert date here>

  100mcg: Unavailable since October 2022

Mitigation measures

In order to manage the market cessation and any associated risk of shortages, the marketing authorisation holder (MAH) is engaging with the European Medicines Agency (EMA) and [National Competent Authority] on mitigation measures.

In preparation for the discontinuation, healthcare professionals should follow the below advice:

- **Do not prescribe Natpar to new patients.**
- **For existing patients and while stocks last, a reduced dose should be prescribed, if this is an option. Dose reductions increase the risk of hypocalcaemia. When reducing Natpar treatment, it is very important to**

[1] Natpar - direct healthcare professional communication (DHPC) | European Medicines Agency (EMA)

closely monitor serum calcium levels and monitor patients for signs and symptoms of hypocalcaemia, while carefully adjusting active vitamin D and supplemental calcium doses in all patients. Patients should be informed about the signs of hypocalcaemia (see section 4.8 List of adverse reactions in the SmPC[2] for Natpar) and when they should inform their doctor.

- **Patients should be switched in time to a suitable alternative therapy, where appropriate and in line with relevant clinical guidelines, including Revised European Society of Endocrinology Clinical Practice Guideline: Treatment of Chronic Hypoparathyroidism in Adults[3].**
- **Abrupt interruption or discontinuation of Natpar can result in severe hypocalcaemia. When stopping Natpar treatment, it is very important to closely monitor serum calcium levels and monitor patients for signs and symptoms of hypocalcaemia, while carefully adjusting active vitamin D and supplemental calcium doses in all patients. Healthcare professionals should refer to section 4.2 (Interruption or discontinuation of treatment) and section 4.4 (Warnings and Precautions: Hypocalcaemia) in the SmPC for Natpar.**
- **Long-term treatment plans should be discussed with patients, to minimise the risks of complications from abruptly stopping Natpar.**
- **For additional information consult EMA's shortage catalogue, <your country's shortage register> or <your national competent authority>.**

Background on the shortage

Natpar is indicated as adjunctive treatment of adult patients with chronic hypoparathyroidism who cannot be adequately controlled with standard therapy alone. Takeda communicated the decision to discontinue manufacturing of all strengths of Natpar at the end of 2024, due to unresolved manufacturing issues via a direct healthcare professional communication (DHPC) in October 2022.

Company contact point

For questions relating to the content of this communication, please contact the Takeda Medical Information Department <insert local or global contact phone number>.

Please continue to report suspected adverse drug reactions (ADRs) to <insert HA name> via <insert details>.

When reporting, please provide as much information as possible, including information about medical history, any concomitant medication, timing onset of the adverse event/s, treatment dates, and product brand name. Adverse events should also be reported to Takeda: <insert local contact details>.

Yours sincerely,

<Insert local signature>

---

[2] Natpar, INN-parathyroid hormone (rDNA)

[3] Revised European Society of Endocrinology Clinical Practice Guideline: Treatment of Chronic Hypoparathyroidism in Adults | European Journal of Endocrinology | Oxford Academic