### May 2022

# **Greenwich Clinical Matters**



South East London Clinical Commissioning Group

### **MEDICINES MANAGEMENT**

### **Community Pharmacy Blood Pressure Check Service**

The NHS Community Pharmacy Blood Pressure Check Service (also known as the NHS Community Pharmacy Hypertension Case-Finding Advanced Service) has been commissioned since October 2021.

The aims and objectives of this service are to:

- identify people aged 40 years or older with high blood pressure, who have previously not had a confirmed diagnosis of hypertension, and to refer them to general practice to confirm diagnosis and for appropriate management (this can include people under 40 years, at the discretion of a pharmacist)
- undertake clinic and **ambulatory** blood pressure checks when necessary, at the request of a general practice
- promote healthy behaviours to service users

See Attachment 1 for the list of community pharmacies in Greenwich actively providing the service, this list will be updated monthly.

Action: GPs to confirm diagnosis and provide appropriate management to patients referred from this service. For further information click here

### **Adult Nutrition Guidelines**

This is a reminder to practice staff and clinicians that the Adult Nutrition Guidelines are now available online. **Action:** To access the adult nutrition page click here

### South East London Hydroxychloroquine/Chloroquine Retinopathy Monitoring Service

retinopathy monitoring Annual for patients on hydroxychloroquine (HCQ) or chloroquine therapy is now available to all patients in South East London, in line with Royal College of **Ophthalmologists** (RCOphth) recommendations. Patients who meet the eligibility criteria can be referred to the service. If your patient is already being monitored, they do not need to be re-referred.

**Action:** Referrals should be sent to Optometrist Triage Service via e-RS. The service can be found by selecting:

- Specialty: Ophthalmology
- Click Search Primary Care
- Service name: Ophthalmology Optometrist Triage
- Please note, baseline images are no longer a prerequisite for referral.

For information on patient eligibility and patient identification please see Attachment 2

### **MEDICINES MANAGEMENT**

### Clinical Trial: CONFORM-OH – Control, Fludrocortisone or Midodrine for the treatment of Orthostatic Hypotension

The Lewisham & Greenwich Trust (LGT) are in the process of opening a new clinical trial: CONFORM-OH – Control, Fludrocortisone or Midodrine for the treatment of Orthostatic Hypotension: a randomised controlled trial. This is a twelve-month study.

NICE provides evidence summaries for fludrocortisone and midodrine when used for OH, but notes that long-term efficacy and safety is unclear.

The European Society of Cardiology recommends the use of midodrine and fludrocortisone for OH but notes that the quality of evidence is based on expert opinion and/or small studies and that further research is needed. In view of the above, the NIHR Health Technology Assessment (NIHR HTA) Programme commissioned this clinical trial CONFORM-OH to investigate clinical and cost-effectiveness of the treatment protocol for OH.

Recruitment target is 22 patients for participation of this trial. Prescribers may be contacted by the principal investigator for individual patient recruited into the trial and request for GPs continue with prescribing after optimisation of treatment for 3 months.

As per the SEL formulary, Fludrocortisone (unlicensed) is a **GREEN** drug and Midodrine is an **AMBER 3** drug for management of orthostatic hypotension. The consultant will initiate Fludrocortisone and Midodrine and provide the first 3 months along with the documentation until the patient is stabilised prior to transfer to primary care. All patient clinic letters will clearly state that the patient is under this clinical trial and at what dose.

**Action:** Please contact a member of Medicines Optimisation team if you would like to discuss this further.

See Attachment 3 for a copy of the clinical trial protocol

### Cyanocobalamin prescribing

Cyanocobalamin is listed as "Less suitable for prescribing" in the BNF. Low-dose oral cyanocobalamin should not routinely be prescribed for patients suspected of having or likely to have diet-related vitamin B12 deficiency.

Action: Advise patients to take foods that are a good source of B12: eggs, meat, milk and other dairy products, salmon and cod; as well as foods which have been fortified with B12 (some soy products, breakfast cereals and breads).

For non-dietary vitamin B12 deficiency, hydroxocobalamin injection is the preferred treatment as it is retained longer in the body than cyanocobalamin.

Review all existing patients prescribed cyanocobalamin and advise them it should be purchased over the counter

### **SYSTEM DEVELOPMENT & PRIMARY CARE**

## Practice staff training on eating well for patients at risk of Type 2 diabetes

Training is being developed to support practice staff to provide accurate and consistent advice on eating well for patients at risk of type 2 diabetes, including culturally appropriate dietary guidance. The training will explore Diabetes UK guidance and resources including the African & Caribbean and South Asian Eatwell Guides.

To ensure this training meets the needs of practice staff, your input is valued for the development of this course.

A 2-hour co-production session to develop the training will be held on 04/07/22.

Action: If you are interested in assisting with the development of the training, please contact Nicola Nzuza: nicola.nzuza@royalgreenwich.gov.uk

### Bexley & Greenwich Quality Assured Spirometry COPD Diagnostic Clinics

The COPD diagnostic service which was delivered by Respiricare is no longer being provided.

**Action:** Referrals should be sent to Oxleas for their Quality Assured Spirometry COPD Diagnostic Clinics – the referral form is on DXS.

### **Bereavement Group**

Practices are to note that a local bereavement support group which you may find useful in supporting your patients is available.

The primary target is people who have lost a friend of relative to cancer, but it is open to anyone who has lost an adult to illness. It would not be suitable for those who had experienced a sudden bereavement e.g. by suicide, accident or violence, or have lost a child

For further information see Attachment 4.

### **MEDICINES MANAGEMENT**

### **Referral For Tier 3 Weight Management Service**

Referral for eligible patients to The Bariatric Consultancy is available.

The service (TBC Healthcare) is known as 'The Specialist Weight Management Service and Assessment for Bariatric Surgery' via eRS.

- Under Specialty Select Dietetics
- Under Clinic Type Select Weight Management
- Specialist Weight Management Service is the first that comes up.
- The service location is TBC HEALTHCARE LONDON

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### **MEDICINES MANAGEMENT**

#### Drug Safety Update

Chlordiazepoxide Librium warning - MHRA holding statement

The MHRA has been made aware of concerns raised following changes to the product information for chlordiazepoxide (Librium) regarding a possible genotoxicity risk and contraception requirements for males and females. This relates to recent implementation of the European Medicines Agency's SWP recommendations in relation to genotoxic medicines.

The MHRA is reviewing the evidence available to evaluate the potential risk for patients and are seeking advice from independent experts. They will consider the information included in all chlordiazepoxide products to ensure that appropriate and proportional warnings are implemented as required.

Once the review has been completed, they will communicate with healthcare professionals involved in prescribing and dispensing chlordiazepoxide. They understand the urgency of this issue and they will work urgently to reach a prompt resolution.

**Action:** Healthcare professionals should continue to use current clinical guidelines while this issue is being evaluated.

### **Denosumab safety**

Denosumab 60mg (Prolia<sup>®</sup>): should not be used in patients under 18 years due to the risk of serious hypercalcaemia. Serious and life-threatening hypercalcaemia has been reported with denosumab 60mg (Prolia) in children and adolescents in clinical trials for osteogenesis imperfecta and during off-label use.

#### Action:

- Denosumab 60mg (Prolia) should not be used in children and adolescents younger than 18 years
- Denosumab 120mg (as Xgeva) remains authorised for skeletally mature adolescents with giant cell tumour of bone (alongside other authorisations)
- Advise patients on Prolia who are younger than 18 years, and their parents or caregivers, to talk to their specialist about what this means for them
- Report any suspected adverse drug reactions associated with denosumab or other medicines on a Yellow Card

For full alert click here

### **Contact Details**

Meds Management: greccg.pharmacy@nhs.net (020 3049 9000) Primary Care: Jan Matthews: jan.matthews@nhs.net System Development: Jo Hare: joannehare@nhs.net