

# Medicines Management Newsletter

## December 2020

Welcome to the December 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) 2020-21

#### Covid-19 and other additional high priority medicines optimisation work streams

The practice will continue to engage with the Medicines Management Team to deliver high priority Covid-19 Medicines Optimisation work streams including but not limited to:

- **Provision of pharmacy and medication support to care homes as part of the pandemic response (this work will link with the Primary Care DES work from October 2020, however is additional and will not replace the DES work).** Clinical Pharmacists are continuing to complete desk-based medication reviews for new care home residents as well as checking medications records are correct for those residents who have moved as part of the realignment project. Some of the Clinical Pharmacists are also contributing, where requested, to the Care Home MDTs being completed across Barnsley.
- **Identifying and reviewing high risk Covid-19 patients as indicated by national guidance** – Practices are requested to continue to review any additions/subtractions to the national clinically extremely vulnerable list (details are included in the primary care bulletin each time the list is updated) and to continue to maintain the list by adding any patients identified in practice
- **High risk drug monitoring** - There are now a considerable number of patients on DOAC's (Direct Oral Anticoagulants) and other medication, who would be deemed to be at "high risk" of an adverse event due to the COVID-19 delays in monitoring. The Medicines Management Team are completing reviews of patients on DOACs, DMARDs (Disease-modifying anti-rheumatic drugs) and Immunosuppressants to highlight patients whose monitoring is out of date and is required to be completed, and to ask practices to ensure recall systems are in place for future monitoring.
- **Maximising electronic prescribing (EPS) and online ordering of medication** – Practices are requested to ask all patients – regardless of whether they are on a repeat medication or not – to add a nominated pharmacy for electronic prescriptions. Searches are available on the practice system to identify patients, please speak to the Medicines Management Technician in your practice if you require further details.
- **Maximising uptake of eligible patients of immunisation programmes such as influenza** – The Medicines Management Team have recently supported in identifying care home patients without a recent influenza vaccination as well as ensuring all patients coded as pregnant are correct e.g. if the pregnancy has now ended, this code would need revising
- **Safe systems and processes in relation to the management of out of stock medicines** – An out of stock process is being trialled across four practices with coverage over approximately 49 community pharmacies. This process will be evaluated before being considered for area wide roll out.

**Please note:** The CCG Medicines Management Team is happy to support practices to review prescribing in these and other areas, however please note that the overall responsibility for completion of the work within the scheme lies entirely with the practice. Any queries can be sent to the Medicines Management Team via email address [Barnsleyccg.mosreporting@nhs.net](mailto:Barnsleyccg.mosreporting@nhs.net) or by calling the team on 01226 433669

### Free supply of vitamin D for clinically extremely vulnerable people

The Department of Health and Social Care (DHSC) has announced that a free, four-month supply of daily vitamin D supplements will be offered to those that are clinically extremely vulnerable (CEV) and care home residents to support general health, in particular bone and muscle health. All care homes will automatically receive a provision for their residents, while individuals on the CEV list will receive a letter inviting them to opt in for a supply to be delivered directly to their homes from January 2021.

The DHSC have published the following guidance to ensure vitamin D supplements are taken safely <https://www.gov.uk/government/publications/vitamin-d-supplements-how-to-take-them-safely>

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

### Prescribing Guidelines

The **Treatment of overactive bladder in women guidance** has been updated in line with;  
[NICE NG123: Urinary incontinence and pelvic organ prolapse in women: management:](https://best.barnsleyccg.nhs.uk/Over%20active%20bladder%20-%20treatment%20algorithm.pdf)  
<https://best.barnsleyccg.nhs.uk/Over%20active%20bladder%20-%20treatment%20algorithm.pdf>

### Shared Care Guidelines

The following guidelines have been updated:

#### **Insulin Aspart (Fiasp®) Amber-G guideline:**

<http://barnsleybest.nhs.sitekit.net/clinical-support/medicines/shared-care-guidelines/Insulin%20Aspart%20-%20Fiasp.pdf?UNLID=715310894202012795530>

#### **Ivabradine (Procoralan®) Amber-G guideline:**

<https://best.barnsleyccg.nhs.uk/clinical-support/medicines/shared-care-guidelines/Ivabradine%20Shared%20Care%20Guidelines.pdf?UNLID=715310894202012795715>

#### **Rifaximin (Targaxan®▼) Amber-G guideline:**

<https://best.barnsleyccg.nhs.uk/clinical-support/medicines/shared-care-guidelines/Rifaximin%20Shared%20Care%20Guidelines.pdf?UNLID=71531089420201279583>

#### **Shared Care Guideline for Entresto® in the management of Chronic Heart Failure:**

<https://best.barnsleyccg.nhs.uk/clinical-support/medicines/shared-care-guidelines/Entresto%20Shared%20Care%20Guidelines.pdf?UNLID=71531089420201279599>

#### **Sodium Clodronate (Bonfos®) shared care guideline for the treatment and prevention of bone disease in multiple myeloma:**

<https://best.barnsleyccg.nhs.uk/clinical-support/medicines/shared-care-guidelines/Sodium%20Clodronate%20Shared%20Care%20Guidelines.pdf?UNLID=71531089420201271005>

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

- **Bempedoic acid** 180 mg film-coated tablets (Nilemdo▼®) and **Bempedoic acid / ezetimibe** 180 mg/10 mg film-coated tablets (Nustendi▼®), indicated in adults with primary hypercholesterolaemia (heterozygous familial and non-familial) or mixed dyslipidaemia, as an adjunct to diet, have been assigned a **non-formulary provisional grey** classification.
- **Atorvastatin** 30 mg, 60 mg film coated tablets have been assigned a **non-formulary provisional grey** classification (atorvastatin 10mg, 20mg, 40mg and 80mg remain formulary green).
- The once daily nifedipine preparation; **Adipine XL®** and the twice daily nifedipine preparations; **Coracten SR®** and **Tensipine MR®** have been added to the formulary with a **green** classification due to ongoing stock issues with many nifedipine preparations. Nifedipine preparations should be prescribed by brand as different versions of nifedipine MR preparations may not have the same clinical effect.
- **Cleen®** ready to use enema 133ml has replaced Fleet® ready to use enema and has been assigned a formulary **green** classification. **Cleen®** ready to use enema 133ml is now the **first line choice** phosphate enema, Phosphates Enema (Formula B) 128ml is the **second line choice** phosphate enema.
- **Gamolonic acid** (evening primrose oil) has been assigned a **non-formulary grey** classification. The licenses for Efamast (previously used for mastalgia) and Epogam (previously used for atopic eczema) were withdrawn by MHRA in 2002 due to a lack of evidence of efficacy following a review by the CSM. Gamolonic acid is not recognised as a food supplement within the Drug Tariff and it does not appear as a medicine in the BNF. No further evidence has been found to support its use in pre-menstrual syndrome, rheumatoid arthritis or multiple sclerosis. Due to lack of evidence of efficacy, it should not be prescribed at NHS expense.
- **Treatment of overactive bladder in women guidance:**
  - **Oxybutynin MR (Lyrinel® XL)** has been assigned a **non-formulary provisional green** classification (previously formulary green).
  - **Solifenacin 1mg/ml oral solution SF** has been assigned a formulary **green** classification. It is a second line option if the patient has swallowing difficulties or is unable to tolerate a solid formulation (oxybutynin patch 3.9mg/24 hours (Kentera®) is first line).

## Online Proxy Ordering

Across the country online proxy ordering is being promoted to help care homes order medication for their residents. Designated staff can be set up so they are able to electronically order residents medication online using links into the GP practice system.

Advantages include;

- **Able to see what is on the resident's repeat list at the GP practice**
- **Orders can be placed at any time of the day to suit the care home**
- **Can see if an item has been ordered and when it is next due to be ordered**
- **Reduced phone calls to practices/community pharmacy**
- **Paperless**
- **Reduces care home staff visiting GP practices (reduces footfall) for prescriptions**
- **Auditable**
- **Reduced staff time spent in ordering medicines**
- **Reduced waste**

One care home and practice have already been successfully set up and we have asked all Barnsley CQC registered care homes if they are interested so we may be in contact with your practice soon.

If you have any questions about this please contact us via email on [barnccg.mrsenquiries@nhs.net](mailto:barnccg.mrsenquiries@nhs.net) or by telephone on 07717 851063

## Flu vaccination programme update

Thank you to GP practices and community pharmacies who are continuing to deliver the flu vaccination programme. Current position (based on data w/e 6<sup>th</sup> December):

- 80% of patients ≥ 65 years have been vaccinated
- 51% of at risk patients <65 years have been vaccinated

The QOF points allocated to flu vaccination have been doubled in 2020/21 to 36 points for targets for the following four long term conditions:

- **COPD** (payment thresholds 57-97%), **diabetes** (payment thresholds 55-95%), **stroke or TIA** (payment thresholds 55-95%), and **coronary heart disease** (payment thresholds 56-96%).

The team are undertaking a piece of work to identify the small number of care home residents who may not yet have received their flu vaccine following the realignment. For patients who have recently joined the practice in whom the vaccination status is unclear or not documented, practices are advised to confirm the vaccination status with the previous practice as it has been highlighted that the information may not always be transferred within the practice system (e.g. Emis to SystmOne practice and vice versa).

### Community pharmacy flu vaccine stock information on the BEST website

Information on flu vaccine stock and appointment availability within local community pharmacies remains available on the BEST website ([link](#)) and continues to be updated weekly. Stock levels and appointment availability can change frequently and patients without an appointment should therefore be advised to contact the pharmacy in advance to confirm.

**Community pharmacies providing the flu vaccination service are kindly reminded to submit the information via the PharmOutcomes platform by the end of Wednesday each week.**

## Remembering to check new patient EPS nominations

When a patient registers with your organisation, their existing EPS nominations will travel with them as they are stored on the NHS Spine and not at their registered practice. This is not specific to their Primary Nomination, but includes Appliance Contractor and, where applicable, Dispensing Doctor nominations.

NHS Digital has notified EMIS of a small number of occasions where an EPS prescription has been sent to a Dispensing Doctor nomination, even though the patient is no longer registered at that Dispensing Doctor organisation.

To prevent prescriptions from being sent to an incorrect or historical nomination, EMIS recommends that you review patient's EPS nominations as part of the new patient registration process at your organisation. It is recommended that you:

- Check with the patient and update any incorrect nominations as soon as possible
- Update any forms the patient needs to complete
- Update any clinical templates used to gather registration information
- Remove any Dispensing Doctor nominations if they are no longer required

Guidance on managing nominations is available [here](#) (EMIS login is required to access this link)

## 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/936767/Nov-2020-DSU-PDF-1.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/936767/Nov-2020-DSU-PDF-1.pdf)

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

**Modafinil (Provigil): increased risk of congenital malformations if used during pregnancy.** Modafinil potentially increases the risk of congenital malformations when used in pregnancy. Modafinil should not be used during pregnancy and women of childbearing potential must use effective contraception during treatment and for 2 months after stopping modafinil.

**Ferric carboxymaltose (Ferinject ▼): risk of symptomatic hypophosphataemia leading to osteomalacia and fractures.** Monitor serum phosphate levels in patients treated with multiple high-dose administrations, or those on long-term treatments, and in those with pre-existing risk factors for hypophosphataemia. Re-evaluate ferric carboxymaltose treatment in patients with persistent hypophosphataemia.

**Bupropion (Zyban): risk of serotonin syndrome with use with other serotonergic drugs.** Cases of serotonin syndrome have been identified in associated with bupropion, especially in overdose or when bupropion is administered with other drugs with a serotonergic effect.

**Isotretinoin (Roaccutane ▼):** contribute to expert review. A review is being undertaken by the Medicines and Healthcare Products Regulatory Agency with advice from the Commission on Human Medicines and the Isotretinoin Expert Working Group due to concerns about the possible association between isotretinoin and suspected psychiatric and sexual disorders.

Contribute to the [Call for information](#).

Details about the call for information, including what and how to submit, are available via the [consultation website](#).

### Support Yellow Card: report suspected reactions

Yellow Cards can be used for reporting suspected adverse drug reactions to medicines, vaccines, herbal or complementary products, whether self-medicated or prescribed. The MHRA website provides full guidance on [reporting a Yellow Card](#).

Yellow Card reports can be made for suspected adverse drug reactions:

- on the [Yellow Card website](#)
- via the mobile app from the [Google Play Store](#) or Apple App Store
- in some clinical IT systems for healthcare professionals (EMIS, SystemOne, Vision, MiDatabank and Ulysses)

Reports can also be made via freephone (0800 731 6789, 9am to 5pm Monday to Friday).

## 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.

**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 Assistant on email address [claire.taylor18@nhs.net](mailto:claire.taylor18@nhs.net)**

**Many Thanks**