



# SCRIPT

Medicines Management Newsletter

NHS

Wiltshire

Clinical Commissioning Group

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Intranet site : <https://prescribing.wiltshireccg.nhs.uk>

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## ACTIONS this month:-

- GP Practices and Community Pharmacists must familiarise and implement NHS England Self-Care campaign
- Subcutaneous Methotrexate: Avoid generic prescribing, ensure continuity of brand prescribed and provide patients with cytotoxic sharps bins
- Prescribers must familiarise themselves with the new antibiotic guidance on Lyme disease
- Fobumix Easyhaler has been added to the Asthma and COPD guidances. Prescribers should use Fobumix for new dry powder ICS/LABA initiations and consider swapping when appropriate
- New restrictions and recommendations when prescribing Valproate and Ulipristal acetate

## OTC medicines and Self-Care campaign

By now, practices and pharmacies in Wiltshire will have received paper copies of the 'Change to prescribing of Over the Counter medicines', available from: <http://www.wiltshireccg.nhs.uk/wp-content/uploads/2018/06/OTC-leaflet-FINAL.pdf>

This represents information direct from NHS England and also makes up an **18 month long campaign** via PrescQipp to facilitate behavioural change, to promote self-care and patient engagement with managing minor conditions without resorting to a GP visit.

It is NOT appropriate to perform bulk stoppage of all OTC medicines. It is appropriate to use the tools available on both the Wiltshire CCG, Medicines Management Team, and PrescQIPP websites to support this NHS requested **change in health behaviours**. It is expected that practices will amend their appointment triage protocol to reflect these principles.

Similarly, it is not appropriate for pharmacists to suggest patients to **ask their GP for a prescription** for OTC medication that they could supply within its licensed indications.

**ACTIONS: Self-care campaign should be implemented by all health care professionals to support behaviour change among the population**

## Subcutaneous Methotrexate pre-filled PEN

**Metoject PEN** is the local brand of choice for subcutaneous MTX pre-filled pens. Patients are instructed on how to use these pens by the specialist team so they can self-administer later on. It has been brought to our attention that some local patients have been prescribed or dispensed different brands of Methotrexate pens (i.e. Methofill<sup>®</sup>, Nordimet<sup>®</sup>) **These devices have a different injection technique and are not interchangeable.**

It is good practice to prescribe subcutaneous Methotrexate **by brand only**: **Metoject<sup>®</sup>** prefilled PEN or **Zlatal<sup>®</sup>** prefilled SYRINGE as indicated by the specialist team. These are visible on TPP as per previous newsletter: <https://prescribing.wiltshireccg.nhs.uk/?wpdmdl=1736>

Additionally, anecdotal reports suggest that some patients do not use **purple-lidded cytotoxic sharps bins** but just dispose of their used pens with their household waste. GP practices must provide **prescriptions** for these bins (1 litre or 5 litres) and Community Pharmacies should ensure that patients are aware that used pens and syringes should be disposed of appropriately when **dispensing**.

Patients must register with Wiltshire Council for **clinical waste collection** by calling 0300 456 0102

**ACTION: Avoid generic prescribing, ensure continuity of brand prescribed & dispensed and provide patients with cytotoxic sharps bins ensuring they are aware of appropriate disposal route**

## Lyme disease: management and prevention

Follow the link below for information on how to reduce the risk of Lyme disease, its clinical management and other useful resources.

<https://www.gov.uk/guidance/lyme-disease-management-and-prevention>

**WCCG antibiotic guidance** has been updated with the latest advice on antibiotic therapy for Lyme disease. Please see **pages 9 and 10** of this document: <https://prescribing.wiltshireccg.nhs.uk/?wpdmdl=87>

Please remember that **post exposure prophylaxis** is only recommended in areas of very high Lyme disease incidence (such as the eastern seaboard of the USA) and **is not recommended anywhere else.**

**ACTION: Prescribers must familiarise themselves with the new antibiotic guidance on Lyme disease**

## Formulary Update

There has been no Formulary updates relevant to Primary Care this month

### Fobumix Easyhaler®

Fobumix Easyhaler has recently been added to all local formularies as the most cost-effective presentation of "Budesonide/Formoterol" dry powder inhaler.



Low dose ICS/LABA in combination inhaler.	Medium dose ICS/LABA in combination inhaler. PROVIDE STEROID CARD	High dose ICS/LABA in combination inhaler. PROVIDE STEROID CARD
Fobumix Easyhaler* (120 doses per inhaler) 80/4.5 1 puffs BD £10.75	Fobumix Easyhaler* (120) 160/4.5 2 puffs BD £21.50 (or 320/9 1 puff BD at £21.50)	Fobumix Easyhaler (60) 320/9 2 puffs BD £43.00

- Considerable savings can be made by use of the Fobumix range when a dry powder ICS/LABA is required (~20% compared with direct equivalents DuoResp Spiromax and Symbicort Turbohaler)
- Please **do not use the 60** actuation 160/4.5 size inhaler which is less cost-effective, always use the 120 actuation size.

**ACTION: Prescribers should use Fobumix for new dry powder ICS/LABA initiations and consider swapping when appropriate**

### Valproate use by women and girls

In March 2018 the CMDh [endorsed a strengthened regulatory position](#) on valproate medicines. Valproate must no longer be used in any woman or girl able to have children unless she has a pregnancy prevention programme in place. This is designed to make sure patients are fully aware of the risks and the need to avoid becoming pregnant.

The **video** on the website below has been designed to help healthcare professionals in implementing the new 2018 regulatory measures, including the pregnancy prevention programme and regular patient reviews.

<https://www.gov.uk/guidance/valproate-use-by-women-and-girls#history>

**ACTION: GP practices must familiarise with the Valproate pregnancy prevention programme**

### Esmya® (ulipristal acetate) and risk of serious liver injury

New **restrictions** to use and requirements for **liver function monitoring before, during, and after** treatment have been imposed on this medicine

More than one treatment course is authorised only in women who are not eligible for surgery, and liver function monitoring is to be carried out in all women treated with Esmya. Before initiation, clinicians must discuss with women the **rare risk of liver damage and advise them to seek urgent medical attention** if they develop any symptoms or signs of liver injury (such as tiredness, yellowing of the skin, darkening of the urine, nausea and vomiting)

Further detail about this alert can be found here: <https://www.gov.uk/drug-safety-update/esmya-ulipristal-acetate-and-risk-of-serious-liver-injury-new-restrictions-to-use-and-requirements-for-liver-function-monitoring-before-during-and-after-treatment>

**ACTION: Prescribers must be aware of new restrictions when prescribing further courses of Esmya**

### Website Updates

Magnesium Supplements guidance	<a href="https://prescribing.wiltshireccg.nhs.uk/?wpdmdl=648">https://prescribing.wiltshireccg.nhs.uk/?wpdmdl=648</a>
PHSE – VZIH shortage information	<a href="https://prescribing.wiltshireccg.nhs.uk/?wpdmdl=1773">https://prescribing.wiltshireccg.nhs.uk/?wpdmdl=1773</a>
National UTI guidelines	<a href="https://prescribing.wiltshireccg.nhs.uk/?wpdmdl=1400">https://prescribing.wiltshireccg.nhs.uk/?wpdmdl=1400</a>
Travel Vaccines - for <b>Prescqi</b> registered users only	<a href="https://prescribing.wiltshireccg.nhs.uk/?wpdmdl=1780">https://prescribing.wiltshireccg.nhs.uk/?wpdmdl=1780</a>

All POD documents are now online and available to view on our website

This newsletter represents what is known at the time of writing so information may be subsequently superseded. Please contact [prescribingwiltshire@nhs.net](mailto:prescribingwiltshire@nhs.net) with comments/feedback or information for inclusion. This newsletter is aimed at healthcare professionals working within NHS Wiltshire CCG.