

# Medicines Management Newsletter

## November 2021

Welcome to the November edition of the Medicines Management Newsletter, we hope that you are all keeping safe and well during this time. This newsletter is distributed to all practices and pharmacies in the Barnsley area and aims to keep you informed of the latest medicine updates, drug alerts/recalls and the work currently being completed in GP Practices by the Medicines Management Team.

### Medicines Optimisation Scheme (MOS) 2021-22

For the December deadline, the Medicines Management Team members will be supporting practices by completing audits for the following workstreams:

**Blood Glucose & Ketone Monitoring:** Audit to be completed to ascertain whether during diabetes annual reviews, the product choice & frequency of testing has been reviewed in line with current formulary guidance. [https://best.barnsleyccg.nhs.uk/clinical-support/medicines/prescribing-guidelines/Blood\\_Glucose\\_Test\\_Strips.pdf](https://best.barnsleyccg.nhs.uk/clinical-support/medicines/prescribing-guidelines/Blood_Glucose_Test_Strips.pdf)

**Triple Inhalers in COPD:** Audit to be completed to ascertain whether during COPD annual reviews, patients prescribed the three inhaled drugs (ICS/LABA/LAMA as two or three separate inhalers) in line with the COPD algorithm have been offered a change to a single triple therapy inhaler where it is a suitable option. <https://best.barnsleyccg.nhs.uk/clinical-support/medicines/prescribing-guidelines/COPD%20inhaled%20therapies.pdf?UNLID=389456909201891414103&UID=51873359320211110151045>

**High dose inhaled corticosteroids (ICS) in Asthma:** Audit to be completed to ascertain whether during asthma annual reviews, step down has been discussed and offered in patients who have good control. <https://best.barnsleyccg.nhs.uk/clinical-support/medicines/prescribing-guidelines/Asthma%20treatment%20algorithm.pdf?UID=51873359320211110151045>

**Use of short acting beta 2 agonists (SABAs) in Asthma and COPD patients:** Audit to be completed to ascertain whether during COPD & asthma annual reviews, the use of salbutamol and terbutaline has been discussed. <https://best.barnsleyccg.nhs.uk/clinical-support/medicines/prescribing-guidelines/Asthma%20treatment%20algorithm.pdf?UID=51873359320211110151045>

**The Medicines Management Team will audit a small cohort of patients who have had an annual review between 1<sup>st</sup> September & 30<sup>th</sup> November 2021.**

**The audits will need to demonstrate that the criteria has been met for at least 75% of patients included in the audits. If the 75% standard is not met, a second audit will need be completed by the 28th February 2022 for a further cohort of patients who have had an annual review between December 2021 and 28th February 2022.**

### Ordering & Supply of Prescriptions over the Christmas Period

In recent years, NHS 111 have said that one of the most common reasons patients contact the 24-hour service at the weekend and Bank Holidays is to ask how to obtain additional supplies of their repeat prescription medicines.

Practices and pharmacies are encouraged to advise and/or support patients in ordering their repeat prescriptions in advance if their normal supply is due to coincide with the festive period.

## Updates from the Barnsley Area Prescribing Committee (APC)

### Prescribing Guidelines

The Palliative Care Guideline: Ketamine and the Palliative Care Guideline: Management of Seizures/Epilepsy in Patients Unable to Swallow Oral Medication have been updated:

<https://best.barnsleyccg.nhs.uk/clinical-support/medicines/prescribing-guidelines/Ketamine%20information.pdf>

[https://best.barnsleyccg.nhs.uk/clinical-support/medicines/prescribing-guidelines/Palliative\\_Care\\_Guideline\\_-\\_Management\\_of\\_Seizures.pdf](https://best.barnsleyccg.nhs.uk/clinical-support/medicines/prescribing-guidelines/Palliative_Care_Guideline_-_Management_of_Seizures.pdf)

The Barnsley Continence Guide has been updated: [https://best.barnsleyccg.nhs.uk/clinical-support/medicines/prescribing-guidelines/Barnsley\\_Continence\\_Guide.pdf](https://best.barnsleyccg.nhs.uk/clinical-support/medicines/prescribing-guidelines/Barnsley_Continence_Guide.pdf)

The NEW 'Trial of stopping your overactive bladder drug' patient information leaflet is available:

<https://best.barnsleyccg.nhs.uk/clinical-support/medicines/prescribing-guidelines/Trial%20of%20Stopping%20Your%20Overactive%20Bladder%20Drug%20PIL.pdf>

A link to the leaflet will be added to the Treatment of Overactive Bladder in Women guidance.

### Formulary Changes (Drugs with a provisional classification are not currently included on the Barnsley formulary)

- **Baloxavir marboxil** (Xofluza®) for the treatment of uncomplicated influenza and for post-exposure prophylaxis of influenza has been assigned a **non-formulary provisional grey classification**.
- **Beclometasone and formoterol** (Luforbec®) for the treatment of asthma and severe COPD has been assigned a **non-formulary provisional grey classification**.
- **Dapagliflozin** (Forxiga®) for the treatment of **heart failure with reduced ejection fraction** has been assigned a formulary **amber-G classification** (note that the traffic light status of Dapagliflozin varies depending on indication). The Amber-G guideline is available on the [BEST website](#).
- **Dapagliflozin** (Forxiga®) for the treatment of **chronic kidney disease** has been assigned a **non-formulary provisional red classification** (note that the traffic light status of dapagliflozin varies depending on indication).
- **Empagliflozin** (Jardiance®) for the treatment of symptomatic chronic **heart failure with reduced ejection fraction** has been assigned a **non-formulary provisional red classification** (note that the traffic light status of empagliflozin varies depending on indication).
- **Tiotropium** (Tiogiva®) for COPD has been assigned a **non-formulary provisional grey classification**.
- **Updated Barnsley Asthma Guideline for Adults:**
  - **Fobumix® Easyhalers** 160/4.5 and 320/9 for asthma have been assigned a **formulary green classification** (previously non-formulary provisional grey).
  - **Relvar® Ellipta** has a **formulary green classification** for both asthma and COPD.
  - **Duoresp® Spiromax** for asthma and COPD has been assigned a **non-formulary provisional green classification** (previously formulary green). It should be used in **existing patients only**.

The updated Asthma and COPD Guidelines are available on the [BEST website](#).

## ScriptSwitch: New Quantity Limits Feature

Practices will have received information from Optum regarding a new quantity limits feature which has been added to ScriptSwitch. This offers prescribers a suggested limit to the quantity of the product being prescribed in line with local and national guidelines e.g. antibiotic course length, safe quantities of controlled drugs etc.

This information will be incorporated into the Barnsley ScriptSwitch profile over the coming weeks.

Quantity limits will only be available on recommendations selected where it is appropriate. This will be reviewed and updated regularly. The recommendation is embedded into the pop-up and prescribers will use a single click to accept or reject the recommendation, like any other switch.

**As with all ScriptSwitch recommendations, the final decisions always remain with the prescriber. The Medicines Management Team continue to welcome feedback and suggestions regarding ScriptSwitch and the profile content.**

## Patient Group Directions Update

**Yorkshire and the Humber Screening and Immunisation Team** emailed out the following updated PGDs to Practice Managers on 29.10.21 (valid from 01.11.21):

- Hepatitis A and B vaccine
- Hepatitis A vaccine
- Hepatitis B vaccine
- Low-dose diphtheria, tetanus and inactivated poliomyelitis vaccine (Td/IPV)

Practice Managers are asked to share the PGDs with all practitioners planning to work under them and to ensure individual practitioner authorisation.

The PGDs will shortly be available on the NHSE website along with all other current PGDs:

<https://www.england.nhs.uk/north-east-yorkshire/our-work/information-for-professionals/pgds/>

If Practice Managers do not receive emails about updated PGDs from the Screening and Immunisation Team please email: [joanne.howlett2@nhs.net](mailto:joanne.howlett2@nhs.net) or [joypower@nhs.net](mailto:joypower@nhs.net) (Medicines Management Pharmacists) and this can be arranged.

## SCRIPT – supporting safer prescribing practices in paediatrics

The SCRIPT elearning programme for prescribers working, training and specialising in paediatrics comprises 23 modules in 5 categories, covering a range of topics relating to prescribing and medicines safety in the secondary care setting.

Paediatric SCRIPT module categories include:

- Principles of Prescribing in Paediatrics
- Surgical Specialties
- General Therapeutics
- General Paediatrics
- Advanced Therapeutics

Each module takes approximately 60 minutes to complete. All course materials have been authored by a team of expert healthcare professionals and are regularly reviewed and updated.

**What are the benefits in using the SCRIPT elearning programme?**

- **Safer prescribing** Paediatric SCRIPT ensures that prescribers working, training and specialising in paediatrics are better prepared for prescribing, therefore improving patient safety.
- **Professional development** Certificates are made available on completion of a module, which can be used for online learning portfolios as evidence of continuing professional development.
- **Flexible learning** SCRIPT is easily accessible and intuitive to use, allowing users to complete modules at their convenience and refer back to modules at any time.

SCRIPT elearning is free to those with a NHS.uk or NHS.net address.

**How do I access the elearning?**

You can learn more about the SCRIPT elearning programmes by visiting the [SCRIPT website](#).

## MHRA Safety Updates

The latest MHRA safety updates are available to view online.

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[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/1033823/Nov-2021-DSU-PDF.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1033823/Nov-2021-DSU-PDF.pdf)

**Key issues affecting Primary Care are highlighted below - For the full details please view the guidance using the link above.**

### Yellow fever vaccine (Stamaril): new pre-vaccination checklist

A standardised pre-vaccination checklist has been introduced to ensure the yellow fever vaccine is indicated for the intended travel destination and to enable vaccinators to identify existing contraindications or precautions in individuals before vaccination

### Adrenaline auto-injectors: reminder for prescribers to support safe and effective use

Emerade 300 and 500 microgram adrenaline auto-injectors have been re-supplied to the market following the implementation of corrective actions – patients and their caregivers should be provided with training and advice specific to their prescribed adrenaline auto-injector. Follow the advice in the Summary of Product Characteristics for dosing considerations and continue to reiterate to patients the importance of carrying 2 in-date adrenaline auto-injectors with them at all times

### COVID-19 vaccines: updates for November 2021

Recent information relating to COVID-19 vaccines and medicines that has been published since the October 2021 issue of Drug Safety Update, up to 12<sup>th</sup> November 2021

### Approval of Lagevrio (molnupiravir)

We have [approved Lagevrio \(molnupiravir\)](#), following a rigorous review of its safety, quality and effectiveness by us and the government's independent expert scientific advisory body, the [Commission on Human Medicines](#) (CHM), making it the first oral antiviral for the treatment of COVID-19 to be approved.

Lagevrio (molnupiravir) is safe and effective at reducing the risk of hospitalisation and death in people with mild to moderate COVID-19 who are at increased risk of developing severe disease.

Lagevrio works by interfering with the virus' replication. Based on the clinical trial data, Lagevrio is most effective when taken during the early stages of infection and so we recommend its use as soon as possible following a positive COVID-19 test and within five days of symptoms onset.

Molnupiravir has been authorised for use in people who have mild to moderate COVID-19 and at least one risk factor for developing severe illness. Such risk factors include obesity, older age (>60 years), diabetes mellitus, or heart disease.

For more information about Lagevrio (molnupiravir), see our [Press release](#) and [Decision page](#) which includes the [Summary of Product Characteristics](#) and [Patient Information Leaflet](#).

### Summaries of Yellow Card reporting and other recent MHRA publications

We continue to publish the summaries of the [Yellow Card reporting for the COVID-19 vaccines](#) being used in the UK. The report summarises information received via the Yellow Card scheme and will be published regularly to include other safety investigations carried out by the MHRA under the [COVID-19 Vaccine Surveillance Strategy](#).

We have also recently:

- added Guillain-Barré syndrome (GBS) as a very rare side effect for Vaxzevria (previously COVID-19 Vaccine AstraZeneca) and updated the [Information for Healthcare Professionals](#) and [Information for UK recipients](#)
- updated the [Summary of Product Characteristics](#) sections 4.8 and 5.1 of the Pfizer/BioNTech vaccine for COVID-19 with additional information on potential side effects and vaccine efficacy, and updated section 4 of the [Patient Information Leaflet](#) with possible side effects
- updated the [Summary of Product Characteristics](#) (sections 4.3, 4.4 and 4.8) and [Patient Information Leaflet](#) (section 2 and 4) for COVID-19 Vaccine Janssen

We have previously provided summaries of the latest COVID-19 information, including in the [August 2021](#), [September 2021](#) and [October 2021](#) issues of Drug Safety Update. See [guidance on COVID-19 for all our latest information](#), including after publication of this article.

### Reporting Yellow Cards

Suspected adverse reactions associated with COVID-19 vaccines should be reported to the MHRA through the MHRA's [Coronavirus Yellow Card reporting](#) site or via the Yellow Card app.

As these products are under additional monitoring this includes all suspected ADRs associated with these vaccines. This will allow quick identification of new safety information.

When reporting please provide as much information as possible, including information about medical history, any concomitant medications, onset, treatment dates, and vaccine product brand name and batch number.

You may be contacted following submission of a Yellow Card report so that we can gather additional relevant information for the assessment of the report. These contributions form an important part of our understanding of suspected adverse event.

## Online Resources available to help

Clinicians are reminded that there are a number of online resources available to help with prescribing queries:

<http://best.barnsleyccg.nhs.uk> - aims to provide an all-purpose resource for GPs, Practice Nurses and other healthcare professionals to access everything from referral forms and pathways to prescribing guidelines and diagnostic tools.

<http://www.barnsleyformulary.nhs.uk> - aims to provide information and resources to clinicians on formulary choices, traffic light classifications, local & national guidance etc.

<https://best.barnsleyccg.nhs.uk/COVID19-medicines-and-prescribing-information.htm> - this resource has been produced by the Medicines Management Team and contains links to key information resources on the COVID-19 vaccination programme and other general COVID-19 resources, including use of medicines during the pandemic.

**The websites can be accessed from any computer, tablet or phone and from surgery or home. It is recommended that they are accessed using Google Chrome.**

## Contacting the Medicines Management Dietitian

Please be aware that since 25<sup>th</sup> October 2021 our Dietitian, Justin Ward, has only been working for the Medicines Management team for 8 hours per week.

Justin currently supports the team and practices with a number of different queries and will continue to do so wherever possible. Please note that **any queries should be sent via email only** rather than by practice task.

If the query is urgent, please specify 'URGENT' in the subject field as this will allow Justin to prioritise the emails.

**Contact Details** Email: [justin.ward@nhs.net](mailto:justin.ward@nhs.net)

## Support to Community Pharmacies

As part of the CCG's continued effort to support community pharmacies, brief check-in calls will continue to be made to see how community pharmacists and their teams are managing through these challenging times. The calls are an opportunity for community pharmacies to raise any issues or concerns they may have.

**Pharmacies are advised to flag any significant issues or concerns as soon as possible and do not need to wait for the next call.**

### Discharge Medication Service

If a pharmacy needs to query any discrepancies as part of the Discharge Medication Service, could you please Cc the respective clinical pharmacist within the GP practice.

### Disruptions to communication methods (phone lines/email)

Should any community pharmacies experience disruption to their lines of communication can they please bring these to our attention, wherever possible.

The team can be contacted by email:

- Shoaib Ashfaq, Primary Care Network Clinical Pharmacist – [s.ashfaq@nhs.net](mailto:s.ashfaq@nhs.net)
- Mir Khan, Primary Care Network Clinical Pharmacist – [mir.khan1@nhs.net](mailto:mir.khan1@nhs.net)
- Shauna Kemp, Primary Care Network Technician – [shauna.kemp@nhs.net](mailto:shauna.kemp@nhs.net)

**If you have any queries regarding medication or require support in identifying patients affected by any of the issues discussed in this newsletter, please contact the Medicines Management Pharmacist and/or Technician working in your practice.**

**Alternatively contact the Medicines Management Team on 01226 433669 or 433798.**

**We would welcome any feedback you have to give on this newsletter, as well as any suggestions for future articles.**

**Please send ideas and comments to Claire Taylor, MMT Administration Officer on email address [claire.taylor18@nhs.net](mailto:claire.taylor18@nhs.net)**

**Many Thanks**