

MEDICINES OPTIMISATION

Synnovis Update

To support general practice and community teams with clinical prioritisation of blood testing for patients taking high risk medicines due to Synnovis issue, a working group from the SEL Medicines Optimisation Team is drafting interim prescribing monitoring guidance which will be disseminated when available. Further information on this incident can be found [here](#).

Shortage of Pancreatic Enzyme Replacement Therapy (PERT)

PERT is indicated for the treatment of pancreatic exocrine insufficiency (PEI) such as in cystic fibrosis (CF), pancreatic cancer, and pancreatitis. A [National Patient Safety Alert](#) has been issued for PERT, that supersedes the Medicines Supply Notification issued on 9th May 2024.

There are limited supplies of PERT:

- Creon® 10,000 and 25,000 capsules limited supply until 2026
- Nutrizym® 22 capsules out of stock until mid August 2024
- Pancrex V® capsules and powder available but unable to support increased demand.

Action:

1. Refer to SEL [memo](#) for further information.
2. Identify patients affected by the NatPSA through the Ardens CAS alert searches (Appendix 1 of memo)
3. Depending on the supply available, please advise patients in accordance with the [Position Statement Shortage of PERT for Prescribers and Patients](#) (page 15 onwards). Where suitable, this document can be shared with patients for information as it is also directed at patients.

Cardiovascular Update

Health Innovation Network Cardiovascular Disease data

The link [here](#) shows recently published CVD Prevent data (up to quarter ending December 2023) for selected Atrial Fibrillation, Hypertension, Familial Hypercholesterolaemia and Cholesterol indicators, benchmarked against national targets. The latest data and trends over the past year for lipid lowering therapies including High Intensity Statins, Ezetimibe, Bempedoic Acid, PCSK9 inhibitors and Inclisiran are also presented.

Specialist Lipid Pharmacist Introduction

SEL ICS would like to introduce the specialist CVD pharmacist, Julia Parascandolo, who started in January 2024, hosted by Lewisham and Greenwich Trust, to support CV risk reduction work across Lewisham and Greenwich.

The project aims to provide structured and accessible primary care lipid clinics to reduce the waiting time for secondary care lipid clinics and to provide specialist outreach support to primary care. Julia will be supporting primary care to optimise lipid treatment for patients who do not meet the targets set out in QOF CHOL002.

Action: Please feel free to contact Julia using the email: Julia.Parascandolo@gstt.nhs.uk. Please be mindful not to include any patient specific identifiers when you email Julia.

CESEL: Depression and Anxiety Guide

A new Clinical Effectiveness SEL (CESEL) guide has been co-developed to support primary care teams to provide holistic and evidence-based care for people presenting with depression and anxiety. All CESEL guides can be found [here](#).

MEDICINES OPTIMISATION

National Pharmacy First Service and Greenwich Pharmacy First PLUS Scheme

To help clarify some of the differences between the [national NHSE Pharmacy First Service](#) and local Greenwich Pharmacy First PLUS Scheme (Apr 24 – Sept 24), the Greenwich Medicines Optimisation Team have created a table showing the differences in:

- Scope
- Referral criteria
- Patient charges
- Which conditions
- Restrictions

	NHSE Pharmacy First		Pharmacy First Plus
	Minor health conditions (same as previously CPCS)	7 clinical pathways	
Scope	National	National	Greenwich Only
Running period	Ongoing	Ongoing	April – September 2024
GP Practice referral (Local Services)	Required	Not required	Required
Conditions	Over 25 minor ailments	7 clinical pathways: Sinusitis, Sore Throat, Otitis Media, Impetigo, UTI, Shingles and infected insect bites	Hayfever and Vitamin D only
Payment for meds from patient?	Pharmacist to give advice Patients to buy OTC/P Meds	Pharmacist to give advice and if appropriate, give medicine via PGD (including antibiotics) Patients who are exempt from PF10 payment will not need to pay otherwise, each item will incur a prescription charge	Pharmacist to give advice Free formulary medications if necessary
Medicine restriction	OTC/P Meds – patient to buy	OTC/P Meds – patient to buy POM meds - Specific to PGD	Specific to formulary list (OTC and P meds)

Pharmacy First Plus Poster

Attachment 1 is an updated GP poster containing the most up to date list of participating community pharmacies for the Pharmacy First Plus scheme.

Scabies Management Updated

Scabies management in [Health protection in children and young people settings, including education](#) has been updated. For treatment advice refer to updated (Mar 24) [CKS advice for management of scabies](#). Management advice has been updated and new prescribing advice has also been added.

Action:

- Permethrin cream 5% supply has been restored and this remains as first line treatment for scabies.
- Malathion aqueous 0.5% liquid can be used if permethrin cream is inappropriate, e.g. if allergic to chrysanthemums.
- Ivermectin 3mg tablets are now available as a licensed product – formulary status currently being reviewed by SEL IMOC.

Medicine Supply Issues

Serious Shortage Protocols (SSPs)

If the Department of Health and Social Care (DHSC) decide there is a serious shortage of a specific medicine, then an SSP may be issued. The following SSPs have been issued for:

- [Serious Shortage Protocol \(SSP\) for Clarithromycin 250mg/5ml oral suspension – corresponding guidance on endorsement, prescription charges, remuneration and reimbursement plus Q&A – 22 May to 21 June 2024](#)
- [Serious Shortage Protocol \(SSP\) for Clarithromycin 125mg/5ml oral suspension – corresponding guidance on endorsement, prescription charges, remuneration and reimbursement plus Q&A - 22 May to 21 June 2024](#)

MEDICINES OPTIMISATION

Medicines Shortages: Medicine Supply Notification (MSN)

The contents of MSNs can be viewed on the [Medicines Supply Tool](#). To access the tool you will be required to register with the SPS. MSNs have been issued for the following:

- Tier 2 MSN for Humulin® S (insulin soluble human) 100units/ml solution for injection 10ml vials
 - Tier 2 MSN for Memantine (Valios®) 10mg and 20mg orodispersible tablets sugar free
 - Tier 2 MSN for Somatropin (NutropinAq®) 10mg/2ml solution for injection cartridges and Somatropin (Humatrope®) 6mg, 12mg and 24mg powder and solvent for solution for injection cartridges
 - Tier 2 MSN for Salbutamol 2.5mg/2.5ml and 5mg /2.5ml nebuliser liquid unit dose vials
 - Tier 2 MSN for Clarithromycin 125mg/5ml and 250mg/5ml oral suspensions
 - Tier 2 MSN for Nortriptyline 10mg/5ml and 25mg/5ml oral solution sugar-free
 - Tier 2 MSN for Quetiapine 150mg, 200mg, 300mg tablets
- [SEL IMOC - Shortages](#) produces supporting information for primary care to manage significant medicines shortages.

Tegretol® 100 mg/5ml Liquid (Carbamazepine): Temporary stock-out and update to posology (reduction of maximum daily dose)

There is an imminent stock out for Tegretol® 100mg/5ml Liquid (carbamazepine) due to manufacturing constraints associated with the sorbitol content – other formulations, such as immediate release or prolonged release, are not impacted.

There will be a reduction of maximum daily dose out for Tegretol® 100 mg/5ml Liquid (Tegretol Oral Suspension) from 2000 mg/day to 1200 mg/day

Action:

- Patients requiring Tegretol® 100mg/5ml oral solution should be switched to alternative oral formulations of Tegretol®, where possible. If not feasible, other antiseizure medicines should be considered, taking adherence and treatment guidelines into account
- Patients prescribed doses above 1200mg/day should be permanently switched to an appropriate alternative

MHRA Drug Safety Update May 2024

[Topical steroids: introduction of new labelling and a reminder of the possibility of severe side effects, including Topical Steroid Withdrawal Reactions](#)

Topical steroids are safe and effective treatments for the management of a range of inflammatory skin diseases but have important risks, especially with prolonged use at high potency. As a result of regulatory action, topical steroid products will be labelled with information on their potency to simplify advice.

[Letters and medicine recalls sent to healthcare professionals in April 2024](#)

A summary of recent letters and notifications sent to healthcare professionals about medicines and medical devices, and information about the publication of two recent Device Safety Information pages.

Specialist Pharmacy Service (SPS) Webinars

- **Primary care discussions: Population health in practice on Tuesday 2nd July 1-2pm.** Please see link [here](#) for further information and how to register.

MEDICINES OPTIMISATION

New and Updated NICE Guidelines

- [Technology appraisal guidance TA973 - Atogepant for preventing migraine](#)
- [NICE guideline \[NG191\] - COVID-19 rapid guideline: managing COVID-19](#)

BNF Updates

Significant changes:

- [Budesonide](#) - updated dosing for modified-release capsules
- [Codeine phosphate linctus](#) (codeine oral solutions) - reclassification to prescription-only medicine
- [Hydrocortisone](#) - updated indication oral and perioral lesions to aphthous ulcers.
- [Hyoscine butylbromide](#) - updated important safety information.
- [Malaria, prophylaxis](#) - updated guidance
- [Pneumococcal vaccine](#) - updated guidance for immunisation
- [Pseudoephedrine hydrochloride](#) - very rare risk of posterior reversible encephalopathy syndrome (PRES) and reversible cerebral vasoconstriction syndrome (RCVS)
- [Vaccination, general principles](#) - updated guidance for immunisation of individuals with asplenia, splenic dysfunction, or complement disorders.

Dose Changes:

- [Acetylcysteine](#) – updated paracetamol overdose dosing
- [Lansoprazole](#) – updated Zollinger–Ellison syndrome dosing
- [Pantoprazole](#) - updated Zollinger–Ellison syndrome dosing
- [Paracetamol](#) - updated weight ranges for intravenous paracetamol
- [Pneumococcal polysaccharide conjugate vaccine \(adsorbed\)](#) - updated dosing

PrescQIPP Updates

Medicines Optimisation Opportunities Dashboard

The NHS England Medicines Optimisation Executive Group (MOEG) identified and agreed national medicines optimisation opportunities for the NHS to deliver on four key objectives:

- Improve outcomes in population health and healthcare
- Tackle inequalities in outcomes, experience and access
- Enhance productivity and value for money
- Help the NHS support broader social and economic development

PrescQIPP have developed a [medicines optimisation opportunities dashboard](#) which helps to support with monitoring of the above objectives and the MOEG indicators.

Bulletins

- [Bulletin 350. Lidocaine plasters](#) - This supports the implementation of NHSE guidance on items which should not be routinely prescribed in primary care and provides rationale for not initiating lidocaine plasters in new patients, and to consider discontinuation in current patients.
- [Bulletin 349. Look-alike sound-alike prescribing errors](#) - This includes guidance on minimising the risk of look-alike sound-alike prescribing errors occurring due to similarities between medicines, which can result in patient harm.

Contact Details

Medicines Optimisation greenwich.pharmacy@selondonics.nhs.uk
Primary Care: Nicky Skeats: Nicky.Skeats@selondonics.nhs.uk
System Development: Jo Hare: joannehare@selondonics.nhs.uk