Medicines Management newsletter

Issue 8 - May 2018

Halton Clinical Commissioning Group

Pan Mersey Area Prescribing Committee

RECOMMENDATIONS SPECIFICALLY RELEVANT TO PRIMARY CARE

BLACK SILK garments (Dermasilk®, Dreamskin® and Skinnies Silk®)

The Pan Mersey Area Prescribing Committee does not recommend the prescribing of SILK garments (Dermasilk®, Dreamskin® and Skinnies Silk®) for eczema or atopic dermatitis.

Silk garments are marketed as an adjunctive treatment (to emollients and topical corticosteroids) for various forms of dermatitis, eczema and allergic skin conditions. Three brands of knitted silk garments are currently listed in the Drug Tariff, these are Dermasilk®, Dreamskin® and Skinnies silk®. All three brands come in a wide range of garments including eye masks, socks, gloves, vests, pyjamas and body suits.

Key Messages:

- The evidence relating to the use of silk garments for eczema and atopic dermatitis is weak and suggests that silk garments are unlikely to provide additional clinical or economic benefits over standard care.
- NICE guidance CG57 (December 2007) on the treatment of atopic eczema in children made no recommendations about the use of silk garments in the management of eczema.

In the last 12 months NHS Halton CCG spent over £10,500 on silk garments.

BLACK TAPENTADOL immediate release preparations (Palexia®)

The Pan Mersey Area Prescribing Committee does not recommend the prescribing of tapentadol **immediate release** preparations due to the limited evidence base (only compared with placebo and oxycodone) and its cost.

Tapentadol is a Schedule 2 Controlled Drug. There are two different formulations of tapentadol (immediate release and prolonged release) which may cause confusion. Additionally, the similarity between the names and doses of tramadol and tapentadol could cause confusion.

There is a Pan Mersey policy statement for tapentadol **prolonged release** tablets (Palexia SR®) available at:
http://www.panmerseyapc.nhs.uk/recommendations/documents/PS141.pdf

GREEN FINASTERIDE 5mg tablets

The Pan Mersey Area Prescribing Committee (APC) recommends **FINASTERIDE** as the 5-alpha reductase inhibitor of choice for men with LUTS who have prostates estimated to be larger than 30g or a PSA level > 1.4nanogram/mL, and who are considered to be at high risk of progression (for example, older men).

- The EPICS study found, when dutasteride or finasteride were administered for 12 months; they were similarly effective at 3 months and 12 months in reducing prostate volume, improving Qmax (maximum urinary flow rate) and urinary symptoms associated with benign prostatic hyperplasia (BPH) in men with an enlarged prostate.
- Finasteride is significantly less expensive than the alternative 5-α reductase inhibitor dutasteride.

Consider adding in an alpha blocker for men with bothersome moderate to severe LUTS1 which should be prescribed as the separate components, as the Pan Mersey APC does not recommend oral combination products e.g. Combodart® (dutasteride + tamsulosin).

GREEN Vitamin D guideline (adults) for Vitamin D deficiency

This Pan Mersey guideline replaces the original Mid-Mersey guideline. It covers the treatment of vitamin D deficiency, insufficiency and maintenance.

RECOMMENDATIONS

BLACK FULVESTRANT solution for injection (Faslodex®)

NICE does not recommend the prescribing of FULVESTRANT solution for injection (Faslodex®) for untreated locally advanced or metastatic oestrogen-receptor positive breast cancer as per NICE TA503.

FORMULARY AND GUIDELINES

BLACK (Amber Recommended paediatrics) Alimemazine for Allergy

Change of RAG rating from green.

BLACK LESINURAD 200mg TABLETS (Zurampic®▼)

NICE does not recommend the prescribing of LESINURAD 200mg TABLETS (Zurampic® ▼) for Chronic hyperuricaemia in people with gout as per NICE TA506.

BLACK Simeticone Infantile colic

No longer recommended; Change of RAG designation from Green.

GREEN Blood glucose testing strip Diabetes (Updated)

GREEN VORTIOXETINE tablets (Brintellix®▼) for Major depressive episodes

The Pan Mersey Area Prescribing Committee recommends the prescribing of VORTIOXETINE tablets (Brintellix® ▼) as a third line option for treating major depressive episodes in adults whose condition has responded inadequately to two antidepressants within the current episode, in accordance with NICE TA367 [November 2015].

GREEN Fobumix® (budesonide + formoterol dry powder inhaler) Asthma (adults) and COPD

GREY IXEKIZUMAB solution for injection (Taltz®▼) for Psoriatic Arthritis

The Pan Mersey Area Prescribing Committee does not currently recommend the prescribing of IXEKIZUMAB solution for injection (Taltz® ▼) for the treatment of Psoriatic Arthritis.

AMBER Initiated ELUXADOLINE Tablets (Truberzi®▼)

The Pan Mersey Area Prescribing Committee recommends the prescribing of ELUXADOLINE Tablets (Truberzi® ▼) following specialist initiation for irritable bowel syndrome with diarrhoea in adults in accordance with NICE TA471.

AMBER Recommended Levetiracetam granules Epilepsy

Restricted to use in patients with feeding tubes.

AMBER Retained Ulipristol tablets (Esmya®) for Uterine Fibroids

Restricted use and additional liver function testing following MHRA alert; removal of Pan Mersey statement from website in interim period, pending further MHRA advice.

SHARED CARE AND PRESCRIBING SUPPORT

Shared Care Mycophenolate mofetil

http://www.panmerseyapc.nhs.uk/shared_care/documents/SC22.pdf

Prescribing support Mepacrine

http://www.panmerseyapc.nhs.uk/prescribing_support/documents/PSI9.pdf

Guidelines Drugs for Dementia: Information for Primary Care

http://www.panmerseyapc.nhs.uk/guidelines/documents/G31_supporting_information.pdf

SAFETY

DEXAMETHASONE injection - different injection strengths

http://www.panmerseyapc.nhs.uk/safety/documents/S6.pdf

Medicines Management Work plan 2018/19

During **May and June 2018** the NHS Halton CCG Medicines Management Team will be doing the following pieces of work:

- Highlighting of patients prescribed Seretide® inhalers in Chronic Obstructive Pulmonary Disease for potential switch to formulary choice inhalers where clinically appropriate in line with Pan Mersey guidance.
- Identification of patients currently prescribed a thickener to support alignment with new International Dysphagia Diet Standardisation Initiative (IDDSI) Guidelines. Bridgewater Speech and Language Team are contacting patients regarding these guidelines and aligning patients to their preferred brand of thickener, Nutilis® Clear. See this month's Hot Topic for further information about IDDSI.

Hot Topic - New International Dysphagia Diet Standardisation Initiative (IDDSI)

The International Dysphagia Diet Standardisation Initiative (IDDSI) is a new global framework which provides standardised definitions and terminology for textured modified food and thickened liquids used for individuals with dysphagia – of all ages, in all care settings, and for all cultures (For more information please visit www.iddsi.org) . The Bridgewater Adult Speech and Language Therapy (SALT) Service will be leading the work locally to align with the new IDDSI Framework.

There are four IDDSI levels, which will replace the current UK National descriptors and stages. Thickener brands are changing their scoop sizes in line with the new framework, meaning there will be a change in the number of scoops required to mix drinks to the consistency recommended by the SALT service. Current descriptors and scoop sizes used for thickener products are NOT equivalent to the new global standardised measures. Manufacturers of the thickeners are in the process of amending their products to accommodate this. The first thickener to change is **Nutilis®Clear** with new tins being phased in from mid-May 2018.

In order for the changes to occur smoothly and safely, the Bridgewater SALT service is planning to contact patients to make them aware of these changes and change all patients in NHS Halton CCG onto one brand of thickener: Nutilis® Clear.

Important information for Pharmacies

How to recognise a new tin of Nutilis® Clear

In order to identify whether you have received a new tin, look for:

- A red sticker on the lid
- The new IDDSI directions on the side of the tin.

Inside the tin, there will be a new green scoop (which will be smaller than the previous purple scoop).

How are Nutricia supporting the changes?

Nutricia have advised SALT that they are supporting pharmacies during the change period by:

- Issuing large chain pharmacies, Boots, Lloyds and Rowlands, with patient flyers, pop up message alerts when Nutilis Clear is prescribed and news bulletins on the intranet and in magazines.
- Other pharmacies will need to contact Nutricia directly via the local representative to arrange deliveries of posters and patient flyers which can be distributed to patients with new tins of Nutilis® Clear. Contact details are detailed below.

Actions for pharmacies in the run up to the changes in mid-May:

- Please ensure you run down your stock of the old style tins of Nutilis® Clear thickener. There may be a short period when two different tins of thickener will be in circulation.
- Please ensure patients are aware of these changes and are using the appropriate scoop size as advised by SALT.

Important information for GP Practices

Care home patients

Bridgewater SALT service will be liaising with all Halton care homes regarding this change and reviewing all care home residents care plans to ensure instructions regarding dosing directions have been updated in line with the new standardised measurements.

Community patients (non-care home)

NHS Halton CCG Medicines Management Team are currently identifying all other patients being prescribed thickeners by Halton practices to ensure the relevant SALT service is aware of them.

If you have any questions regarding the changes, please contact:

- Halton Adult Speech and Language Therapy Service on 01928 593765.
- Nutricia local representative Jo Nuttall on 07881331034 or via joanne.nuttall@nutricia.com
- NHS Halton CCG Medicines Management Team on 01928 593010

Safety

VALPROATE CONTRAINDICATED IN WOMEN OF CHILDBEARING POTENTIAL UNLESS THERE IS A PREGNANCY PREVENTION PROGRAMME

Due to the teratogenic risk, valproate medicines should not be used in girls and women of childbearing potential unless there is no suitable alternative as judged by a specialist experienced in the management of epilepsy or bipolar disorder. The National Institute for Health and Care Excellence (NICE) has updated guidelines relevant to valproate medicines to reflect the regulatory changes.

Previous communications about the risk of neurodevelopmental disorders and the recommendation that women and girls of childbearing potential use effective contraception had little impact on prescribing.

Following a review of the situation across the EU, Valproate is now contraindicated in women of childbearing potential unless they meet the conditions of a Pregnancy Prevention Programme.

Advice for Healthcare Professionals:

- Valproate medicines must not be used in women and girls of childbearing potential unless the conditions of the Pregnancy Prevention Programme are met and only if other treatments are ineffective or not tolerated, as judged by an experienced specialist.
- You will receive materials by post in the coming weeks to use in the implementation of the Pregnancy Prevention Programme (Patient Guide, Healthcare Professional Guide, Risk Acknowledgement Form, and, for pharmacists, Patient Cards and stickers to attach a warning label to the pack).
- GPs must identify and recall all women and girls who may be of childbearing potential, provide the Patient Guide and check they have been reviewed by a specialist in the last year and are on highly effective contraception.

- Specialists must book in review appointments at least annually with women and girls under the Pregnancy Prevention Programme and re-evaluate treatment as necessary; explain clearly the conditions as outlined in the supporting materials; and complete and sign the Risk Acknowledgement Form—copies of the form must be given to the patient or patient/caregiver/responsible person and sent to their GP.

Action for pharmacists

- Ensure valproate medicines are dispensed in whole packs whenever possible — all packs dispensed to women and girls of childbearing potential should have a warning label either on the carton or via a sticker .
- Discuss risks in pregnancy with female patients each time you dispense valproate medicines and ensure they have the Patient Guide and have seen their GP or specialist to discuss their treatment and the need for contraception

For more information including:

- Conditions and guidance for the Pregnancy Prevention Programme
- Contraception and pregnancy prevention

Please refer to the MHRA Drug Safety Update:
https://www.gov.uk/drug-safety-update/valproate-medicines-epilim-depakote-contraindicated-in-women-and-girls-of-childbearing-potential-unless-conditions-of-pregnancy-prevention-programme-are-met
An alert has also been issued by the Chief Medical Officer to healthcare professionals in England to inform them of the importance of acting on these new prescribing and dispensing requirements. The following actions are required by all providers of NHS funded care:

1. GPs should identify all relevant women and girls on valproate in their practice, check that they are on effective contraception as appropriate, and refer them for specialist review .
2. Specialists should review treatment and, if valproate is the only suitable treatment, ensure an acknowledgment of risk form is signed by you and the patient.
   file:///C:/Users/becky.birchall/Downloads/CEM_CMO_2018_001%20Valproate%20(3).pdf

The Medicines Management Team will liaise with the local trusts to ensure the GP Practices have a clear understanding of how the specialist teams are planning to support this work.

Quinine for the treatment of Nocturnal Leg Cramps

Quinine has been used in the UK for the treatment of nocturnal leg cramps for many years. Although individual patient response may vary, overall efficacy is modest.
MHRA Drug Safety Updates issued in June 2010 and November 2017 advise:

- Quinine tablets are generally well tolerated at the doses used for treatment of leg cramps. However, adverse events may include tinnitus, impaired hearing, headache, nausea, disturbed vision, confusion, flushing, and abdominal pain. Treatment should be stopped if these occur.

- A rarer but more serious adverse reaction is thrombocytopenia, thought to be a hypersensitivity reaction. A small number of deaths linked to thrombocytopenia have been reported in patients taking quinine for the treatment of leg cramps, including two cases in the UK.
- Quinine has dose-dependent QT-interval-prolonging effects and should be used with caution in patients with risk factors for QT prolongation or in those with atrioventricular block.

Healthcare professionals are advised:

- After an initial trial of 4 weeks, treatment should be stopped if there is no benefit. Treatment should be interrupted approximately every 3 months to reassess the benefit. In patients taking quinine long term, a trial discontinuation may be considered.
- Be aware of dose-dependent effects on the QT interval and use caution if prescribing quinine in patients:
    - with conditions that predispose to QT prolongation such as pre-existing cardiac disease or electrolyte disturbance
    - taking other medicines that could prolong the QT interval
    - with atrioventricular block

Medicines Management Review

NHS Halton CCG Medicines Management Team are currently supporting practices with the safe prescribing of quinine by identifying patients who have been prescribed it for the treatment of nocturnal leg cramps for more than 3 months and recommending a trial discontinuation in suitable patients. Due to the risks of the QT prolongation with quinine prescribers are advised that patients should be reviewed for conditions that predispose to QT prolongation, atrioventricular block or being co-prescribed other medicines that could prolong the QT interval before restarting quinine.

Trimovate® Cream Supply Issue

We have recently been made aware that the licensed Trimovate® Cream manufactured by Ennogen Healthcare Ltd is currently unavailable. To meet patient need, Ennogen has launched Trimovate Cream as an imported medicine. All prescribers should be aware that if prescribing Trimovate cream, this unlicensed product will be dispensed.

If prescribers prefer to supply a licensed alternative, such as Timodine® or Nystaform-HC® cream, please check the Pan Mersey formulary for options:
http://formulary.panmerseyapc.nhs.uk/chaptersSubDetails.asp?FormularySectionID=13&SubSectionRef=13.04&SubSectionID=A100&drugmatch=4890#4890

Note: Pharmacies will be reimbursed the 'unlicensed special' price whether prescribed as Trimovate brand or the generic version (if endorsed appropriately).

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