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ACTIONS this month:-

- Review DOACs appropriately, with a recent weight and CrCl
- Review patients taking oxycodone and amitriptyline
- Review quantities of GLP-1 mimetics on prescription



Cannabis-based Medicinal Products

NICE NG144 was published on 11th November 2019, reviewing the prescribing of cannabis products for people with intractable nausea and vomiting, chronic pain, spasticity and severe treatment-resistant epilepsy. NICE guidelines are not subject to statutory funding directions. They are advisory and local implementation is at the discretion of CCGs. NG144 will be reviewed in due course via the standard process within BSW and against competing priorities. An interim commissioning position statement is currently being drafted and will be published on net.formulary site soon

Key points to note for primary care;

- Use of cannabinoids in chronic pain indications was not recommended
- Sativex®, although approved in theory for some MS patients who've tried and failed other options remains non formulary and is not currently funded by BSW. If / when approved for local use it would be for specialist initiation.
- Other products are more for secondary care use but both Nabilone and Epidyolex remain non-formulary and are not funded by BSW

Safe and effective prescribing (1) DOAC continued (no apologies for repeating!)....

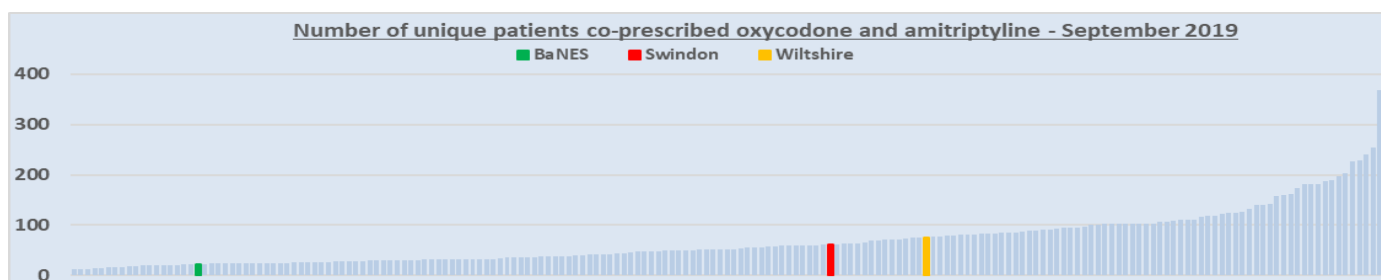
A reminder, MHRA advice issued recently; Creatinine Clearance (CrCl) should be used to guide dose adjustment for DOACs <https://www.gov.uk/drug-safety-update/prescribing-medicines-in-renal-impairment-using-the-appropriate-estimate-of-renal-function-to-avoid-the-risk-of-adverse-drug-reactions>

The Ardens DOAC template has links to the renal calculators within SystmOne which are useful. Also, there are useful Ardens searches to identify patients at a practice level; e.g. *Prescribing | Alerts | Anticoagulants & Prescribing | Monitoring | Anticoagulant | DOAC | No CrCl in last 13m*
 (remember the weight should be current (within the last year)

ACTION: Ensure DOAC patients have weights & CrCl recorded as part of annual review process

Safe and effective prescribing (2) Oxycodone & Amitriptyline

This interaction has been highlighted nationally as one to watch out for given a recent death and subsequent [coroner's report](#). Both have propensity to cause respiratory depression and, in this case, proved to be lethal. A new ePACT2 indicator has been developed and shared and the chart below shows the numbers of unique patients each CCG within BSW has. Attached is a spreadsheet for you to check whether your practice has any patients (not all do). If you have got patients, you can identify them within your practice by using the SystmOne search or requesting a list of patients directly from NHSBSA (instructions attached). Just be mindful that there are plenty of other prescribed 'risky' combinations involving opiates, hypnotics/BDZs, gabapentinoids.



ACTION: Ensure patients on this risky combination are reviewed

OpenPrescribing – PCN dashboards are now live!



Look here (<https://openprescribing.net/pcn/>) for your PCN's prescribing data

Formulary Update

Formulary	Drug	Decision	Comments
3Ts, BCAP, SFT	Melatonin 1mg & 5mg prolonged release (Slenyto)	NF	Not added to formulary

Quantities of GLP-1 Mimetics

We are aware of an issue with prescribing a quantity of 4 x Semaglutide instead of 1 (which is enough for a 1 month supply) and this does seem to have replicated locally. On investigating further, we found it may be an issue with other GLP-1s too and in some cases quantities of 28 and even 56 have been prescribed and charged for. We are aware of 1 local patient who has purchased a new fridge! These are expensive items, please prescribe sensibly.

ACTION: Review and adjust quantities of GLP 1 inhibitors being prescribed to ensure that more than intended quantities are not mistakenly prescribed, dispensed and charged for

Hypertension in adults (continued) – targets

We mentioned the updated NICE guidelines last edition (NG136). An additional key update; it is worth noting the target for patients with diabetes has changed from 140/80 to **140/90mmHg** i.e. the same now as the general population. Of course, if ≥ 80 years the target is slightly higher at 150/90 mmHg and you will use your clinical judgement for patients who are frail or have multimorbidity. For any patients with CKD, the target remains lower at 130/80. NB, if ABPM is being used, the corresponding targets are 5mmHg lower for systolic and diastolic values.

A reminder that there is a really useful 2 page visual summary [here](#) – useful to print off/ laminate for consulting rooms?

Also of great interest is some research reported recently which concluded that BEDTIME is most definitely the best time to be taking BP medication; the bedtime dosing group had almost half as many cardiovascular events as the morning dosing group (as reported by Red Whale updates from European Heart Journal 2019 doi.1093/eurheart/ehz754).

Shortages and Alternatives

MHRA guidance for Emerade: all unexpired batches of Emerade 150mcg, 300mcg and 500mcg are being recalled. This is due to a component believed to cause some pens to fail to activate and deliver adrenaline. Full detail [here](#)
Advice to prescribers & pharmacies in meantime;

- Prescribe autoinjector of alternative brand
- EpiPen and Jext at strengths of 300mcg are appropriate alternatives for the Emerade 500mcg strength. NB training of a new device is advised
- Patients already with in date supplies should continue to use the pens as instructed; carry 2 pens and avoid exposing to temperatures $>25^{\circ}\text{C}$

ACTION: Do not prescribe Emerade autoinjectors until further notice

Website Updates – most of the guidance will be applicable to all 3 CCGs

BSW COPD Primary Care guidance August 2019	http://www.bswformulary.nhs.uk/chaptersSub.asp?FormularySectionID=22
Exceptional Prescribing List 2019/20 (Wilts only)	https://prescribing.wiltshireccg.nhs.uk/?wpdmdl=1623
PRN (when required) medicines	https://prescribing.wiltshireccg.nhs.uk/?wpdmdl=2138
Homely remedies and OTC medicines	https://prescribing.wiltshireccg.nhs.uk/?wpdmdl=2139
MOCH monthly newsletters (Wilts only)	https://prescribing.wiltshireccg.nhs.uk/?wpdmdl=2142 (Nov)
BSW Formulary link	https://prescribing.wiltshireccg.nhs.uk/?wpdmdl=2143

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