

Supply shortages - hyoscine hydrobromide tablets

- There are currently supply shortages with hyoscine hydrobromide 150mcg and 300mcg tablets (Kwells Kids and Kwells).
- The manufacturer is not able to supply further stock, and anticipates that normal supply will not resume for at least another 6 months. Hyoscine hydrobromide is sometime used off-label for the management of hypersalivation, including clozapine/antipsychotic-induced hypersalivation.
- There is no exact alternative treatment/product available, but the following treatments could be considered as alternatives:
 - ◊ **Hyoscine hydrobromide transdermal patch** (Scopoderm) 1.5mg every 72 hours.
 - ◊ Hyoscine hydrobromide patch has also been used off-label for treating hypersalivation. The patches offer several advantages over other formulations including ease of administration, maintenance of steady state concentrations and a low incidence of systemic side effects compared with other antimuscarinics.
 - ◊ Each patch contains 1.5mg hyoscine and the average amount of hyoscine absorbed from each patch in 72 hours is 1mg. The patch should be applied to the hairless skin behind the ear. The patch must be removed every 3 days, and replaced with a fresh patch behind the other ear.
 - ◊ Please note that hyoscine hydrobromide is available as an oral solution and oral suspension, however, these are unlicensed special products, and higher cost compared to hyoscine hydrobromide patch.
 - ◊ **Glycopyrronium bromide** tablets (1mg or 2mg) or oral solution (1mg/5ml oral solution sugar free). These are licensed products, but only for the treatment of peptic ulcer, so would be off-label for use in hypersalivation. However, glycopyrronium bromide is more costly than hyoscine products, and should be used as a treatment option for patients who have tried other preparations/antimuscarinic treatments but have found these inadequate or intolerable due to side effects.

Discontinued products

Premique 0.625mg/5mg, Prempak-C 0.625mg/0.15mg and Prempak-C 1.25mg/0.15mg have been discontinued (Premique 0.3mg/1.5mg (low dose) is still available).

Premique contains a combination of conjugated oestrogens and medroxyprogesterone and Prempak-C contains a combination of conjugated oestrogens and norgestrel. There are no direct alternatives for these products and so patients will need to be reviewed on an individual basis for appropriate alternative treatment.

Toujeo - higher strength insulin glargine

- Toujeo is a high strength formulation of insulin glargine (300 units per mL-SoloStar prefilled pen).
- Toujeo has been approved locally for consultant initiation only, and restricted for use in patients who require doses of glargine more than 200 units per day.
 - ◊ It is not recommended for initiation in primary care.
- There are now multiple preparations and strengths of insulin glargine available, and they are not bioequivalent and not directly interchangeable.
- To ensure safe prescribing please prescribe insulin glargine by brand name (Lantus, Abasaglar, Toujeo) and specify the device required.

New and updated documents

The following shared care guidelines have been recently approved and are available on the CCG website:

- 6-mercaptopurine for inflammatory bowel disease in adults
- Azathioprine in adults
- Hydroxychloroquine for rheumatoid arthritis and other rheumatological conditions in adults
- Leflunomide for active rheumatoid arthritis and psoriatic arthritis in adults
- Methotrexate in rheumatoid arthritis and severe psoriasis in adults
- Sulfasalazine in adults

Prescribing Update

March 2017 Newsletter

NHS
Basildon and Brentwood
Clinical Commissioning Group

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Thurrock
Clinical Commissioning Group

Mefenamic acid - safer use

- In 2014 the NHS Regional Drug and Therapeutics Centre produced a bulletin highlighting the safety of mefenamic acid.
- Mefenamic acid is a non-steroidal anti-inflammatory drug (NSAID) licensed for the treatment of mild to moderate pain, arthritis, dysmenorrhoea and menorrhagia.
- Cochrane reviews on dysmenorrhoea and menorrhagia concluded that there is no evidence that mefenamic acid is more effective than other NSAIDs for these indications.
 - ◊ NICE Clinical Guideline on 'Heavy menstrual bleeding: assessment and management' does not specify a particular NSAID for use in this indication.
- Mefenamic acid has a narrow therapeutic window, which increases the risk of accidental overdose, and it is more toxic in overdose than other NSAIDs, and likely to cause seizures in overdose.
 - ◊ The usual dose (and also the maximum) is 500mg three times daily. The National Poisons Information Service considers ingestion of 40 mg/kg or more (equivalent to 2,800mg in a 70kg adult) to be potentially toxic. This means that a woman who weighs 50 kg would only need to ingest one extra dose of 500 mg of mefenamic acid in 24 hours (total of 2000 mg) to be considered to be at risk of toxicity.
- Mefenamic acid should therefore not be a first-line choice for analgesia (including dysmenorrhoea), and should be avoided in individuals considered at risk of self-harm.

Recommendations:

- If an NSAID is required for dysmenorrhoea or menorrhagia, consider the use of ibuprofen or naproxen rather than mefenamic acid.
- Review any patients on repeat prescriptions for mefenamic acid: assess on-going need for an NSAID and change to an alternative where appropriate.

Reminder - specials requisition route

Please consider the alternative supply route of the following specially formulated creams through the specials requisition route, which is a project in collaboration with BTUH pharmacy department:

- Coal tar solution 7%, betnovate ointment 25% in Unguentum Merck
- Coal tar solution 7%, betnovate ointment 50% in Unguentum Merck
- Dermovate ointment 10% in Unguentum Merck
- Dermovate ointment 60% and propylene glycol 40%
- Salicylic acid (2%, 3%, 5% or 10%) in white soft paraffin

This alternative route of supply will mean that the product is supplied at a significantly lower cost and of consistent quality, and help to improve services to patients. A requisition form is completed by the prescriber rather than providing an FP10 prescription. Please contact the Medicines Management Team for the requisition form, or this can be found on the Medicines Management pages of the CCG website in the Specials section.

Fluoxetine - new strengths available

- There are now new strengths of fluoxetine capsule available, including 10mg, 30mg and 40mg.
- Please consider the most cost effective way to prescribe the dose of fluoxetine required, as detailed below:

Fluoxetine preparation	Cost for 28 days treatment			
	10mg daily	20mg daily	40mg daily	60mg daily
Fluoxetine 10mg capsule (new)	£61.74			
Fluoxetine 20mg dispersible tablet (scored) (Olena)	£1.72	£3.44		
Fluoxetine 20mg capsule		£0.81	£1.62	£2.44
Fluoxetine 30mg capsule (new)				£3.96
Fluoxetine 40mg capsule (new)			£1.98	
Fluoxetine 60mg capsule				£6.29
Fluoxetine oral solution 20mg in 5ml	£2.81	£5.62		
Fluoxetine sugar free oral solution 20mg in 5ml (Prozep)	£12.95	£25.90		

- It is more cost effective to prescribe fluoxetine 20mg capsules to provide doses of 20mg, 40mg and 60mg daily.
- If a 10mg daily dose is required, please consider the use of fluoxetine 20mg dispersible tablets (brand name Olena).
 - ◊ Olena/fluoxetine 20mg dispersible tablets are scored, and the tablet can be divided into equal halves to provide a 10mg dose. The dispersible tablet can be swallowed with water or can be dispersed in water.
 - ◊ Please note that prescribing fluoxetine 10mg as tablets rather than capsules are an unlicensed special product and are not recommended.
- If a patient has swallowing difficulties, it is more cost effective to prescribe fluoxetine as 20mg dispersible tablets rather than as oral solution.

Minocycline - reminder

- Minocycline is not recommended for the treatment of acne vulgaris:
 - ◊ there are safety concerns specific to minocycline that are not associated with other tetracyclines
 - ◊ there is no clear evidence that minocycline is more effective or better tolerated than other tetracyclines
 - ◊ alternative once-daily treatments such as lymecycline or doxycycline are available
 - ◊ minocycline is higher cost
- Prescribing of minocycline has reduced locally.
- Please continue to review patients prescribed minocycline for the treatment of acne vulgaris.
 - ◊ Where antibiotic therapy is required consider changing to lymecycline (prescribed as Tetralysal 300), oxytetracycline or doxycycline.
- Please note that oral antibiotics should always be used in combination with topical therapy; oral antibiotics should not be used alone.

Infant formula for lactose intolerance and reflux now for purchase not prescription

The CCG prescribing guidelines for specialist infant formula have been updated in January 2017. Please refer to the full guideline which is available on the CCG website, for further details, or contact the Medicines Management Team for advice on 01375 365811.

There are now products available to purchase in supermarkets for lactose intolerance and gastro-oesophageal reflux disease (GORD) at very similar prices to regular formula, therefore, we are asking GPs NOT to prescribe for these conditions.

ScriptSwitch messages will shortly be in place to remind prescribers of these changes.

Lactose intolerance		GORD	
Stop prescribing	For purchase instead	Stop prescribing	For purchase instead
SMA LF [®]	Cow & Gate [®] Comfort	SMA Staydown [®]	Cow & Gate [®] Anti-reflux
Enfamil O-Lac [®]	Aptamil [®] Lactose free	Enfamil AR [®]	Aptamil [®] Anti-reflux SMA Staydown [®]

Further price reductions on oral nutritional supplements (ONS)

The CCG prescribing guidelines for adult ONS were updated in Jan 2017. They are available to download from the CCG website.

From 1st April the Drug Tariff price of Ensure[®] Compact is reducing from £1.45 to £1.35 making it the most cost effective liquid compact available. Please consider switching patients on Fortisip[®] Compact and Altraplen[®] Compact to Ensure[®] Compact to realise the potential cost savings.

Please also consider switching those on Fresubin[®] Energy, and those unsuitable for powdered ONS, to either Aymes[®] Complete or Ensure[®] Plus. Both these products will be priced at £1.12 from April 1st compared with £1.40 for Fresubin[®] Energy.

Aymes[®] Shake remains the first line ONS at 61p per serve. The guideline has been updated to reflect these changes.

Thickeners for adults with dysphagia

From 3rd April Basildon Hospital will be starting all adult patients with dysphagia on a gum based thickener, Resource[®] Thickenup[®] Clear, rather than starch based thickener such as Thicken Aid[®] or Thick & Easy[®]. Gum based thickeners are more palatable, more stable and safer as they are not affected by amylase enzyme in saliva which can cause thinning of the thickened drink. This can result in fewer instances of aspiration pneumonia.

Patients in the community who are stable on starch based thickeners will not be switched at this stage, but those for whom a gum based product is recommended by a Speech and Language Therapist should not be switched back to starch based thickeners.