

PRIMARY CARE PRESCRIBER

The monthly prescribing bulletin for GPs, pharmacists, trainees, AHPs and community nurses.



April 2018

Primary Care Services &
Medicines Advisory Group

The hill just got steeper

More challenges ahead

It will not have escaped prescriber's attention that NHS Tayside is under an unprecedented amount of scrutiny.

Since 2012, NHS Tayside has had a reported £33.2M in brokerage (loans) with more likely to be required.

Prescribing represents a significant amount of overspend for Tayside.

The challenges here are significant. Moreover, some of the prescribing spend is more complex than just suggesting we 'cut back' in spending.

NHS Tayside Board have now also approved a more ambitious package of prescribing transformation.

For the moment, NHS Tayside cannot endorse prescribing of certain medications due to affordability and lack of evidence. I will detail some of these on page 2 but it is clear we are now cutting our cloth aggressively.

There are significant pressures here, but throughout we must ensure due governance supports the changes.



Target Drug

Following the move to generic last year, the price of pregabalin (the highest spend drug in Tayside) was expected to fall dramatically. It did fall, but only by a small amount.



Alternative

NHS Tayside supports branded generic prescribing as Alzain® for the time being.

Sun cream

As the warm weather approaches, a reminder that sun cream is only prescribable for those with a photodermatoses such as PLE, lupus etc. A full list can be found [here](#). It is **not prescribable** for those with previous melanoma, on immunosuppression, or using of drugs which *could* photosensitise.

Costs to note

In this section we'll highlight some surprises, price drops, price increases and drugs coming off patent. Worth a search to see how many you might have on repeat...!

Cialis 5mg/10mg/20mg 28 tab/4 tabs £54.99/£28.88 versus generic tadalafil 5mg £8.55/£2.13/£3.17 [patent now expired] Sildenafil 25mg—100mg (4 tabs) is £1.11—1.24 and should be first line

Rosuvastatin patent also expired now £2.92—£5.97 for 28 tabs depending on strength

Nefopam price drop to £16.41 for 90 tabs (lowest TDS dosing) versus £8.10 for 224 co-codamol 8/500

Drug Safety Updates

No MHRA updates of note.

BNF Updates

No updates of note.

Formulary Updates

Tostran® Gel is added as **AMBER** after Testogel® was discontinued.

Tostran® dose is 1 pump (10mg) applied 5 days/wk in low libido in post menopausal females. For standard use 5 pumps Tostran® = 1 sachet Testogel®

SRH report Kyleena® is being tolerated well as a slimmer IUS for 5 years (not for HRT/HMB).

Other Updates

Humulin® R500 is used when high doses of insulin are needed (500 units/ml). Vials have been discontinued, but a Kwikpen® is available, but is unlicensed & will need a handwritten prescription. It uses BD Viva® 4mm needles. More information can be found [here](#).

Albiglutide 30mg & 50mg been discontinued. Switch to dulaglutide 1.5mg weekly in adults <75 as add on therapy—otherwise seek advice.

<http://mylungsmylife.org/> is a useful patient resource with videos on the increasingly complex inhalers available.

NICE Patient Decision Aids

I have spoken in previous issues about NICE decision aids. They bring together information to aid a shared discussion with a patient using Cates Plots for example.

They help the patient (and the clinician) easily understand the possible benefit from therapy.

When conversations are complex and options harder to explain, these are a useful adjunct to the consultation for all health professionals.

I felt it might be helpful to bring together the current patient decision aids available (only 13 for 1400 NICE guidelines!)

[Antibiotics for sinusitis](#)

[Hormone treatments in endometriosis](#)

[Taking a statin to reduce the risk of coronary heart disease and stroke](#)

[Type 2 diabetes in adults: controlling your blood glucose by taking a second medicine](#)

[Atrial fibrillation: medicines to help reduce your risk of stroke](#)

[Treatment of long-term heartburn](#)

[Bisphosphonates for osteoporosis](#)

Taking medicine to reduce breast cancer risk in:

[Pre-menopausal with moderate risk](#)

[Post menopausal with moderate risk](#)

[Post menopausal with high risk](#)

[Tamoxifen for pre-menopausal high risk](#)

Leaps by NHS Tayside

As you will have seen from page 1 (and the news..) there are some big changes ahead.

I've discussed pregabalin switch to a branded generic (Alzain®). If the price of the generic drops, we'll be switching back but it's £29K/wk saved to use the brand just now.

Liothyronine prescribing is

also now non-formulary and all patients on this will be reviewed by an endocrinologist with view to assessing suitability to continue given lack of any RCT evidence to support prescribing over levothyroxine.

Prescribing of lidocaine plasters in Tayside is no longer supported due to lack of evidence beyond licensed use in PHN.

Mental health and Diabetes pathways will be reviewed with

view to offering better alternatives to medications.

Other work will be ongoing in a review group for all non-drug prescribing, homeopathy prescribing and adoption of the [NHS England paper](#) on items not suitable for primary care prescribing.



Something of interest from the Journals...

Dr A Cipriani (Oxford University) regularly publishes meta-analysis on psychotropics.

Her last publication in the [Lancet](#) made headlines supporting the use of antidepressants.

A note of caution on two fronts was published by the BMJ. Derek Suther-

land asks in this insightful [commentary](#) if mental health disorders are being over-diagnosed? Do 1 in 4 people really have a 'mental disorder' with 75% of those not getting the treatment they 'need'?

This [editorial](#) also asks if the data shown by

Cipriani *et al* deserves wholehearted support? What about mild symptoms, after 8 weeks, in the real world, comparison against non-drug options, short/long-term harms and which is best for each individual all remain unanswered questions...



Your ideas

Hazel Steele, Specialist Pharmacist in Antimicrobials (Primary Care) highlighted this refresh on recurrent UTI treatments from the Antimicrobial Team & Urology for non-pregnant adult females .

Recurrent UTIs (> 3 confirmed UTIs in 12 months or >2 in 6 months) should initially be managed with advice to void >1500mls/day and correct voiding techniques (urge initiated and post coital). Topical oestrogen in post menopausal atrophic vaginitis can be useful.

Antibiotics can be used as a 'stand-by' to be taken at the first signs of UTI (a full course) or to prevent post-coital UTIs (single-dose). Low dose antibiotic prophylaxis may be used for 3-6 months. This can lead to multi-resistant infection and prescribers will be aware of the **risk** of using nitrofurantoin.

Methenamine or cranberry are alternatives in non-pregnant adult females without catheters. Cranberry capsules reduce UTIs by ~40% although the optimum dose is unknown (avoid use with warfarin). **Methenamine 1g bd** is a urinary antiseptic agent which produces ammonia and formaldehyde in the presence of acidic urine. It is highly active against most common urinary pathogens. It is not effective where there are underlying renal tract abnormalities or neuropathic bladder.

All prophylaxis should be prescribed only for 3-6 months then reviewed/trial stopping.

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Useful prescribing websites

Renal Drug Database (CKD drug dosing) <https://renaldrugdatabase.com/user/login> Username/password via practice pharmacist or register.

Safe for lactation (type the medicine name in the top search box) <https://www.sps.nhs.uk>

Anticholinergic Drug Burden http://www.agingbraincare.org/uploads/products/ACB_scale_-_legal_size.pdf

UKTIS (prescribing information in pregnancy) https://www.uktis.org/html/maternal_exposure.html [only available 'off server'. Hit continue at the warning.]

BUMPS (patient leaflets for website above) <http://medicinesinpregnancy.org/Medicine--pregnancy/>

HIV drug Interaction Checker <http://www.hiv-druginteractions.org/>

Hepatitis Drug Interaction Checker <http://hep-druginteractions.org/>

Syringe Driver Compatibility <http://www.palliativesdrugs.com/> (Register for free and hit SDSD)

Knowledge Network has links to Enteral feeding book (can it be crushed?!) as well as other useful Medicines Information Resources <http://www.knowledge.scot.nhs.uk/home.aspx>

TOXBASE <https://www.toxbase.org/> Username/password given on registration.

Tayside Pharmacy Publications (DTCs/Tayside Prescribers): <http://www.taysideformulary.scot.nhs.uk/news.asp>

Tayside Medicines Information Centre TAY-UHB.medinfo@nhs.net or 01382 632351 will always help with prescribing issues covered on the websites above