

Our Ref: DC/NB

9th December 2022

To: Prescribing Clinicians and Pharmacists within the Barnsley locality

Dear Colleague

Re: Summary of Key Points from the Area Prescribing Committee Meeting on 9th November 2022

The main outcomes of the meetings were: -

Prescribing Guidelines

The Committee endorsed the following Barnsley prescribing guidelines which can be accessed on the BEST website:

[Dosulepin APC Position Statement \[MINOR UPDATE\]](#)

A supplementary appendix produced by SWYFT has been added to the position statement. This provides additional advice and guidance on reviewing and deprescribing dosulepin when it is being used for unlicensed indications such as anxiety, neuropathic pain and insomnia. Potential options include a trial of discontinuing dosulepin (tapered down over weeks, or months, depending on the patient's needs) or for patients who are unable to stop dosulepin or where there is a clear ongoing unlicensed indication that requires a tricyclic antidepressant, consideration may be given to switching to amitriptyline. Refer to the position statement for further information.

[Cenobamate \(Ontozry®\) Information for Community Pharmacies \[MINOR UPDATE\]](#)

This document has been updated to include further information regarding the ordering of cenobamate by community pharmacies. This is to ensure continuity of supply for patients in response to feedback that some patients are experiencing difficulties in obtaining in the community.

As previously communicated, cenobamate (Ontozry®) is available from Phoenix Healthcare. Alternatively, pharmacies who hold accounts with both Alliance and Phoenix can order via Alliance using the Third Party Ordering System (TPOS). It is also anticipated that pharmacies who hold accounts with both AAH and Phoenix will be able to order via AAH using TPOS in the near future.

Should a pharmacy require further information or encounter any issues in ordering the medication, please liaise with a member of the Medicines Management Team (either linked to the GP practice or alternatively contact the central team on 01226 433798) who can advise and/or support the patient in obtaining the medication from an alternative pharmacy as necessary.

The information has also been circulated to Community Pharmacies via PharmOutcomes.

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 Guidelines

No shared care/amber-G guidelines were approved by the Committee this month.

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

Changes to the handling of Morphine Sulphate 10mg/5ml Oral Solution within BHNFT

Morphine sulphate 10mg/5ml oral solution is a schedule 5 controlled drug but within BHNFT it has traditionally been subject to handling in the same manner as other morphine sulphate formulations which are classified as schedule 2 controlled drugs (including requisitions, handwriting requirements and recording of usage within CD registers). BHNFT have recently removed these requirements to facilitate usage of morphine sulphate 10mg/5ml oral solution in acute clinical situations.

It is anticipated that the usage of morphine sulphate 10mg/5ml oral solution will increase within the acute care setting, and although there is to be communication around appropriate use, there remains the potential that increased usage on discharge may be seen. It is also anticipated that usage of other weak opioids, such as tramadol and codeine should reduce if morphine sulphate 10mg/5ml oral solution is being used. However, the total number of patients requiring long term opioid analgesia should not be affected by this change.

Where morphine sulphate 10mg/5ml oral solution is seen as a newly started medication on discharge from BHNFT, primary care colleagues are asked to review ongoing clinical need prior to providing repeat prescriptions, unless it is felt that continued use is justified (i.e. those patients on pre-existing or newly started long acting opioids for chronic/cancer pain).

Dexcom One (real time continuous glucose monitor)

The Committee noted that there have been recent requests from Sheffield consultants to Barnsley GPs to prescribe Dexcom ONE sensors, which are in the Drug Tariff and can be prescribed on FP10. The Sheffield position statement for use in adults can be accessed via the following link: [Dexcom One.pdf \(sheffielddccg.nhs.uk\)](http://sheffielddccg.nhs.uk).

The Dexcom ONE transmitters are not included in the Drug Tariff and therefore cannot be prescribed on FP10. The transmitters can be obtained by community pharmacies free of charge from Alliance (PIP code 421 4730). For further information, community pharmacies can refer to the Dexcom One Pharmacy FAQs: [Dexcom One Pharmacy FAQ | Dexcom Healthcare Professionals](#)

Local discussions regarding Dexcom ONE are ongoing and further information will be shared in due course.

Freestyle Libre sensors

The original Freestyle Libre sensors are being discontinued by the manufacturer and will be removed from the Drug Tariff in January 2023. Freestyle Libre 2 sensors remain available. The Medicines Management Team can support GP Practices in identifying and reviewing patients, please liaise with a member of the team for further information.

The Barnsley APC Freestyle Libre guidance remains available via the [Barnsley formulary](#). The guidance is in the process of being updated in line with current NICE guidance.

Shortage of Dulaglutide (Trulicity®) 0.75mg, 1.5mg, 3mg and 4.5mg solution for injection devices and Semaglutide (Ozempic®) 1mg and 0.5mg solution for injection devices

There are currently supply issues affecting the weekly parenteral GLP-1 agonists, dulaglutide and semaglutide, and Medicines Supply Notifications have been issued in recent months regarding these. Both are included on the formulary with an Amber-G classification

[GLP 1 agonist amber G guideline](#)

Key points

- Supplies of dulaglutide solution for injection are limited and the anticipated re-supply date is 27th January 2023. Clinicians should not initiate new patients on dulaglutide injection until the supply issue has resolved.
- Supplies of semaglutide 1mg and 0.5 mg solution for injection are limited with intermittent stock outs expected until late January 2023. Clinicians should not initiate new patients on semaglutide injection until full supplies become available in January 2023.
- Consider initiating patients on alternative GLP-1 receptor agonists until the shortages have resolved. Additional information including advice on alternative options is available from the Medicines Supply Tool ([dulaglutide \(Trulicity\) shortage](#) or [semaglutide \(Ozempic\) shortage](#)) on the SPS website (registration with an NHS email address required). Additional local guidance will also be produced.

Traffic Light Classifications

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

Drug	Indication	Traffic light status (Drugs with a provisional classification are not currently included on the Barnsley formulary)
SPS New Medicines Newsletter September 2022		
Potassium bicarbonate and potassium citrate (Sibnaya®)	Treatment of distal renal tubular acidosis	Non-formulary provisional red.
Other		
Melatonin 1mg/ml oral solution (Colonis Pharma®)	Insomnia	Non-formulary provisional grey (no longer included in the Melatonin Shared Care Guideline).
IQoro® neuromuscular training device	Acid Reflux, dysphagia	Non-formulary. East of England Priorities Advisory Committee (PrescQIPP) (login required). PrescQIPP guidance states there is limited evidence available to support the use of IQoro®.

Other – additional formulary wording only		
Indapamide	Thiazide diuretic	Already formulary green. Addition of the following wording to the formulary: The 2.5mg tablets are preferred over the 1.5mg MR tablets. (The 1.5mg MR tablets are more than 3 times the cost of the 2.5mg tablets).

MHRA Drug Safety Update

The October 2022 MHRA Drug Safety Updates can be accessed at the following link:

[Drug Safety Update \(publishing.service.gov.uk\)](https://publishing.service.gov.uk)

There were no specific issues relating to primary care.

Regards



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Area Prescribing Committee Members (Secretary to the APC to circulate)
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