

Derbyshire Joint Area Prescribing Committee (JAPC)

This is a countywide group covering NHS North Derbyshire, Southern Derbyshire, Hardwick and Erewash Clinical Commissioning Groups, Derbyshire Community Health Service Foundation Trust, Derbyshire Healthcare Foundation Trust, University Hospital of Derby and Burton and Chesterfield Royal Hospital foundation trusts. It provides recommendations on the prescribing and commissioning of drugs.

See <http://www.derbyshiremedicinesmanagement.nhs.uk/home>

KEY MESSAGES FROM THE JAPC JANUARY 2019 MEETING CLINICAL GUIDELINES

- Rivaroxaban 2.5mg has been classified as BLACK for peripheral or carotid artery disease in combination with aspirin, pending a national review by NICE (due August 2019). Rivaroxaban is less cost effective than standard treatment and has not been compared against clopidogrel which has evidence to support its superiority over aspirin.
- Low molecular weight heparin guidance has been updated with minor wording changes. A statement has been included regarding arrangements for continued administration has been arranged and that in non-valvular AF sub therapeutic INRs do not need bridging LMWH.

PATIENT GROUP DIRECTIONS

Nil

SHARED CARE GUIDELINES

1. Somatostatin Analogues – update of contact details for endocrinology consultants. Content remains the same.
2. Vigabatrin for children with epilepsy – minor update to GP responsibilities section in relation to the required visual field checks.

NOAC for suspected DVT in primary care

JAPC has ratified a new protocol for use of a NOAC for a suspected DVT in primary care. The protocol includes a pathway for managing a suspected DVT in primary care through completion of a two-level Wells score to consider if a DVT is likely or not. For patients in whom a DVT is likely and same day scan is not possible, then prescribing of apixaban or rivaroxaban (off-licence) or LMWH (if a NOAC is not indicated), is advocated until the patient can have the required diagnostic scan.

CHRONIC RHINOSINUSITIS

Management of chronic rhinosinusitis has been updated in consultation with local specialists. The guidance now includes advice regarding administration of nasal drops in the hanging head position; (to improve distribution to the target area and reduce amount passing directly to the pharynx to be swallowed). Further additions include a statement to the effect that there is no evidence for use of steam inhalation, but patients can choose to trial this as part of self-care package; that budesonide and beclomethasone have high bioavailability and to consider using mometasone if the patient is already on inhaled steroids. Also the use of nasal drops and oral steroids in the treatment pathway has been combined as this may demonstrate an improvement.

'NO DEAL BREXIT' – DOHSC UPDATE

Update in the event that UK leaves the EU without an agreement on 29th March 2019. The government is making plans to ensure that in the event of a no-deal Brexit, the flow of medicines and medical products is not impeded. Work is underway to ensure there is sufficient roll-on, roll-off freight capacity to enable these products to move freely into the UK. Pharmaceutical companies are advised to ensure there is a minimum of six weeks additional supply in the UK, over and above their business as usual operational buffer stocks. The update reiterates UK health and social care providers – including hospitals, care homes, GP's and community pharmacies should NOT stock pile additional medicines beyond their business as usual stock levels and that there is no need for clinicians to write longer NHS prescriptions.

Prescribers are asked not to alter prescribing patterns.

GUIDELINE GROUP KEY POINTS

Co-danthramer, co-danthrusate and silver sulfadiazine cream have changed traffic light classification from Green to Brown.

Chapter 1 – esomeprazole brown after use of all formulary choices PPIs; bisacodyl, Manevac granules removed as alternative cost effective options are available; Anusol HC Plus is available as OTC (NB: Anusol HC is a POM)

Atrial fibrillation guidance – monitoring renal function at 6 months if CrCl 30-60ml/min and every 3 months if CrCl 15-30ml/min after practical consideration.

Vacuum pumps – following message added to traffic lights - for out of area requests, GP's can accept on-going prescribing if specialist provides an APC approved shared care protocol.

MHRA NOTICES

1. All **oral lidocaine-containing products** with an infant teething indication are becoming Pharmacy medicines – these products will only be available to purchase under the supervision of a Pharmacist. This decision was based on a number of reports of medication errors received via the Yellow Card system.
2. **Valproate medicines** – all healthcare professionals must continue to identify and review all female patients of childbearing age on valproate, including when it is used outside the licensed indications and provide them with the patient information materials every time they attend their appointment. Concerns have been raised by support networks that patients are not being properly informed of the risks and that they have not been given the patient information materials including with every dispensed medicine.
3. **Emollients and risk of severe and fatal burns** with paraffin containing and paraffin-free emollients. Warnings about the risk of severe and fatal burns are being extended to all paraffin-based emollients regardless of paraffin concentration. Data suggests there is also a risk for paraffin-free emollients. Patients who use these products should be advised not to smoke or go near naked flames.
4. **Direct-acting antivirals for chronic hepatitis C and risk of hypoglycaemia** in patients with diabetes. Healthcare professionals are advised to monitor glucose levels closely in patients with diabetes during direct-acting antiviral therapy for hepatitis C, particularly within the first 3 months of treatment and modify diabetes medication or doses when necessary.
5. **Hydrocortisone muco-adhesive buccal tablets** should not be used off-label for adrenal insufficiency in children due to serious risks. Hydrocortisone muco-adhesive buccal tablets are indicated only for local use in the mouth for aphthous ulceration and should not be used for treating adrenal insufficiency. Substitution of licensed oral formulations of hydrocortisone with muco-adhesive buccal tablets can result in insufficient cortisol absorption and, in stress situations, life-threatening adrenal crisis. Prescribers and pharmacists should only consider use of licensed hydrocortisone products for adrenal replacement therapy. Suspected adverse event reports indicate that the buccal hydrocortisone tablets provide decreased cortisol release compared with conventional oral tablets.

Drug	Date considered	Decision	Details
Insulin glargine biosimilar (Semglee)	Jan 2019	GREEN	Treatment of diabetes mellitus in adults, adolescents and children aged ≥2 years.
Rivaroxaban	Jan 2019	BLACK	2.5mg + aspirin indicated for the prevention of atherothrombotic events in adults with coronary artery or symptomatic peripheral artery disease at high risk of ischaemic events, pending NICE review
Decitabine	Jan 2019	BLACK	NICE TA548: for untreated acute myeloid leukaemia (terminated appraisal)
Denosumab	Jan 2019	BLACK	NICE TA549: for preventing skeletal-related events in multiple myeloma. (terminated appraisal)
Vandetanib	Jan 2019	BLACK	NICE TA550: for treating medullary thyroid cancer.
Lenvatinib	Jan 2019	RED	NICE TA551: for untreated advanced hepatocellular carcinoma.
Liposomal Cytarabine-Daunorubicin	Jan 2019	RED	NICE TA552: for untreated acute myeloid leukaemia.
Pembrolizumab	Jan 2019	RED	NICE TA553: for adjuvant treatment of resected melanoma with high risk of recurrence.
Abemaciclib (Verzenios)	Jan 2019	RED	Treatment of women with hormone receptor positive, human epidermal growth factor receptor 2 negative locally advanced or metastatic breast cancer in combination with an aromatase inhibitor or fulvestrant as initial endocrine-based therapy, or in women who have received prior endocrine therapy. In pre- or perimenopausal women, the endocrine therapy should be combined with a luteinising hormone-releasing hormone agonist. As per NHSE commissioning intentions

Definitions:

RED: drugs are those where prescribing responsibility lies with a hospital consultant or a specialist.

AMBER: drugs are those that although usually initiated within a hospital setting, could appropriately become the responsibility of the GP, under a shared care agreement.

GREEN: drugs are regarded as suitable for primary care prescribing.

BROWN: drugs are those that JAPC does not recommend for use, except in exceptional circumstances, due to lack of data on safety, effectiveness, and/or cost-effectiveness.

BLACK: drugs, treatments or medical devices are **not** recommended or commissioned* (*unless agreed through the individual funding request route)

CONSULTANT/SPECIALIST INITIATION: consultant/specialist issues the first prescription usually following a consultation because:

- The patient requires specialist assessment before starting treatment and/ or
- Specialist short term assessment of the response to the drug is necessary.

GPs will be asked to continue prescribing when the patient is stable or predictably stable

CONSULTANT/SPECIALIST RECOMMENDATION: consultant/specialist requests GPs prescribe initial and on-going prescriptions, but ensures:

- There is no immediate need for the treatment and is line with discharge policies and
- The patient response to the treatment is predictable and safe

DERBYSHIRE MEDICINES MANAGEMENT, PRESCRIBING AND GUIDELINES WEBSITE

This website is the first port of call for information on local NHS decisions and guidance on medicines use. It includes: local prescribing formularies, JAPC decisions, traffic lights, shared care guidelines, medicines guidelines, newsletters, controlled drug resources, and other medicines management resources. The site improves upon previous sites in several ways. It is faster, more reliable, has its own search engine, and it is easier to find information. Content is constantly being updated and you can sign up for e-mail alerts to keep you up to date.