# **Derbyshire JAPC Bulletin**

www.derbyshiremedicinesmanagement.nhs.uk



# We would like to wish all of our readers a very Merry Christmas!!

# **Derbyshire Joint Area Prescribing Committee (JAPC)**

This is a countywide group covering NHS North Derbyshire, South Derbyshire, Hardwick and Erewash clinical commissioning groups, Derbyshire Community Health Services Trust, Derbyshire Healthcare Foundation Trust, Derby and Chesterfield Royal Hospitals. It provides recommendations on the prescribing and commissioning of drugs.

See <a href="http://www.derbyshiremedicinesmanagement.nhs.uk/home">http://www.derbyshiremedicinesmanagement.nhs.uk/home</a>

# **KEY MESSAGES FROM THE JAPC NOVEMBER 2014 MEETING**

#### **CLINICAL GUIDELINES**

- 1. Atrial fibrillation. This guideline has been updated with minor changes following further recommendations from local cardiologists. Advice relates to dual treatment (antiplatelet + anticoagulant) and the pill-in-the pocket strategy.
- 2. Clozapine. This is an update of existing advice that relates to the recording of clozapine (prescribed by specialists) on GP clinical systems.
- 3. Alcohol withdrawal supplementation. A Position statement has been produced that outlines the differences between our providers on supplementation of vitamins in alcohol misuse. The statement will help GPs understand their role in prescribing when care is transferred.

#### **SHARED CARE GUIDELINES**

- 1. Phosphate binders for the treatment of hyperphosphateamia in patients on dialysis have been reclassified from 'AMBER' to 'GREEN' after consultant/ specialist initiation. This decision by JAPC is based on the degree of monitoring that GPs are required to undertake. The shared care has been replaced with a prescribing information sheet. This agreement is with Derby Hospitals NHS Foundation Trust (Royal Derby Hospital)
- 2. Somatostatin analogues (lanreotide/ octreotide). Updated with minor changes. Prescribers are reminded to only take on shared care for the indications listed in the shared care agreement.

#### **JAYDESS**

Public Health has decided to commission Jaydess the intrauterine contraceptive device. The IUD requires 3 yearly insertions and unlike Mirena for contraceptive use only. Specialist contraceptive services and GPs commissioned to provide insertion of IUDs/ IUS services will be provided with additional guidance regarding indications and application. This advice can be accessed from our <u>website</u>

# TRAVEL VACCINES

The vaccines listed in the summary table for travel on the NHS have all been classified as BLACK. Clarification whether the combination hepatitis A and B vaccine is prescribe-able on the NHS is being determined in consultation with the Local Medical Committee.

# **TRAFFIC LIGHT CLASSIFICATION**

The traffic light classification has been updated to make clear the distinction between Black and Brown status. Black now includes "not deemed affordable or low priority for CCGs" and Brown includes "exceptionality where a cohort of patients may benefit can be identified". The following statement has also been added to the BLACK classification "People on treatment with a BLACK drug designation prior to JAPCs decision should be able to continue treatment until their NHS clinician consider it appropriate to switch or stop at the next available medication review".

### **DERBYSHIRE GUIDELINE GROUP**

The Derbyshire Guideline Group is a subgroup of JAPC and the following detailing aids have been produced or updated

- 1. Epilepsy
- 2. Proton Pump inhibitors
- 3. Chronic Kidney disease

# MHRA Drug Safety Update (Vol. 8, Issue 3 – October 2014)

- 1. Interferon beta: risk of thrombotic microangiopathy and risk of nephrotic syndrome. Practices across Derbyshire will have patients on beta interferon prescribed from specialist centres for remitting relapsing multiple sclerosis. GPs will need to be vigilant for signs and symptoms of the adverse effects when patients present to them. Clinical features of thrombotic microangiopathy include thrombocytopenia, new onset hypertension, fever, central nervous system symptoms (e.g. confusion and paresis), impaired renal function and early signs or symptoms of nephrotic syndrome include oedema, proteinuria, and impaired renal function especially in patients at high risk of renal disease
- Dexamethasone 4 mg/ml injection (Organon Laboratories Limited) has been replaced with a new formulation called Dexamethasone 3.8 mg/ml solution for injection (Aspen Pharma Trading Limited). As a result, the storage conditions, presentation, and packaging will change. Derbyshire medicines management team are helping to identify practices that are affected by this change.

Drug	BNF	Date considered	Decision	Details
Debrisoft monofilament debridement pad	A 5.5.3	Nov 2014	Brown after consultant/ specialist recommendation	Second line product after specialist recommendation from Tissue Viability Nurses for chronic sloughy wounds and hyperkeratotic skin around acute or chronic wounds. Treatment length will be stated noting that Debrisoft is not cost effective if having to use more than 10 applications.
Estring vaginal ring	7.2.1	Nov 2014	Green	Treatment option alongside other HRT preparations.
Levonorgestrel 13.5mg intrauterine delivery system (Jaydess)	7.3.2.3	Nov 2014	Green	Commissioned in line with advice from Public Health for contraception only.
Phosphate binders (Calcium carbonate, calcium acetate, aluminium, sevelamer, lanthanum)	9.5.2.2	Nov 2014	Green after consultant/ specialist initiation	Reclassification from amber applicable with Derbyshire Hospitals Foundation Trust
Cabozantinib	Not listed	Nov 2014	Red	For medullary thyroid cancer.
Daclatasvir	Not listed	Nov 2014	Red	For Hepatitis C infections in adults, in combination with other therapies
Idelalisib	Not listed	Nov 2014	Red	For chronic lymphocytic leukaemia/ refractory follicular lymphoma
Teduglutide	Not listed	Nov 2014	Red	Short bowel syndrome
Pentosan polysulfate sodium	Not listed	Nov 2014	Red	Unlicensed drugs (or not categorised in a BNF) or drugs unfamiliar to primary care prescribed "off-label
Travel vaccines	14.6	Nov 2014	Black	Travel immunisations cannot be given as an NHS service. These include hepatits B (EngerixB, Fendrix, HBvaxPRO), meningitis ACWY, yellow fever, Japanese B encephalitis, tick borne encephalitis and rabies.
Dabrafenib	8.1.5	Nov 2014	Red	As per NICE TA321 - for treating unresectable or metastatic BRAF V600 mutation positive melanoma.

#### 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.

#### **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 are <u>not</u> routinely\* 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:

- a. The patient requires specialist assessment before starting treatment and/ or
- b. 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 <u>RECOMMENDATION</u>: consultant/specialist requests GPs prescribe initial and ongoing prescriptions, but ensures:

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