

PRIMARY CARE PRESCRIBER

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



June 2017

Primary Care Services &
Medicines Advisory Group

When you can't wait to see your GP...

Online medications

As you'll be aware, there are websites who are prepared to facilitate the supply of medications without the need to be seen in person.

The setup is generally a registered pharmacy in the UK (though based online), dispensing private prescriptions on behalf an overseas company (based in countries such as the British Virgin Islands).

An example of such a company can be found here: <http://tinyurl.com/ycup9sk3>

As such, with an online consultation (with a UK registered doctor) a patient can purchase medications such as dihydrocodeine.

The list of medications they are prepared to prescribe by online consultation only is noteworthy with risks of dependency.

Local practices are being approached by patients who are also using these websites. As such, it may be worth asking patients if they are using any medications bought online as well as 'over the counter' in future...



Target Drug

Fusidic acid cream is an effective acute treatment for localised infected eczema and is recommended by Cochrane as first line for impetigo. <https://tinyurl.com/y9he2lxx>



Alternative

The prescribing variation is massive, with some practices using 3x the quantity of others per pt.

There's concern regarding long-term use in eczema and fusidic acid resistance. Some western countries have increased resistance to almost 1/3 of staph a. <https://tinyurl.com/y6u4emzy>

It should be used as an acute medication only for the time required.

Drug Safety Updates

The MHRA have warned of a possible link between Finasteride and depressive thoughts—rarely even suicidal thoughts. They advise to warn of this possibility and advise patients to stop if they develop these. <https://tinyurl.com/yam4md4k>

A local risk alert highlights the reduction in sugar content in Lucozade by 50%. Where this is good for public health, for diabetics using it to avert hypos, this may have implications. <https://tinyurl.com/yayb3zyj>

The possibility of prescribing/dispensing errors for clonazepam & clobazam has been highlighted again. Pharmacies have been advised to be vigilant. (<https://tinyurl.com/y9orzbbbr>)

BNF Updates

The BNF provided a new guideline for management of haemorrhoids. Nothing new, but worth a glance through to ensure it reflects your own practice. <https://tinyurl.com/yaxl42i7>

Formulary Updates

Ranolazine is now on the cusp of approval for use by cardiology for angina locally. (Amber on formulary)

It needs monitoring and a protocol will be included.

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...!

Gabapentin **reduced** price for all strengths e.g. 300mg x100caps £4.66 to £2.82

Lansoprazole GR 30mg x28 caps is now undercutting omeprazole GR caps **reducing** price to £1.11

Prochlorperazine buccal 3mg **increased price again now £49.60 for 50 tabs versus £1.98 for 50x5mg tabs

Flucloxacillin 125mg/5ml £4.91 versus 250mg/5ml £26.04 for 100mls — taste/compliance may be an issue

Branded Prescribing

In May's edition, we highlighted where drugs can be cheaper if prescribed by brand name rather than generically. This can happen when manufacturers try to increase their share of the market with medicines that are out of patent.

However there are concerns with these that once a critical mass of prescribers are using the branded product the price could be increased, leaving prescribers the choice of changing prescriptions again to maintain the cheapest product, or doing nothing with an impact on cost per item. This was highlighted to NSS at the end of

2016 and Drug Tariff prices for , mebeverine 135mg tabs, cocodamol 30/500 tabs & amoxicillin caps were reduced to match the cheapest branded offer allowing prescribers to continue with generic prescribing.

You may have seen adverts for Amoxil® indicating a further saving, this has been notified to NSS for consideration of further reduction in Tariff prices. Where a medicine is still under patent protection, there may be situations where there are alternative brands that are cheaper eg Ralvo® is approximately 15% cheaper than Versatis®. If lidocaine patches 5%

are prescribed, community pharmacists can choose which product to dispense and they will be reimbursed accordingly. In a situation like this prescribing Ralvo® as a branded product ensures the most cost effective price.

Scriptswitch® will provide information where branded prescribing is supported locally for cost or safety reasons (eg, Ralvo®, Longtec®) otherwise unless the medicine is mentioned in BNF as requiring branded prescribing (some MR preparations and some medicines for epilepsy for instance) generic prescribing is still the preferred option.

Anti-emetics in Pregnancy

In 2016, RCOG published guidelines on the management of Nausea and Vomiting in Pregnancy (<http://tinyurl.com/y8733sb3>).

This highlighted a few important aspects of management in the community including observations to document.

Importantly it also gave a clear guidance on which antiemetics to use:

First line: Cyclizine, prochlorperazine, promethazine, chlorpromazine.

Second line: metoclopramide, domperidone, ondansetron.

Third line: Steroids—should have been admitted by this point!

Metoclopramide is second line due to the risk of extrapyramidal effects.

Likewise ondansetron is second line due to limited data (though is safe and effective).

For a Friday/OOH call giving a choice of antiemetics to find which one is most effective may be suitable.

Note buccal prochlorperazine price increase on page 1—but it may avert an admission. Try buccal then switch to tablets?



Something of interest from the Journals...

Infrequently we find publications of when or how to stop medications.

This month I'd like to highlight 2 papers on this topic.

Statins for primary prevention in the over 75s continues to lack any evidence (<https://>

tinyurl.com/y8wcn6yd).

This new paper affirms this. (<https://tinyurl.com/yeshvc4n>)

Indeed statins can cause diabetes in up to 1 in 50.

(<https://tinyurl.com/m23faoc>)

The next article of interest

highlights an algorithm for de-prescribing PPIs.

It's well done and it provides a practical way to approach stopping. A good quality improvement project, or opportunistic reviewing. (<https://tinyurl.com/yauu5fur>)



Your ideas

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

NE Locality in Angus have undertaken polypharmacy reviews for the District Nursing caseload—in particular patients having medications administered by the evening service DNs and those having medications from the daytime DNs in Brechin/Edzel.

These patients are usually a more frail population and daily visits by DNs is clearly labour intensive—though of course can be entirely appropriate.

The team has made significant changes in frequency of DN visits, but also to the medications on repeat. This seems a worthwhile group to review.

GPs should be aware of the shortage of disulfiram. Pharmacies will be trying to source from elsewhere. TSMS may consider switching patients onto naltrexone instead.

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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/>

Syringe Driver Compatibility <http://www.palliativedrugs.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