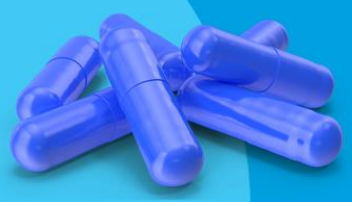
Medicines Management newsletter

Issue 20 - March 2020

NHS Halton Clinical Commissioning Group



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Area Prescribing Committee

RECOMMENDATIONS

RED **PENTOSAN POLYSULFATE SODIUM capsules (Elmiron®) for treating bladder pain syndrome**

The Pan Mersey Area Prescribing Committee recommends the prescribing of PENTOSAN POLYSULFATE SODIUM capsules (Elmiron®), by specialists only, for treating bladder pain syndrome in accordance with NICE TA610.

GREY **BUPRENORPHINE prolonged-release injection (Buvidal®) for the treatment of opioid dependence**

The Pan Mersey Area Prescribing Committee does not currently recommend the prescribing of BUPRENORPHINE prolonged-release injection (Buvidal®) for the treatment of opioid dependence.

GREY **DUPILUMAB solution for injection (Dupixient®▼) for chronic rhinosinusitis**

The Pan Mersey Area Prescribing Committee does not currently recommend the prescribing of DUPILUMAB solution for injection (Dupixient®▼) for the treatment of chronic rhinosinusitis.

GREEN **DOXYLAMINE/PYRIDOXINE gastro-resistant tablets (Xonvea®) for the treatment of nausea and vomiting of pregnancy**

The Pan Mersey Area Prescribing Committee recommends the prescribing of DOXYLAMINE/PYRIDOXINE gastro-resistant tablets (Xonvea®), as an option for the treatment of nausea and vomiting of pregnancy.

GREEN **RIVAROXABAN 2.5mg tablets (Xarelto®▼) for the prevention of atherothrombotic events**

The Pan Mersey Area Prescribing Committee recommends the prescribing of RIVAROXABAN 2.5mg tablets (Xarelto®▼) plus aspirin, for the prevention of atherothrombotic events in adult patients with coronary artery disease (CAD) or symptomatic peripheral artery disease (PAD) at high risk of ischaemic events, in accordance with NICE TA607.

GUIDELINES

BLACK **Rituximab for refractory focal segmental glomerulosclerosis**

This condition is commissioned by NHS England, but it does not commission rituximab.

RED **Cinacalcet for primary hyperparathyroidism**

This is commissioned by NHS England.

RED Biological agents for psoriasis without prior treatment with PUVA

Biological agents may be prescribed without prior treatment with PUVA if PUVA treatment is difficult for logistical reasons e.g. travel, distance, time off work or immobility.

AMBER RETAINED BRONCHIECTASIS (non-cystic fibrosis), nebulised antibiotics

The Pan Mersey Area Prescribing Committee recommends the prescribing of nebulised colistimethate (Colomycin®), gentamicin or tobramycin for adult non- cystic fibrosis bronchiectasis patient.

AMBER RETAINED Anti-androgens to prevent tumour flare

Confirmation of a Red RAG rating for cyproterone or bicalutamide for the prevention of tumour flare in treatment for prostate cancer when a course of a gonadorelin analogue is initiated. To remain Amber Retained if the GnRH analogue is restarted after a 3 month or more gap in prescribing.

PRESCRIBING SUPPORT

AMBER RETAINED Apomorphine prescribing support information

Routine review of the existing document. A GP letter is now included.

AMBER RETAINED Amiodarone prescribing support information

New information to reflect the guidance from NHS England. A change in RAG rating for Amber Initiated to Amber Retained alongside the need for an annual specialist review.

AMBER RETAINED Gonadorelin analogues prescribing support information

Minor update to clarify that one dose has been administered in secondary care.

Medicines Management Work Plan 2019/20

During **March 2020** the NHS Halton CCG Medicines Management Team will be doing the following pieces of work:

- **CCG Medicines Management Pharmacists** will:
    - Continue to focus on medication reviews for patients living with frailty and at risks of falls, prioritising patients most at risk.
- **Practice Medicine Co-ordinator (PMC) Reviews** – The PMCs will be doing the following reviews:
    - **Ovestin Switch** – Switch of generic unlicensed estriol cream to branded Ovestin® Cream.
    - **HRT Review** - review of whether medication reviews have taken place for patients prescribed Hormone Replacement Therapy (HRT) in line with the MHRA Drug Safety Update (Sept 2019) 'Increased Risk of Breast Cancer with HRT'.
    - **ONS Review** – Review of prescribing of Oral Nutritional Supplements (ONS) to check for recording of treatment goals, MUST scores and reviews and make recommendations for patient medication review, dietician referral or stopping of ONS to the prescribers.
    - **Vitamin D Review** – Review of patients prescribed vitamin D in line with local guidance (see below) to identify patients who are:
        - Prescribed a treatment dose for more than 8 weeks.
        - Prescribed more than one vitamin D containing product, e.g. colecalciferol capsules with Evacal Tablets.

- Patients prescribed the following generic colecalciferol products for switch to formulary choice brands as follows:
  - Colecalciferol 800iu capsules to Invita D3 800iu capsules.
  - Colecalciferol 20,000iu capsules and to Fultium D3 20,000iu capsules.

NHS Halton CCG Vitamin D Deficiency Guidelines and Patient Leaflet

The CCG Medicines Management Team has produced Vitamin D Deficiency Prescribing Guidance for local use in adults. This includes the first choice brands and dosage regimes. This guidance should be used alongside the Pan Mersey guidance 'Treatment of Vitamin D Deficiency in Adults'.

The local guidance recommends the following treatment regimens and brands:

For Deficiency (0-25nmol/L):

InVita® D3 50,000 unit capsule - 'Take one on the same day each week for six weeks' x 6 capsules.

or

InVita® D3 50,000 units/1ml oral solution – 'Empty contents of one ampoule directly into the mouth on the same day each week for six weeks' x 6 ampoules.

For Maintenance post treatment:

Advise to purchase 800units/day OTC and give CCG leaflet unless at higher risk.

For higher risk patients:

For **daily** dose - Invita® D3 800unit capsule – 'Take one daily' x 28 capsules.

or

For **monthly** dose – Fultium® 20,000unit capsules – 'Take one capsule on the same day each month' x 1 capsule.

or

If treating **osteoporosis** - Evacal® D3 1500 mg/400iu Chewable Tablets - 'Take one tablet each morning and evening' x 56 tablets.

Insufficiency (26-50nmol/L)

Advise to purchase OTC 800units/day and give Patient Information leaflet.

Sufficient (>50nmol/L)

Advise to consider purchasing OTC 400units/day and give Patient Information leaflet.

A Patient Information Leaflet has been produced to support with advising patients suitable for self-care.

Information for Community Pharmacies

The following brands are available for patients to purchase for self-care:

400 units:

- InVita D3 400 IU soft capsules.
- SunVit-D3 400 IU (unlicensed).

800 units:

- Aviticol 800iu Capsules.
- Desunin 800 IU Tablets.
- Fultium-D3 800IU capsules.
- InVita D3 800 IU soft capsules.
- Strivit-D3 800 IU Capsules, Soft.

Safety

DOMPERIDONE FOR NAUSEA AND VOMITING: LACK OF EFFICACY IN CHILDREN; REMINDER OF CONTRAINDICATIONS IN ADULTS AND ADOLESCENTS

Advice for healthcare professionals:

Change of indication

- domperidone is now authorised for the relief of symptoms of nausea and vomiting only in adults and adolescents 12 years of age or older and weighing 35 kg or more
- consider alternative treatments to domperidone in children younger than 12 years of age who need relief of symptoms of nausea and vomiting

Reminder of contraindications

- domperidone is contraindicated:
  - in patients with moderate to severe hepatic impairment
  - in patients with known existing prolongation of cardiac conduction intervals (particularly QTc)
  - in patients with underlying cardiac diseases such as congestive heart failure,
  - in patients with significant electrolyte disturbances,
  - during co-administration with QT-prolonging drugs
  - during co-administration with potent CYP3A4 inhibitors (regardless of their QT-prolonging effects)
  - in patients with hypersensitivity to domperidone
  - in patients with a prolactin-releasing pituitary tumour
  - in patients in which stimulation of the gastric motility could be harmful (for example, in patients with gastro-intestinal haemorrhage, mechanical obstruction, or perforation)

Reminder of recommendations for dose and treatment duration

- for adults and adolescents 12 years of age or older and weighing 35 kg or more, the recommended maximum dose in 24 hours is 30 mg (dose interval: 10 mg up to 3 times a day)
- domperidone should be used at the lowest effective dose for the shortest possible duration and maximum treatment duration should not usually exceed 1 week

https://www.gov.uk/drug-safety-update/domperidone-for-nausea-and-vomiting-lack-of-efficacy-in-children-reminder-of-contraindications-in-adults-and-adolescents

INGENOL MEBUTATE GEL (PICATO▼): SUSPENSION OF THE LICENCE DUE TO RISK OF SKIN MALIGNANCY

The licence of ingenol mebutate (Picato) has been suspended as a precautionary measure while the European Medicines Agency (EMA) continues to investigate concerns about a possible increased risk of skin malignancy.

Advice for healthcare professionals:

- Stop prescribing ingenol mebutate gel and consider other treatment options for actinic keratosis as appropriate.
- Existing unexpired stock of ingenol mebutate gel is being recalled from UK pharmacies and wholesalers.
- Advise patients who have been treated with ingenol mebutate gel to continue to be vigilant for new skin lesions within the treatment area and to seek medical advice immediately should any occur.

https://www.gov.uk/drug-safety-update/ingenol-mebutate-gel-picato-suspension-of-the-licence-due-to-risk-of-skin-malignancy

VALPROATE (EPILIM▼, DEPAKOTE▼) PREGNANCY PREVENTION PROGRAMME: UPDATED EDUCATIONAL MATERIALS

Educational materials for Valproate have been updated. Changes have been made to the educational materials to support healthcare professionals and female patients; the updates clarify the existing regulatory situation and are **not** due to new advice. The most recent materials are all dated as November 2019 for consistency.

https://www.gov.uk/drug-safety-update/valproate-epilim-depakote-pregnancy-prevention-programme-updated-educational-materials

NEXPLANON (ETONOGESTREL) CONTRACEPTIVE IMPLANTS: NEW INSERTION SITE TO REDUCE RARE RISK OF NEUROVASCULAR INJURY AND IMPLANT MIGRATION

The update contains amended advice on the insertion site for Nexplanon contraceptive implants following concerns regarding reports of neurovascular injury and implants migrating to the vasculature (including the pulmonary artery).

https://www.gov.uk/drug-safety-update/nexplanon-etonogestrel-contraceptive-implants-new-insertion-site-to-reduce-rare-risk-of-neurovascular-injury-and-implant-migration

E-CIGARETTE USE OR VAPING: REPORTING SUSPECTED ADVERSE REACTIONS, INCLUDING LUNG INJURY

This alert recommends Healthcare professionals to be vigilant for suspected adverse reactions associated with use of e-cigarettes or vaping (including lung injury) and report them to the MHRA via the Yellow Card Scheme.

Actions needed from healthcare professionals:

- Have a high index of suspicion in patients presenting with respiratory symptoms where there is a history of e-cigarette use or vaping in the past 30 days.
- Use the Yellow Card Scheme website to report any suspected side effects or safety concerns with e-cigarettes and the e-liquids used for vaping.
- For all patients, ask about e-cigarette use or vaping routinely as you would do about cigarette smoking. Clinicians should routinely document:
    - Name or brand of product used.
    - Type of product (if known).
    - Duration and frequency used.
    - Substances vaped (for example, nicotine or recreational substances).
    - Strengths of substances.

https://www.gov.uk/drug-safety-update/e-cigarette-use-or-vaping-reporting-suspected-adverse-reactions-including-lung-injury

ONDANSETRON: SMALL INCREASED RISK OF ORAL CLEFTS FOLLOWING USE IN THE FIRST 12 WEEKS OF PREGNANCY

Recent epidemiological studies suggest exposure to ondansetron during the first trimester of pregnancy is associated with a small increased risk of the baby having a cleft lip and/or cleft palate.

https://www.gov.uk/drug-safety-update/ondansetron-small-increased-risk-of-oral-clefts-following-use-in-the-first-12-weeks-of-pregnancy

Ondansetron is used second line, outside of its authorised indications, for treating women with hyperemesis gravidarum. Ondansetron is Amber recommended on Pan Mersey formulary for its' licensed indications.

Please see additional documents that provide useful information and advice regarding this:

- An official response statement from UK Teratology Information Service and guidance. http://www.uktis.org/docs/Ondansetron%20UKTIS%20Response%20Statement.pdf?UNLID=872030199202021414 44
- UKMI document entitled, 'How can nausea and vomiting be treated during pregnancy?'. https://www.sps.nhs.uk/articles/how-can-nausea-and-vomiting-be-treated-during-pregnancy-2/?UNLID=872030427202021416718

Antimicrobial Update: February 2020

The Cheshire and Merseyside AMR board have produced a series of virtual reality (VR) scenarios to be used as a training resource for GPs, trainees and non-medical prescribers with the aim of promoting appropriate antimicrobial prescribing.
The training uses VR headsets to guide trainees through a series of simulated scenarios focusing on cough, sore throat, UTI and sepsis. Volunteers are currently being sought to pilot the training which is due to take place in March.
If you are a GP, trainee or non-medical prescriber and would be interested in being involved in the pilot to review the VR training package and provide feedback, then please contact Jessica Mellor (Jessica.mellor@nhs.net).

Please visit the Halton CCG website for the latest Cheshire and Merseyside AMR bulletin

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