

Tablets

Medicines Management News

Issue 22, Jan 2016

Wirral Medicines Clinical Guidelines Group.....	1
Current Issues.....	1
Query Corner.....	3
Drug Tariff.....	3
Safety.....	7

Wirral Medicines Clinical Guidelines Group – December 2015

The following guidelines should be available on the Medicines Management Website in due course:

- Acute Pain Analgesic Guidelines for Adults (over 16 years) - these were reviewed by the group. The guidelines will state morphine first-line and oxycodone second-line. Oxycodone should only be prescribed if intolerant to morphine or severe renal impairment.
- Rib Fracture Pain Management Clinical Guideline - approved.
- Acute Kidney Injury checklist – approved.
- Care of the Dying (non-renal) and Care of the Dying (severe renal impairment) – approved.
- Colonoscopy Protocol – approved.
- Palliative Care Symptom Control Guidelines – approved.
- Out of Hours Parenteral Nutrition (PN) Policy – approved.
- Rapid tranquilisation - amendments approved due to haloperidol vial stock issues.
- Management of Peritoneal Dialysis guidance – approved.
- Hydroxycarbamide for Chronic Myeloid Leukaemia and other myeloproliferative disorders (adults) – approved.
- Cosmofer® (iron dextran complex) prescription and administration card – approved.

Current Issues

Wirral Wound Care Formulary

The Wirral Community Trust have decided to switch their formulary barrier products range from Cavilon® 3M brand to MediDerma-S® barrier film spray and cream, and it will be a stock item from 1st November 2015. The Wirral-wide Wound Care Formulary and Nursing Homes Wound Care Products Ordering Form will shortly be updated to include MediDerm-S® barrier film aerosol, 1ml film applicators, and sachets of barrier cream, for use in place of Cavilon® products in the Primary Care sector.

Medicareplus, who manufacture MediDerma-S®, are providing information on the use of their product to community nursing staff and Wirral nursing homes.

Wirral Medicines Management Website – Antibiotics

You can now find a number of antibiotic resources on the Wirral Medicines Management website at the following address:

http://mm.wirral.nhs.uk/othertopics/antibiotic_resources.html

This will hopefully save you time as we link to all the main available resources from this one page. There is also a feedback button and we would really welcome your comments and ideas with regards to antibiotics. Help us put your good ideas into practice, please visit the site today!



WE NEED YOUR IDEAS...

QIPP - Quality, Innovation, Productivity and Prevention - is a national, regional and local level programme designed to support clinical teams and NHS organisations to improve the quality of care they deliver while making efficiency savings that can be reinvested into the NHS.

The QIPP team within the CSU Medicines Management Team are well underway to formulating the QIPP plan for 2016 - 2017 and would welcome your ideas for inclusion in the plan.

- Have you or your Practice completed a prescribing-related project or audit that has demonstrated improved value, which could be implemented across other areas?
- Do you have an idea for a piece of work but not had time to plan it and try it?
- Are you aware of work being undertaken in another area that you might be considering for your Practice?
- Have you identified a gap in a medicines-related service, a safety issue or a potential cost-effective drug option that our team might be able to support you with?

If you have any ideas, no matter how few details you can provide, please contact abigailcowan@nhs.net by week commencing 8th February 2016 and the QIPP team will consider it for possible inclusion in the 2016 – 2017 QIPP plan.

Thank you very much in advance!

Fusidic acid 1% modified-release eye drops for the treatment of infective conjunctivitis – high cost increase

What are the issues?

Fucithalamic[®] eye drops have been discontinued by AMCo, but they are now making a generic fusidic acid 1% modified-release (MR) eye drops product instead. The cost of the eye drops has consequently increased from approx. £2.60 for Fucithalamic[®] eye drops 5g, to £29.06 for generic fusidic acid 1% MR eye drops 5g¹. Please be aware that chloramphenicol 0.5% eye drops are recommended as the first-line treatment for acute bacterial conjunctivitis in the majority of patients, where antibiotic treatment is required². Fusidic acid 1% MR eye drops should not be routinely used first line due to high cost and increased incidence of adverse effects.

Key Messages:

- Acute bacterial conjunctivitis usually resolves spontaneously within 7 days of onset, without topical ocular antibiotic treatment. Keratitis is uncommon.
- Viral conjunctivitis is a self-limiting illness that resolves spontaneously, but can last for up to 21 days.
- For most people, use of a topical ocular antibiotic makes little difference to recovery from infective conjunctivitis.
- If a topical ocular antibiotic is considered necessary, local Antimicrobial Guidelines recommend chloramphenicol 0.5% eye drops first-line². Fusidic acid 1% MR eye drops (5g) should be reserved as a treatment option for patients who:
 - are pregnant or breastfeeding
 - have a personal or family history of blood dyscrasias (such as aplastic anaemia)
 - are intolerant of chloramphenicol
 - may require assistance in applying drops, e.g. young children or elderly people (fusidic acid requires twice daily administration)³.

What are the costs¹?

- Fusidic acid 1% MR eye drops (5g) £29.06
- Chloramphenicol 0.5% eye drops (10mls) £1.53
- Chloramphenicol 1% eye ointment (4g) £1.98

References

1. Drug Tariff Nov 2015.
2. Wirral Antimicrobial Guidelines 2015. Available at: http://mm.wirral.nhs.uk/document_uploads/formulary/WirralAntimicrobialGuidelines14-15.pdf
3. NICE: Clinical Knowledge Summaries: Conjunctivitis-infective. Available at:

Wirral Medicines Management Website

The Wirral Medicines Management website is public facing, but there is a GP members' page which is used for more sensitive documents. We do encourage Practices to register to the GP members' page, by clicking on the members' sign in box in the bottom right hand side of the page. If passwords have been forgotten then please click the 'forgotten password link'.

Over the coming months we will be posting more information to this page. Currently there is information regarding the Wirral Drug & Therapeutics Panel (including WDTP Appeals Process, WDTP appeals form, Terms of Reference, Ethical Framework, D&T application form and minutes of previous meetings) as well as the method for requesting access to the BI prescribing portal.

Please access the page via - <http://mm.wirral.nhs.uk/gps/>

The DROP list

The Drugs to Review for Optimised Prescribing (previously the DRugs Of low Priority) list has been updated and is available online. It includes medicines considered poor value for money, those with safer alternatives, NICE 'do not do' items and medicines that might be better provided as self-care. For each, alternatives are suggested, with indicative savings: www.prescqipp.info/drop-list/finish/171-drop-list/2047-bulletin-117-drop-list

Query Corner

Is there a crossover adverse effect of angioedema with angiotensin II receptor antagonists (ARB) and angiotensin-converting enzyme (ACE) inhibitors?

Use of ARBs is not recommended in patients with a history of angioedema following ACE inhibitor treatment, unless there is no alternative and extreme caution is exercised. The incidence of angioedema in patients switched to an ARB following ACE-inhibitor-induced angioedema has been described mainly in case reports and case series, with an incidence ranging from less than 10% to greater than 50%¹.

Clinical Knowledge Summaries (CKS) provides the following advice²:

How should I manage someone with angioedema without anaphylaxis?

- Try to identify the underlying cause so that further episodes can be avoided.
- For people taking an ACE inhibitor, stop treatment immediately. Consider starting an alternative drug treatment. If possible avoid ARBs as these can also trigger episodes of angioedema.

References

1. UKMI Medicines Q&A. Can angiotensin II receptor antagonists be used if angioedema occurred with an ACE inhibitor? 2012. Available via: http://www.medicinesresources.nhs.uk/upload/documents/Evidence/Medicines%20Q%20&%20A/QA292-2-AceiAraAngioedema_final.doc
2. CKS, Angio-oedema and anaphylaxis. Accessed at: <http://cks.nice.org.uk/angio-oedema-and-anaphylaxis#!scenario>

Drug Tariff

PRICE CHANGES

Top ten monthly price reductions

Aripiprazole 30mg tablets [1 x 28] £131.99 (-£10.75)
Famciclovir 500mg tablets [1 x 14] £119.27 (-£8.20)
Nortriptyline 25mg tablets [1 x 100] £111.70 (-£6.63)

Betamethasone valerate 0.1% / Neomycin 0.5% cream [1 x 100] £59.14 (-£3.99)
 Betamethasone valerate 0.1% / Neomycin 0.5% ointment [1 x 100] £59.14 (-£3.99)
 Alimemazine 10mg tablets [1 x 28] £31.47 (-£3.46)
 Lamivudine 100mg tablets [1 x 28] £51.29 (-£2.37)
 Nortriptyline 10mg tablets [1 x 100] £74.13 (-£2.05)
 Budesonide 1mg/2ml nebuliser liquid unit dose vials [1 x 20] £38.35 (-£1.65)
 Tizanidine 4mg tablets [1 x 120] £31.23 (-£1.52)

Top ten monthly price increases

Sodium bicarbonate 420mg/5ml (1mmol/ml) oral solution sugar free [1 x 500] £199.20 (+£91.29)
 Penicillamine 250mg tablets [1 x 56] £75.00 (+£24.21)
 Dicycloverine 20mg tablets [1 x 84] £177.04 (+£21.95)
 Dicycloverine 10mg/5ml oral solution [1 x 120] £165.28 (+£21.44)
 Dicycloverine 10mg tablets [1 x 100] £165.48 (+£18.87)
 Trimipramine 50mg capsules [1 x 28] £75.00 (+£15.40)
 Penicillamine 125mg tablets [1 x 56] £36.79 (+£12.44)
 Levothyroxine sodium 100micrograms/5ml oral solution sugar free [1 x 100] £154.19 (+£9.17)
 Ursodeoxycholic acid 300mg tablets [1 x 60] £47.63 (+£8.77)
 Flutamide 250mg tablets [1 x 84] £84.89 (+£6.80)

Top 100 annual price reductions, December 2015

http://www.panmerseyapc.nhs.uk/home/tariff_watch/partviii_reductions_201512.pdf

Top 100 annual price increases, December 2015

http://www.panmerseyapc.nhs.uk/home/tariff_watch/partviii_increases_201512.pdf

DRUG AVAILABILITY

Medication supply issues

The following generic drugs have supply issues and hence are incurring increased costs; they have been given a NCSO (NO CHEAPER STOCK OBTAINABLE) status for January 2016. Please consider the costs of the following drugs before prescribing.

Product	Pack size	Price concession
Celiprolol 200mg tablets	28	£19.83
Celiprolol 400mg tablets	28	£39.65
Cimetidine 400mg tablets	60	£8.00
Clindamycin 150mg capsules	24	£13.00
Diclofenac sodium 50mg gastro-resistant tablets	28	£2.60
Ferrous sulfate 200mg tablets	28	£2.85
Flecainide 50mg tablets	60	£5.05
Lamotrigine 5mg dispersible tablets sugar-free	28	£8.50
Lercanidipine 10mg tablets	28	£5.70
Lercanidipine 20mg tablets	28	£9.85
Lithium carbonate 250mg tablets	100	£48.18
Mefenamic acid 500mg tablets	28	£12.15
Nefopam 30mg tablets	90	£35.00
Pioglitazone 15mg tablets	28	£25.83
Pioglitazone 30mg tablets	28	£35.89
Pioglitazone 45mg tablets	28	£39.55
Procyclidine 5mg tablets	28	£14.00
Trazodone 50mg/5ml oral solution sugar-free	120ml	£135.00
Trazodone 100mg capsules	56	£28.14

Other drugs with long-term supply issues

The following drugs have long-term supply issues. The table below shows the reason for the supply issue, where known, and possible return-to-stock dates.

Description	Due date	Comment
Aquadrone[®] cream 10% x 100g (Alliance Pharm)	Supplier unable to confirm	A manufacturing issue is causing a delay in supply
Bumetanide tablets 1mg x 28	No availability date	A manufacturing issue is causing a delay in supply
Cardura XL[®] tablets 4mg x 28(Pfizer)	Feb 2016	Medical Information Enquiries - 0845 608 8866
Creon[®] 40000 capsules 400mg x100 (BGP Products)	No availability date	A supplier issue is causing a delay in supply
Dovobet[®] ointment x 60g (Leo Pharma Ltd)	Supplier unable to confirm	A manufacturing issue is causing a delay in supply
Eurax[®] cream 10% x 100g (Novartis Cons H'care)	Supplier unable to confirm	A manufacturing issue is causing a delay in supply
Erythroped A[®] tablets 500mg x 28 (Amco / Mercury)	Due August 2016	Supply issue
Evorel Sequi[®] patch x 8 (Janssen-Cilag)	Limited supply	Limited stock on-going
Haloperidol capsules 500mcg x 30 (Teva)	No availability date	A manufacturing issue is causing a delay in supply
Juvela[®] GF Cream Crackers x 125g (Juvela)	No availability date	A manufacturing issue is causing a delay in supply
Macrobid[®] capsules 100mg x 14 (Amco / Mercury)	No availability date	A manufacturing issue is causing a delay in supply
Nebusal[®] - Hypertonic Saline 7% x 60 (Actavis)	No availability date	A supplier issue is causing a delay in supply
Prempak-C[®] tablets 0.625mg x120	Supplier unable to confirm	A manufacturing issue is causing a delay in supply. Medical Information Enquiries - 0845 608 8866
Premique[®] low dose tablets 0.3mg/1.5mg (28X3) Pfizer	Limited supplies ongoing	A supplier issue is causing a delay in supply. Medical Information Enquiries - 0845 608 8866
Sno Tears[®] x 10ml (Bausch & Lomb)	Supplier unable to confirm	A manufacturing issue is causing a delay in supply
Traxam[®] Gel 3% x 100g (Amco Rwa/Mercury Pharma)	Supplier unable to confirm	A manufacturing issue is causing a delay in supply
Univer[®] capsules 120mg and 240mg x 28 (Cephalon)	Due July 2016	A manufacturing issue is causing a delay in supply
Vistamethasone[®] eye drops x 10ml (Martindale Pharm)	Supplier unable to confirm	A manufacturing issue is causing a delay in supply
Vita-Pos[®] preservative free ointment x 5g (Scope Ophthalmics)	No availability date	Supply issue
Zapain[®] capsules 30/500mg x 100 (Amco/Mercury)	No availability date	Supply issue

For any further information regarding supply problems please contact your Practice Pharmacist/Technician or the Medicines Management Team.



Megace® tablets (megestrol acetate) supply issue

There is a long term supply issue with Megace® tablets (megestrol acetate). Hospice clinicians are aware of this problem and will be prescribing dexamethasone in the interim until supplies resume. If you are asked to prescribe megestrol, please contact the Secondary Care clinician to discuss an alternative. A ScriptSwitch message will be added for all megestrol preparations and you will be informed when availability resumes.

Discontinuation of oral contraceptives from Janssen

Janssen has taken the decision to discontinue the following oral contraceptive 3 x 21 strip packets:

- Trinovum® (norethisterone 500 micrograms, 750 micrograms or 1mg /ethinylestradiol 35 micrograms) will be discontinued at the end of January 2016.
- Ovysmen® (norethisterone 500 micrograms and ethinylestradiol 35 micrograms) will be discontinued in April 2016.
- Binovum® (norethisterone 500 micrograms or 1mg/ethinylestradiol 35 micrograms) will be discontinued in June 2016.

This is not due to any safety concerns.

Thin Lancets Discontinued

The manufacturer of Thin Lancets has advised healthcare professionals that this product is being discontinued with effect from December 2015.

A cost effective lancet is the GlucoRx Lancets, which cost £5.50 per 200. These fit most lancing devices, but do not fit any Roche products.

Exenatide (Bydureon®) vial discontinued

As advised in Tablets, issue 19, Astra Zeneca is phasing out Bydureon® (exenatide) single dose tray (vial), and this is being replaced by the Bydureon® pen.

We have been informed by Astra Zeneca (AZ) that they anticipate that the stocks of Bydureon® vial will be exhausted by 31st January 2016. Practices need to review any patients currently prescribed exenatide MR vial (Bydureon®) and change these patients over to the pen formulation (either Bydureon® pre-filled pen or pre-filled disposable device depending upon the system). Patients may require additional training in the use of the pen by the GP or Practice Nurse.

Reminder: AZ, who manufacture Bydureon®, can offer support by training Practice Nurses. In addition, they can provide the following service for individual practices, if required:

- Changing patients from Bydureon® single dose tray (vial) to the Pen
- Training patients in the use of Bydureon® Pen
- Training Health Care Professionals in the use of Bydureon® Pen
- The scheme is non promotional and AZ use an independent company called Ashfield Health.

For further information or to provide support, AZ can be contacted via Sharon Davies, 07881358956 or through sharon.davies@astrazeneca.com

Disposal of Bydureon® pre-filled pens

AZ have informed us that the sharps bins which best fit the Bydureon® Pre-Filled Pens are the vertical 1 litre sharps bins by Sharpsafe®. Some Community Pharmacies may experience difficulties in ordering the Sharpsafe bin as it may incur a delivery charge. Please discuss with local pharmacies if patients experience any difficulties in obtaining the Sharpsafe®. Failing that, please contact the Medicines Information Service on 0151 643 5338.

Mycophenolate mofetil, mycophenolic acid: new pregnancy-prevention advice for women and men

Clinicians are advised that mycophenolate mofetil and its active metabolite, mycophenolic acid, are associated with a high rate of serious birth defects and increased risk of spontaneous abortion. It is recommended that pregnancy is excluded before commencing treatment and that two effective forms of contraception are used during treatment and for a period after treatment (6 weeks for women and at least 90 days for men). Clinicians should ensure that women and men taking mycophenolate understand the risk of harm to a baby, the need for effective contraception, the need to plan for pregnancy and change treatment as necessary, and the need to immediately consult a physician if there is a possibility of pregnancy. Finally, it is noted that mycophenolate must not be used during pregnancy unless there is no suitable alternative treatment to prevent transplant rejection.

Bisphosphonates: very rare reports of osteonecrosis of the external auditory canal

Bisphosphonates have been linked with very rare reports (fewer than 1 in 10,000) of osteonecrosis of the external auditory canal. This diagnosis should be considered in patients receiving bisphosphonates who present with ear symptoms, including chronic ear infections, or in patients with suspected cholesteatoma. Associated risk factors include steroid use and chemotherapy, with or without local risk factors such as infection or trauma. Patients should be advised to report any ear pain, discharge from the ear, or an ear infection during bisphosphonate treatment. Current data do not support a causal relation between denosumab and this condition, but this situation is under close review given that denosumab is known to be associated with osteonecrosis of the jaw.

Antiretroviral medicines: updated advice on body fat changes and lactic acidosis

Warnings on fat redistribution and lactic acidosis are being removed from antiretroviral medicine product information (with the exception of zidovudine, stavudine and didanosine). These changes reflect current scientific understanding about lipodystrophy (including lipoatrophy) and lactic acidosis. Patients can be reassured that previous information about the risk of lipodystrophy and lactic acidosis for several medicines is no longer considered relevant.

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