

The purpose of the Medicines Management newsletter is to deliver succinct, evidence-based advice and information on primary care prescribing issues. Aimed at busy prescribers wanting to know key messages from the many publications in the previous month.

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1. What's in the news

[DTB September 2015, Volume 53 Number 9](#)

Adrenaline auto-injectors

The DTB reports on an [EMA](#) article that has recommended several measures, including the introduction of more effective educational material, to ensure that patients and carers use adrenaline auto-injectors correctly. This follows a review of no robust evidence that the devices deliver adrenaline for all patients, potentially leading to a delayed response. The training element is also endorsed by [MHRA](#) advice May 2014.

[JAPC](#) were conscious to promote the more cost effective option (Emerade) but also acknowledged the risks of swapping different delivery devices, training required, changes to protocols by different healthcare providers and agreed that local formulary included all three forms of adrenaline autoinjectors Jext, Epipen and Emerade. Prescribers should prescribe these by brand and provide training to patients and/or carers on how to administer them.

Analgesia for soft-tissue injuries

Acute soft injuries are common and costly and often require pain relief. The DTB reports on a [Cochrane review](#) which found low or very low-quality but consistent evidence showing no important difference between NSAIDs and paracetamol, opioids or a combination of paracetamol and opioid in pain or swelling after a soft tissue injury.

[Given the adverse effects associated with NSAIDs \(renal, gastro intestinal and cardiovascular\) it would be prudent to trial short courses of paracetamol first.](#)

Management of dental patients taking anticoagulants and antiplatelets

The Scottish Dental Clinical Effectiveness Programme has published [guidance](#) on management of dental patients taking anticoagulants, including novel oral anticoagulants (NOACs) and antiplatelets. This includes recommendations and practical advice to inform bleeding risk assessment and decision making for the treatment of this patient group. Information about the newer generation anticoagulants and antiplatelet drugs as well as the more established medications is included.

Vaccines and porcine gelatine

The issue of some vaccines that contain ingredients derived from pigs (in this case gelatine – known as 'porcine' gelatine) has concerned some faith groups. Public Health England has published a [leaflet](#) providing information about vaccines containing porcine gelatine and available alternative. The leaflet provides information about vaccines that contain porcine gelatine and any alternatives that are available.

[Deleted products 2015 | MIMS online](#) for September 2015

Novopen 4	Voltarol Dispersible (diclofenac)	Voltarol Retard (diclofenac)
Zeasorb		

2. **Drug safety update** relating to primary care prescribing

(For more information see [Drug Safety Update](#)) Volume 9, Issue 2, September 2015

The website that hosts the Drug Safety Update has now been moved. You can subscribe to alerts by using the following [sign up link](#). Headlines-

1. **Proton pump inhibitors**: very low risk of subacute cutaneous lupus erythematosus which can occur weeks, months, or even years after exposure to the drug.

3. **Local news and GP/pharmacist queries**

GP query

What are the relative VTE risks of using norethisterone or medroxyprogesterone to delay menstruation for social rather than medical reasons?

Answer

The query was raised with UKMI and the FSRH

[UKMI summary](#) - there is very little information in the literature on relative thrombotic risk associated with norethisterone and medroxyprogesterone used for short periods to delay menstruation. Norethisterone is though licensed for this use and therefore commonly used. There is less information on the use of medroxyprogesterone for this use, nor does there appear to be any data on thromboembolic risk. However the Provera SPC says that it is contra-indicated where there is a past history of thromboembolism and this is also listed as an adverse effect of medroxyprogesterone, so it is not free of this risk.

[Faculty of Sexual and Reproductive Healthcare Clinical Effectiveness Unit](#)- the use of norethisterone (NET) as a "lifestyle drug" to delay periods at times of, for example, holidays was suggested by an Oxfordshire study that demonstrated seasonal NET prescribing trends. For women with VTE risk factors, the CEU suggests that the risk/benefit balance might differ between women using NET to control very heavy bleeding and women using NET to avoid normal bleeding on holiday. Evidence relating to VTE risk with progestogens other than NET for treatment of heavy menstrual (HMB) bleeding is lacking

Mansour¹ suggests that medroxyprogesterone acetate 10mg tds might be considered for use in women with risk factors for VTE: a small study had shown it to be as effective as NET for HMB.

1. Safer prescribing of therapeutic norethisterone for women at risk of venous thromboembolism. Mansour D. J Fam Plann Reprod Health Care. 2012 Jul;38(3):148-9. doi: 10.1136/jfprhc-2012-100345. Epub 2012 Jun 12

Local news

1. **Lixisenatide** starter packs-There has been an issue locally whereby patients initiated on lixisenatide (Lyxumia) have continued to receive starter packs on repeat prescription. The pack includes the 10mcg pen used for the first two weeks and a 20mcg pen as a maintenance dose. This has led to a waste of medicines and cause for potential confusion with the patient.
2. **Oral contraceptives and antidepressants** -Following a recent coroner's case in the region the medicines management team would like to remind all practices of the risks of depression in patients prescribed oral contraceptives, particularly Dianette®. The SPC for Dianette® states that it should be stopped immediately if a patient presents with severe depression. Dianette® is also associated with a 1.5-2 times higher risk of venous thromboembolism than levonorgestrel-containing combined oral contraceptives, but this risk is comparable to those that contain a third generation progestogen. If prescribing antidepressants, be aware of the risk of suicide especially in the early stages of recovery and advise the patient accordingly. Particular caution should be exercised if prescribing for young patients. Advise the patient that they should consider informing a friend or relative that they are taking antidepressants.
3. **Propranolol toxicity**- Propranolol is particularly toxic in overdose, with death occurring following ingestion of as little as 2g. Prescribers should bear this in mind when prescribing and ensure that the lowest effective strengths are prescribed and only small quantities are given at any one time, especially if there is a history of depression

4. Quality, Innovation, Productivity and Prevention (QIPP)

Which vitamin D preparations are suitable for a vegetarian or vegan diet?

UKMi Medicines [Q&A](#) provides information from manufacturers or importers regarding the suitability of such products in vegans and vegetarians.

Vaccines centrally procured for a practice through Public Health England

The NHS Business Services Authority (NHSBSA) has reminded practices to exercise caution with regards to claiming payment for vaccines. Those vaccines that have been centrally procured for their practice through Public Health England, should not be claimed for under personal administration arrangements to NHS Prescription Services on form FP34D/PD Appendix or FP10. Last year NHS Prescription Services identified a higher number of FP34D/PD Appendix forms and FP10 forms claiming payment for Fluenz Tetra nasal spray suspension Influenza vaccine, NeisVac-C vaccine and Boostrix IPV injection where practices later verified these had been centrally procured via a vaccine ordering facility such as ImmForm. Practices must not submit payment claims for vaccines or injections obtained in this way to NHS Prescription Services.

An FP34D/PD Appendix or FP10 form should only be submitted for payment to cover the dispensing of a vaccine by personal administration where the vaccine has been purchased by the practice

Anaemia management in people with CKD

NICE Bites [summarises](#) NICE guidance on anaemia management in people with chronic kidney disease

Antimicrobial stewardship

NICE Bites written by UKMI (North West) summarises NICE guidance for systems and processes for effective use of [antimicrobials](#)

5. NICE evidence summaries: New medicines (relating to primary care prescribing)

[None](#)

6. Useful resources

BMJ	www.thebmj.com
JAMA: The Journal of the American Medical Association	http://jama.ama-assn.org/
The Lancet	www.thelancet.com
The New England Journal of Medicine	http://content.nejm.org/
BMJ, JAMA and NEJM can be accessed in full-text directly through your NHS Athens Account via: National Library for Health: search via My Journals MyAthens: Via National Library for Health Resources or Local Resources. Current Lancet articles are sometimes available with free registration from http://www.thelancet.com/content/register . Print copies of The Lancet are available at DCGH library.	www.library.nhs.uk or www.athens.ac.uk
If you have not already registered for an NHS Athens Account, please register at: NB: It is recommended that you register on a Trust (NHS) PC for speedy confirmation of your username a password. Once registered, your account can be accessed from any computer with online access.	https://register.athensams.net/nhs/nhseng/
UKMI Nathnac NHS evidence Electronic medicines compendium Clinical Knowledge Summaries Medicines Prescribing Centre (Formerly NPC) Medicines for children (patient information leaflets Drugs in lactation	http://www.ukmi.nhs.uk/ https://www.evidence.nhs.uk/search?om=%5B%7B%22srn%22%3A%5B%22%20ukmi%20%22%5D%7D%5D http://www.nathnac.org/ http://www.evidence.nhs.uk/ http://www.medicines.org.uk/emc/ www.cks.nhs.uk . http://www.nice.org.uk/mpc/ http://www.medicinesforchildren.org.uk/ http://www.midlandsmedicines.nhs.uk/content.asp?section=6&subsection=17&pageldx=1
UK teratology services	http://www.uktis.org/index.html
Vaccine update- Vaccination newsletter for health professionals and immunisation practitioners	https://www.gov.uk/government/organisations/public-health-england/series/vaccine-update