

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 May 2016 Volume 54 issue 7](#)

MHRA: avoid live vaccines in immunosuppressed patients

The Medicines and Healthcare products Regulatory Agency (MHRA) has reminded healthcare professionals to identify clinically significant immunosuppression in patients before administering live attenuated vaccines. This should include infants who may have been exposed to immunosuppressive treatment during pregnancy or breastfeeding.

Topical NSAIDs for musculoskeletal pain in adults

DTB reports on an updated [Cochrane](#) review of studies lasting 6 to 12 weeks. Topical diclofenac and topical ketoprofen were significantly more effective than carrier for reducing pain in osteoarthritis for a minority of people, but there is no evidence for other chronic painful conditions. The authors further conclude emerging evidence suggestive that the placebo effects seen in longer duration studies derive from effects imparted by the NSAID carrier itself, and that NSAIDs add to that. [JAPC continues to endorse the use of topical preparations ahead of more toxic oral NSAIDs in the management of osteoarthritis.](#)

Adherence to pregnancy prevention measures during isotretinoin treatment

A Canadian retrospective cohort study has found adherence to pregnancy prevention measures in female users of isotretinoin to be poor. Oral retinoids (e.g. isotretinoin) locally classified as RED are contraindicated in women of childbearing potential unless the conditions of the Pregnancy Prevention Programme are met. Female patients must be provided with comprehensive information on pregnancy prevention before treatment is initiated. [During medication reviews where prescribing is known to primary care, clinicians should prompt a reminder to patients noting that the SPCs will detail the relevant Pregnancy Prevention Programme](#)

New NICE guidance for controlled drugs

This guidance covers systems and processes for using and managing controlled drugs safely in all NHS settings except care homes. [Primary care clinicians that prescribe, store, transport or destroy controlled drugs should familiarise themselves with this resource and legislation to ensure they have robust governance arrangements.](#)

Empagliflozin, diabetes and outcomes

Empagliflozin is the third sodium-glucose co-transporter-2 (SGLT2) inhibitor licensed in the UK. It reduces HbA1c with some effect on lowering weight and BP. Results from one study, in those with type 2 diabetes and established cardiovascular disease showed that using pooled analysis (not shown from individual studies) a statistical significance cardiovascular mortality versus placebo. [Significance was only just reached and prescribers are reminded that the long term safety of these new drugs is still unknown. Prescribers should follow our updated type 2 diabetes guidance.](#)

Specialist Pharmacy Services (SPS)

SPS has launched a [new website](#). This consolidates UKMI resources onto one easy to use platform. UKMI is a useful resource, for example giving information on drugs used in lactation, horizon scanning, patent expiries, the introduction of new drugs and a database of specific question and answers raised by clinicians.

Vitamin D advice issued

[Public Health England](#) has issued new advice on vitamin D based on the recommendations of the Scientific Advisory Committee on Nutrition. This includes advice on sun exposure throughout the year and when supplementation may be required. Our [Local guidance](#) has been updated to reflect the recommendation. Without symptoms, a diagnosis of vitamin D deficiency patients requesting supplementation to purchase supplements over the counter with the exception of free-of-charge for low-income families which can be accessed by the Healthy Start scheme.

Increased versus stable doses of inhaled corticosteroids for exacerbations of chronic asthma in adults and children

(Review)

Historical management at the first sign of an asthma attack included doubling the dose of inhaled corticosteroids (ICS). This Cochrane review reminds prescribers that current evidence does not support increasing the dose of ICS as part of a self-initiated action plan to treat exacerbations in adults and children with mild to moderate asthma. In patients with frequent exacerbations reviews should include checking inhaler technique, checking adherence to treatment, a question on the diagnosis of asthma and ensuring the patient has an appropriate e-care plan in the event of the asthma control deteriorating which may include oral steroids if appropriate.

Kew KM, Quinn M, Quon BS, Ducharme FM.. *Cochrane Database of Systematic Reviews* 2016, Issue 6. Art. No.: CD007524. DOI: 10.1002/14651858.CD007524.pub4.

EU lifts neuropsychiatric warning for varenicline (Champix)

Following the publication of safety data from the EAGLES trial which found no significant increase in neuropsychiatric adverse events attributable to varenicline or bupropion relative to nicotine patch or placebo, the EMA has recommended removal of the black triangle from the SPC.

Shingles immunisation programme

The Department of Health has written to healthcare colleagues about the shingles immunisation programme from September 2016. Eligibility for the programme is determined by the patient's age on 1 September 2016 and note that any individual who reaches their 80th birthday is no longer eligible for the vaccination due to the reducing efficacy of the vaccine as age increases.

Deleted products 2016 | MIMS online for July 2016

Bioclusive	Bricanyl Syrup (terbutaline)	Epaxal (hepatitis A vaccine)
Glusartel (glucosamine)	Ilaxten (bilastine)	

2. Drug safety update primarily relating to primary care prescribing (For more information see [Drug Safety Update](#)) Volume 9, Issue 12 July 2016

1. Warfarin: reports of calciphylaxis

The MHRA reports cases of calciphylaxis in patients taking warfarin, including those with normal renal function. This is very rare but serious condition with high mortality that involves vascular calcification and skin necrosis. The patient information leaflet will also be updated to warn patients of the risk of calciphylaxis, with advice to consult their doctor if they develop a painful skin rash.

2. Citalopram: suspected drug interaction with cocaine; prescribers should consider enquiring about illicit drug use

The MHA advised that following a coroner's case, to remind prescribers to note the potential increased risk of bleeding when citalopram is prescribed to patients who are illicitly taking cocaine.

Medicines Safety Matters

The [second newsletter publication](#) of 'Medicines Safety Matters' from the Derbyshire/Nottinghamshire CCG Medicines Safety Group has been published. This includes key contacts by CCG, a lesson learnt on the prescribing of ciclosporin (case report and root cause analysis), how to report controlled drug incidents, changes to weight range for dosing of Epipen Junior and brand prescribing of salmeterol MDIs.

3. Local news and GP/pharmacist queries

Query from GP practice:

A GP was asked by community midwives to prescribe human normal immunoglobulin (HNIG) for injection in accordance with virology/obstetric specialty advice for a lady having had possible measles exposure in pregnancy. The GP queried this as they were unsure why they were being requested to prescribe this but understood that it was not wise to admit this lady onto an antenatal ward, from an infection risk viewpoint.

Answer

A GP should not be advised to prescribe HNIG injection as it is not available via FP10 prescriptions. Both Royal Derby Hospital and Chesterfield Royal Hospital microbiologists will contact the respective GP if appropriate (i.e. if the patient is found to be non-immune) to inform them to arrange for the patient / relation to collect HNIG from the main pharmacy at their hospital.

A GP or midwife can administer the HNIG IM injection in their surgery or at the patient's home.

Note. It is important to give HNIG IM injection within six days of exposure as it may attenuate maternal illness and therefore reduce the rate of complications associated with measles.

Further details

It is advised that the GP/midwife should always contact Microbiology at their local hospital, without delay to discuss the case, including: details regarding the contact; and MMR vaccination history of the mother. They will receive advice on blood testing for measles specific IgG. If the patient is found to be non- immune, the GP/midwife will need to arrange for HNIG administration in their surgery (or at the patient's home).

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

QIPP tips

Drug name	Form	Drug Tariff Price
Cetirizine	Capsules (28)	£11.64
	Tablets (30)	86p
Alimemazine	Tablets (28)	£83.11
	30mg/5mls solution (100mls)	£179.17
	7.5mg/5mls solution (100mls)	£132.22
Promethazine	10mg (56)	£2.96
	25mg (56)	£4.65
	5mg/5mls oral solution (100mls)	£2.85
Betamethasone valerate 0.025%	100g cream	£3.15 as Betnovate RD cream
	100g ointment	£3.15 as Betnovate RD ointment
Beclomethasone 0.025%	30g cream	£68.00
	30g ointment	£68.00

Generic shortages (NCSO and price concessions)

Prescribers should note that the re-imburement price on FP10 may not necessarily reflect the Drug Tariff price as a result of a drug shortage. These concessionary prices are set by the Department of Health to reflect actual market prices.

A concession only lasts until the end of the month in which it was granted. If there is an on-going supply problem, it is possible that a new concession will be granted by the Department of Health the following month, however this is not guaranteed.

August 2016

Drug	Pack size	Current months Drug tariff price	Price concession
Amitriptyline 50mg tablets	28	94p	£3.44
Bumetanide 1mg tablets	28	£1.37	£1.95
Dapsone 50mg tablets	28	£21.69	£46.19
Desmopressin 10micrograms/dose nasal spray	60	£21.66	£24.00
Flecainide 100mg tablets	60	£4.24	£10.90
Flecainide 50mg tablets	60	£3.39	£11.57
Gabapentin 600mg tablets	100	£6.74	£9.75
Isosorbide mononitrate 10mg tablets	56	£1.50	£5.00
Isosorbide mononitrate 20mg tablets	56	£1.19	£4.00
Lamotrigine 5mg dispersible tablets sugar free	28	£5.58	£7.30

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

Nothing to note

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&pageIdx=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