

# PRIMARY CARE PRESCRIBER

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



August 2017

Primary Care Services &  
Medicines Advisory Group

## **SNF**

### **Single National Formulary**

The work to progress the formation of a SNF continues.

There remains a lack of clear news as to exactly what the SNF will look like.

It does get a mention in the Scottish Government's Access to Medication review <http://tinyurl.com/y9obq379> and in Realising Realistic Medicine <http://tinyurl.com/y8vpor8k> but beyond this we really don't know a huge amount more at this stage. The idea is that by all working from one prescribing formulary we will reduce unnecessary variation...

[I suggest against doing an Internet search on SNF.. It won't give you any answers just now and the top hits are for a water waste management company...]

There is the opportunity to contribute to a survey about the use of local formularies. <http://tinyurl.com/yaprna6q>

It will be important to demonstrate the utility of a local versus a national formulary to shape the progression of this process.

There are no doubt opportunities in the new national formulary, but equally risks in a single group of people deciding on medication choices for the whole of Scotland. In addition, should we get a shortage of drugs, variation isn't always to be frowned upon.



### **Target Drug**

EpiPen® currently has manufacturing problems with no date to resolution. The recommended dose for anaphylaxis in adults is 500mcg and until recently there was no auto injector available in this dose. Tayside Prescriber 146 refers. (<http://tinyurl.com/lbyfezf>)



### **Alternative**

Consider Emerade® 500mcg. Also available as 300mcg & 150mcg and is of comparable price to Epi-Pen®. Training can be viewed here for patients <http://tinyurl.com/yblm3swa> Jext® is also available, but only as 150/300mcg dose.

There now is likely to be a leap to both Jext® and Emerade®, which in turn may cause stock issues for these as well initially.

Always prescribe 2 pens as per MHRA advice. <http://tinyurl.com/yag52vy4>

### **Costs to note**

*Surprises, price drops, price increases and drugs coming off patent. Worth a search to see how many you might have on repeat...!*

Losartan 12.5mg £26.66 28 tabs versus 25mg £1.11 for 28 tabs which can be split  
Beconase® 50mcg 200 dose unit £2.63 versus generic Beclometasone £1.99  
Nitrofurantoin 50mg 12 tablets £10.25 versus 100mg MR 6 tablets £1.94

## **Drug Safety Updates**

No drug safety updates of note to report this month.

## **BNF Updates**

A new BNF App is available for smartphones. <http://tinyurl.com/y9vzta93>

## **Formulary Updates**

The Migraine section has been updated. Gabapentin was removed as an option for migraine prophylaxis and topiramate added as second line. SIGN guideline on this is due in the autumn.

Nefopam is under review and a Tayside Prescriber will follow in due course. Tayside is the highest prescriber in Scotland—the evidence to support effectiveness is low quality and the drug is increasing in price. That said—it's good to have another option to try...

## **Study recruiting**

A new oral drug (bempedoic acid) lowers cholesterol as effectively as statins and there is a local study ongoing.

To qualify, recruits must have either tried and failed to stay on 2 statins or only be tolerant of the lowest dose.

They must have established coronary/cerebrovascular disease or PVD.

Email to [jacobgeorge@nhs.net](mailto:jacobgeorge@nhs.net) if you know of any suitable patients.

## Management of ED

Since 2011, GPs have been able to prescribe PDE-5i without any specialist input providing the patient is suffering 'severe psychological distress'. With sildenafil only £1.11 for 4 tablets this seems sensible!

For investigation in men <40, a short trial of treatment may only be required to 'break the cycle'.

For men >40 or in all needing long-term treatment, NICE/BSSM and

EAU Guidelines suggest checking only CV risk assessment and fasting glucose/cholesterol and testosterone. (The ED ICE request is being amended).

Dosing has also evolved. For short acting treatment, the most cost effective option is sildenafil 25-100mg.

For those who anticipate the need for an ED medication more than twice a week or who have LUTs as well, 2.5-5mg tadalafil

once daily in the evening can be used (£54.99/month—off patent later this year)

We should remember to do a CV risk assessment, and ask about LUTS/BOO symptoms and investigate/examine as appropriate for these.

In those <40 don't miss a testicular CA, and >40 don't miss prostate CA.—ask about symptoms and consider examination if felt necessary.



## Ante-natal care prescribing considerations

With Midwives leading with routine antenatal care, it's worth reminding ourselves of some of the basic actions when a person becomes pregnant.

Folic acid 400mcg is available with vitamin D as Health Start vitamins—free for all from their midwife.

Folic acid should be prescribed at 5mg for those

with BMI >30, FH of neural tube defects (in either partner), coeliac, all diabetics, on anti-epileptic medication, if they have haemolytic anaemia or a haemaglobinopathy.

Documenting a baseline BMI/BP/smoking status can be helpful.

Aspirin will be started as prompted after booking from 12w.

For hypothyroidism, check a baseline TSH and aim to maintain in the lower end of range. Dose increase in thyroxine is common. (thyroxine is available at a 75mcg tablet new as an aside!)

Review medications - for help assessing safety in pregnancy see BUMPS/UKTIS. (links on the last page of PCP).



## Something of interest from the Journals...

There has been conflicting advice through the years on Tamoxifen being prescribed with paroxetine, fluoxetine, bupropion and duloxetine.

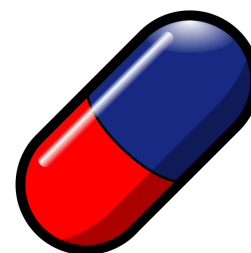
These drugs inhibit the CYP2D6 enzyme, reducing the metabolism of tamoxifen to the active compound.

The BMJ last year pub-

lished yet another cohort study with a mean follow up of 2 years (not a long-time given breast cancer outcomes...) which showed no change in recurrence rates between those on paroxetine/fluoxetine and those not when taken with tamoxifen. <http://tinyurl.com/yocrn7x5l>

The editorial still recommends against concurrent prescribing in line with previous reviews. <http://tinyurl.com/ybqul7ll>

Those on one of these medications with tamoxifen should have it gradually reduced and switched to an alternative such as citalopram, sertraline or venlafaxine.



## Your ideas

*Please consider emailing your ideas for the next edition. We don't need to advertise where it's come from, but it's good to learn from experience elsewhere!*

Sayana Press® is bioequivalent to Depo-Provera®. Injection is given every 13 weeks and it is licensed for self-injection.

We have trialled a move in the last year to move as many suitable patients as we can from 'depo' to self-injection.

The uptake has been significant and is now our first line injection contraception. We review patients once/year but has saved us 3 extra nursing appointments/patient/year.

The reminder cards, demonstration training DVD and leaflets are available to order from the manufacturer here: <http://tinyurl.com/y7egnwwj>

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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](http://www.agingbraincare.org/uploads/products/ACB_scale_-_legal_size.pdf)

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

HIV drug interaction checker <http://www.hiv-druginteractions.org/>

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

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

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](mailto:TAY-UHB.medinfo@nhs.net) or 01382 632351 will always help with prescribing issues