

Our Ref: DC/NB

21st December 2022

To: Prescribing Clinicians and Pharmacists within the Barnsley locality

Dear Colleague

Re: Summary of Key Points from the Area Prescribing Committee Meetings on 14th December 2022

The main outcomes of the meetings were: -

Prescribing Guidelines

The Committee endorsed the following Barnsley position statement:

Barnsley Position Statement – Appropriate Use of Monitored Dosage Systems [NEW]

Original packaging (which is how a community pharmacy usually supplies medicines for patients i.e. in a box or container with a pharmacy label including instructions) is the preferred method of dispensing. Monitored Dosage Systems (MDS) should not be the first-choice intervention to help people manage their medicines. An MDS should be considered only when an assessment by a health professional (for example, a pharmacist) has been carried out, in line with the Equality Act 2010, and a specific need has been identified to support medicines adherence.

This position statement lists some of the challenges from using MDS e.g. not suitable for all medicines, can make patients and carers less familiar with their medicines, and the additional workload involved in preparation and checking (this is not an exhaustive list, refer to the position statement for further information).

Please note that pharmacies are not required to provide medicines in an MDS and some pharmacies may charge for doing this.

The new position statement will be available on the BEST website in due course.

Prescribing guidelines are available on the BEST website:

<http://best.barnsleyccg.nhs.uk/clinical-support/medicines/prescribing-guidelines/>

The Barnsley Joint Formulary can be accessed at the link below:

<http://www.barnsleyformulary.nhs.uk/>

Shared Care and Amber-G Guidelines

SY ICB Shared Care Protocol for Sublingual Immunotherapy (SLIT) (Grazax®/Acarizax®) [NEW]

A link to this new Shared Care Protocol (SCP) for adults and children diagnosed with severe allergic rhinitis to grass pollen or house dust mite will be added to the BEST website.

Sucralfate 1g/5ml oral suspension sugar-free (SF) for benign gastric ulceration, benign duodenal ulceration, chronic gastritis and prophylaxis of stress ulceration in adults Amber-G guideline [NEW]

Sucralfate oral suspension was previously only available as an unlicensed special. A licensed sucralfate 1g/5ml oral suspension sugar-free is now available and has been assigned an amber-G classification on the Barnsley Formulary.

Do not prescribe unlicensed sucralfate liquid preparations

Do not prescribe sucralfate tablets (unlicensed)

The new amber-G guideline will be available on the BEST website in due course.

Fidaxomicin for the treatment of Clostridioides difficile infections (CDI) in adults aged 18 and over Amber-G guideline [NEW]

Fidaxomicin should be prescribed in line with the NICE guidance NG199: [Clostridioides difficile infection: antimicrobial prescribing \(nice.org.uk\)](#) which states that:

- Fidaxomicin can be used as a second line antibiotic for a first episode of mild, moderate or severe C. difficile infection if vancomycin is ineffective.
- Fidaxomicin can be used for a further episode of C. difficile infection within 12 weeks of symptom resolution (relapse)
- Fidaxomicin can be used as one of two options for a further episode of C. difficile infection more than 12 weeks after symptom resolution (recurrence).

The indications for fidaxomicin are also summarised in the NICE/PHE summary of antimicrobial prescribing guidance which the APC has agreed to adopt: [BNF hosts antimicrobial summary guidance on behalf of NICE and PHE - BNF Publications](#)

The Committee agreed that primary care clinicians with the appropriate knowledge and competencies can initiate fidaxomicin in line with the NICE guidance detailed above. Fidaxomicin can also be prescribed on the advice of the microbiologist.

Fidaxomicin is licensed in the UK and is available via standard wholesalers, but it is not usually stocked in community pharmacies. If the medication is not immediately available, it can usually be ordered in for the next working day.

If a supply is required more urgently than the next working day, note that Asda Pharmacy, Old Mill Lane, Barnsley, S71 1LN, Tel: 01226 704810, stocks 1 box of 20 fidaxomicin 200mg tablets.

The new amber-G guideline will be available on the BEST website in due course.

SY ICB Prescribing guidelines for hormone treatment for transman and transwoman patients [MINOR UPDATES].

These prescribing guidelines have received minor amendments. The links to the guidelines are available on the BEST website and the updated guidelines will be available in due course.

Amber-G Guideline Template [MINOR UPDATE]

The Committee agreed to update the definition of amber-G drugs within the amber-G guideline template with the additional wording in italics below. The updated template will be used when new guidelines are developed and when existing guidelines are next reviewed.

Amber with Guidance (Amber-G) = To be recommended or initiated by a specialist* with follow up prescribing and monitoring by primary care clinicians.

*Specialist is defined by the APC as a clinician who has undertaken an appropriate formal qualification or recognised training programme, *or who has the appropriate knowledge and competencies* within the described area of practice.

Shared Care and Amber-G guidelines are available on the BEST website:

<http://best.barnsleyccg.nhs.uk/clinical-support/medicines/shared-care-guidelines/>.

Prescribers (including secondary care clinicians) are encouraged to report any problems they experience with shared care or other medicines related issues, particularly where guidelines are not being complied with, to the following email address: BarnsleyAPCReport@nhs.net.

The Barnsley Interface Issues Form should be used to report such problems:

<http://www.barnsleyccg.nhs.uk/members-professionals/area-prescribing-committee.htm>

Other

Calcium and Vitamin D formulary choices

Clinicians are reminded that the first line choice of calcium and vitamin D preparation is Calci-D® chewable tablets. Second line choices for patients who do not want, or are unable to take, a chewable tablet are Accrete D3® tablets or Adcal D3® caplets.

Calfovit D3® powder in sachet for oral suspension has been discontinued. Adcal-D3® Dissolve effervescent tablets have been added to the formulary as the third line choice for patients who are unable to take chewable tablets or tablets. The calcium and vitamin D, and vitamin D summary of formulary choices guidance will be updated in due course: [Ca plus VitD or VitD Formulary Choices.pdf \(barnsleyccg.nhs.uk\)](#). Refer to the traffic light classifications table below for further information.

Traffic Light Classifications

The Committee assigned the following classifications to the products included in the table below:

Drug	Formulary Indication	Traffic light status (Drugs with a provisional classification are not currently included on the Barnsley formulary)
SPS New Medicines Newsletter October 2022		
Estetrol + drospirenone (Drovelis®)	Oral contraception	Non-formulary provisional grey
Lidocaine (Lidbree®) intrauterine gel	Topical anaesthesia for moderate acute pain during cervical and intrauterine procedures	Non-formulary provisional grey
Setmelanotide (Imcivree®)	Treatment of obesity and the control of hunger associated with genetically confirmed loss-of-function biallelic pro-opiomelanocortin, including PCSK1, deficiency or biallelic leptin receptor deficiency	Non-formulary provisional red

Tirzepatide (Mounjaro®)	Treatment of adults with insufficiently controlled type 2 diabetes mellitus	Non-formulary provisional grey
Other		
Calfovit D3®	Calcium and vitamin D preparation	Removed from the formulary as discontinued.
Adcal-D3® Dissolve effervescent tablets	Calcium and vitamin D preparation	Formulary green. Third line choice calcium and vitamin D preparation. For patients who are unable to take chewable tablets or tablets and require a soluble preparation. Colecalciferol 400units/10micrograms 1500mg calcium carbonate =600mg elemental calcium. One tablet BD (preferably one tablet each morning and evening). Calcium and vitamin D, and vitamin D summary of formulary choices guidance will be updated in due course: Ca plus VitD or VitD Formulary Choices.pdf (barnsleyccg.nhs.uk)
Grass pollen extract (Grazax®)	Severe allergic rhinitis to grass pollen	Formulary amber (previously non-formulary provisional amber). Link to the Shared Care Protocol for Sublingual Immunotherapy (SLIT) will be added to the BEST website in due course.
Standardised allergen extract from house dust mites D. pteronyssinus and D. farinae (Acarizax®)	Severe allergic rhinitis to house dust mite	Formulary amber (previously non-formulary provisional amber). Link to the Shared Care Protocol for Sublingual Immunotherapy (SLIT) will be added to the BEST website in due course.
Wound care formulary section		Addition of the following products: Prontosan debridement pad to replace Debrisoft pad ConvaMax superabsorbant adhesive KytoCel to replace Kaltostat

MHRA Drug Safety Update

The November 2022 MHRA Drug Safety Updates can be accessed at the following link:
[Drug Safety Update \(publishing.service.gov.uk\)](https://www.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1071117/2022-11-01-drug-safety-update.pdf)

Issues relating to primary care:

MHRA consultation with healthcare professionals: please complete our consultation to help influence how we communicate with you
The MHRA is reviewing its approach to engaging with healthcare professionals on the safety of medicines and medical devices. Through their consultation, you can provide your views and help inform their new approach.
What healthcare professionals can do to get involved and influence how the MHRA engages with them
<ul style="list-style-type: none"> the MHRA are consulting a wide range of healthcare professionals with a view to transforming how they engage and work together on their common goal of greater patient safety – access the consultation here the MHRA want to ensure that healthcare professionals are receiving actionable information and guidance on safe use of medicines and medical devices that they can take into their working practice, providing timely advice to patients

- tell the MHRA how they can improve their engagement – your feedback will help the MHRA to develop a new approach, improving how safety information and reporting systems are communicated and used and maximising their impact on patient safety
- views shared during the consultation will support healthcare professionals to deliver the best care to patients
- the MHRA encourage you to take part and talk to your colleagues about supporting this important consultation

Kind Regards



Deborah Cooke
Lead Pharmacist

cc: Medicines Management Team
Rebecca Hoskins, BHNFT
Mike Smith, BHNFT
Sarah Hudson, SWYPFT
Area Prescribing Committee Members (Secretary to the APC to circulate)
Local Medical Committee (Secretary to the LMC to circulate)
Gary Barnfield, South Yorkshire ICB (Sheffield)
Alex Molyneux, Chief Pharmacy Officer, South Yorkshire ICB
Stuart Lakin, South Yorkshire ICB (Rotherham)