

Our Ref: DC/NB

9th June 2022

Website: www.barnsleyccg.nhs.uk
<http://twitter.com/nhsbarnsley>
www.facebook.com/nhsbarnsley

To: Prescribing Clinicians and Pharmacists within the Barnsley locality

Dear Colleague

Re: Summary of Key Points from the Area Prescribing Committee Meeting on 11th May 2022

The main outcomes of the meetings were: -

Prescribing Guidelines

Guidelines for approved choice of Blood Glucose Testing Strips, Meters and Lancets. Also includes guidance for self monitoring of blood sugars and ketones. [UPDATED]

This guidance has been updated in liaison with the specialists. The first line choices of test strips for type 1 and type 2 diabetes stable on insulin therapy or on sulfonylureas or glinides are **Glucifix Tech sensor, Contour Plus and Palmdoc** (the Palmdoc 2 meter has a speaking function in 5 languages).

Accu-chek Instant test strips are reserved for patients who need the Fastclix lancing device (Accu-chek Instant is also a bolus calculator meter compatible with the Roche diabetes care platform where this meets the needs of specific patients).

Mylife Aveo test strips have been added as they are used with the Aveo bolus calculator meter which is compatible with Diasend (first line for young patients as the paediatric team use Diasend).

Glucomen Areo 2K meter is the first line choice ketone meter for all patients (type 1 and type 2 diabetes). Freestyle Optium Neo is the second line choice.

The ketone monitoring section has been developed to include more information. The advice regarding ketone monitoring for patients with type 2 diabetes prescribed SGLT2 inhibitors has also been updated in line with current guidance. The updated guideline states “**Do not issue ketone test strips solely for patients prescribed SGLT2 inhibitors. But if they present as unwell they should be managed as per ‘sick day guidance’ and their ketone levels checked using a practice meter even if their blood glucose is in the normal range**”.

The changes to the formulary choices are summarised in the traffic light classifications table within this memo and the updated guideline is available on the BEST website at the following link: https://best.barnsleyccg.nhs.uk/clinical-support/medicines/prescribing-guidelines/Blood_Glucose_Test_Strips.pdf

Choice of Direct Oral Anticoagulant (DOAC) for prevention of stroke and systemic embolism in adults with non-valvular AF (NVAf) Area Prescribing Committee Position Statement (in development)

The Committee received a draft position statement which has been prepared following the NHS commissioning recommendations, which positions edoxaban (Lixiana®) as the first line DOAC for NVAf, as it has the lowest acquisition cost.

The draft position statement will be shared with the specialists and LMC for feedback and the final version will be shared 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 / Amber-G Guidelines

SYB Shared Care Protocol for Epilepsy in Adults [UPDATED]

The final draft was received by the Committee and the final version will be uploaded to the BEST website in due course. Traffic light classification changes are listed in the table below.

SYB Shared Care Protocol for the treatment of Parkinson's disease [UPDATED]

The final draft was received by the Committee and the final version will be uploaded to the BEST website in due course. Traffic light classification changes are listed in the table below.

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>

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)
Medicines Optimisation Scheme QIPP areas 2022/23		
Beclomethasone and Formoterol (Luforbec®)	Asthma/COPD	Formulary green (previously non-formulary provisional grey). Luforbec® 100/6 MDI has replaced Fostair® 100/6 MDI on the formulary in primary care. Luforbec® 100/6 MDI is licensed for use in both asthma and COPD.

		When indicated for asthma Luforbec® 100/6 is licensed for both fixed dose treatment (maintenance treatment) and Maintenance and Reliever Therapy.
New Product Application		
Aymes® Actagain 600	Ready-to-drink, 'compact' Oral Nutritional Supplement (ONS)	<p>Formulary amber-G. To be initiated by a dietitian only. Aymes® Actagain 600 is a once daily product.</p> <p>Replaces Ensure® Compact as the second line compact ONS in primary care. Aymes® Shake Compact (sachet for reconstitution with milk) remains the first line 'compact' style ONS in primary care.</p> <p>The ONS guideline and fat emulsions guideline will be updated in due course.</p>
Guidelines for approved choice of blood glucose testing strips, meters and lancets: test strips added to the formulary		
Glucifix Tech sensor test strips	Blood glucose test strips	<p>Formulary green (first line choice).</p> <p>For Type 1 and type 2 diabetes stable on insulin therapy or on sulfonylureas or glinides.</p>
Contour Plus test strips	Blood glucose test strips	<p>Formulary green (first line choice).</p> <p>For Type 1 and type 2 diabetes stable on insulin therapy or on sulfonylureas or glinides.</p>
Palmdoc test strips	Blood glucose test strips	<p>Formulary green (first line choice).</p> <p>For Type 1 and type 2 diabetes stable on insulin therapy or on sulfonylureas or glinides.</p> <p>For patients who require a talking meter (the Palmdoc 2 meter has a speaking function in 5 languages).</p>
Accu-chek Instant test strips	Blood glucose test strips	<p>Formulary green.</p> <p>For Type 1 and type 2 diabetes stable on insulin therapy or on sulfonylureas or glinides (reserved for patients who need the Fastclix lancing device)</p> <p>OR</p> <p>For use where a bolus calculator meter is required (calculation done via an app). Compatible with Roche diabetes care platform. Training and education for the patient must be from the diabetes specialist nursing team.</p>
Mylife Aveo test strips	Blood glucose test strips	<p>Formulary green.</p> <p>For use with Aveo bolus calculator meter (calculation done via an app). Compatible with Diasend. First line for young patients as paediatric team use Diasend.</p> <p>Training and education for the patient must be from the diabetes specialist nursing team.</p>

Guidelines for approved choice of blood glucose testing strips, meters and lancets: test strips removed from the formulary		
GlucoRx Q test strips	Blood glucose test strips	Non-formulary provisional green (previously formulary green).
Accu-chek Performa	Blood glucose test strips	Non-formulary provisional green (previously formulary green). Accu-chek Performa meter has been discontinued but the strips are still available.
GlucoRx Nexus test strips	Blood glucose test strips	Non-formulary provisional green (previously formulary green).
Guidelines for approved choice of blood glucose testing strips, meters and lancets: The information in bold italic will be added to the formulary		
Freestyle Optium beta Ketone test strips	Ketone test strips	Formulary green. <i>Second line choice for ketone testing.</i> <i>Training and education for the patient must be from the diabetes specialist nursing team.</i> <i>GlucoMen Areo ketone sensors are the first line choice for ketone testing.</i>
Freestyle Optium test strips	Blood glucose test strips	Formulary green. <i>Only for use where one meter (Freestyle Optium Neo) is required to test for both ketones and glucose, for clinical and safety reasons. Separate glucose and ketone meters should be offered if safe for the patient to use.</i> <i>Note Glucomen Areo 2K meter remains the first line choice for ketone testing.</i>
Aviva test strips	Blood glucose test strips	Formulary green. <i>Only to be used with Accu-Chek Insight/Combo insulin pump.</i> <i>Training and education for the patient must be from the diabetes specialist nursing team.</i>
Freestyle Lite test strips	Blood glucose test strips	Formulary green. <i>Only to be used with Omnipod insulin pump (with Freestyle Lite meter).</i> <i>Training and education for the patient must be from the diabetes specialist nursing team.</i>
Contour Next test strips	Blood glucose test strips	Formulary green. <i>Only to be used with Medtronic MiniMed 640G insulin pump (using Contour Next Link 2.4 meter).</i> <i>Training and education for the patient must be from the diabetes specialist nursing team.</i>
OneTouch Verio test strips	Blood glucose test strips	Formulary green. <i>For existing patients only.</i>
GlucoMen LX Ketone test strips	Ketone test strips	Formulary green. <i>For existing patients only.</i>
GlucoMen LX sensors test strips	Blood glucose test strips	Formulary green. <i>For existing patients only.</i>

SYB Shared Care Protocol for Epilepsy in Adults		
Cenobamate	Adjunctive treatment of focal seizures with or without secondary generalisation. It should only be used as an add-on treatment, after at least 1 other add-on treatment has not controlled seizures and treatment is started in a tertiary epilepsy service.	Formulary amber (previously non-formulary provisional amber)
Cannabidiol	Lennox Gastaut syndrome https://www.nice.org.uk/guidance/ta615 and Dravet syndrome https://www.nice.org.uk/guidance/ta614	Formulary red (previously non-formulary provisional red)
Stiripentol	Adjunctive treatment of refractory generalised tonic clonic seizures in severe myoclonic epilepsy of infancy (Dravet syndrome), in combination with clobazam and valproate	Formulary red for adults (stiripentol is formulary amber for children in line with the shared care guideline for the management of epilepsies in children)
SYB SCP for the treatment of Parkinson's disease		
Co-beneldopa	Parkinson's disease	Formulary amber (previously formulary green)
Co-careldopa	Parkinson's disease	Formulary amber (previously formulary green)
Selegiline	Parkinson's disease	Formulary amber (previously formulary green)
Safinamide	Parkinson's disease	Formulary amber (previously non-formulary provisional red)
Other		
Empagliflozin	Treatment of symptomatic chronic heart failure with reduced ejection fraction.	Formulary amber-G for this indication (note that the traffic light classification of empagliflozin varies depending on the indication). Refer to the Barnsley formulary for further information. Amber-G guidance in development.
Yaltormin® SR (Metformin MR)	Licensed for the treatment of type 2 diabetes in adults.	It is no longer more cost effective to prescribe metformin MR as Yaltormin® SR. Metformin MR should be prescribed generically for new patients.

MHRA Drug Safety Update

The April 2022 MHRA Drug Safety Update can be accessed at the following link:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1069610/April-2022-DSU-PDF.pdf

Issues relating to primary care:

Pregabalin (Lyrica): findings of safety study on risks during pregnancy
A new study has suggested pregabalin may slightly increase the risk of major congenital malformations if used in pregnancy. Patients should continue to use effective contraception during treatment and avoid use in pregnancy unless clearly necessary.
Advice for healthcare professionals:
<ul style="list-style-type: none"> an observational study of more than 2,700 pregnancies exposed to pregabalin has shown use in the first trimester to be associated with a slightly increased risk of major congenital malformations

compared with exposure to no antiepileptic drugs or to lamotrigine or to duloxetine – see details of the study data on page 4 of the full alert

- continue to provide counselling to patients using pregabalin on:
 - the potential risks to an unborn baby ([see separate patient safety leaflet](#))
 - the need to use effective contraception during treatment
- continue to avoid use of pregabalin during pregnancy unless clearly necessary and only if the benefit to the patient clearly outweighs the potential risk to the fetus – ensure the patient has a full understanding of the benefits, risks, and alternatives, and is part of the decision-making process
- advise patients planning a pregnancy or who become pregnant during treatment to make an appointment to discuss their health condition and any medicines they are taking
- in cases where the benefit outweighs the risk, and it is clearly necessary that pregabalin should be used during pregnancy, it is recommended to:
 - use the lowest effective dose
 - report any suspected adverse drug reactions, including for the baby, via the [Yellow Card Scheme](#)

Reminder for prescribers of ANY antiepileptic drug:

- at initiation and as part of the recommended annual review for patients with epilepsy, discuss the risks associated with antiepileptic drugs and with untreated epilepsy during pregnancy and review their treatment according to clinical condition and circumstances – [see advice for antiepileptic drugs in pregnancy](#)
- urgently refer anyone planning a pregnancy or who is suspected to be pregnant for specialist advice on their antiepileptic treatment
- if a patient is planning to have a baby, offer 5mg per day of folic acid before any possibility of pregnancy

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, NHS Sheffield CCG
Alex Molyneux, NHS Doncaster CCG
Stuart Lakin, NHS Rotherham CCG