



# Tablet Press

The prescribing newsletter for GPs, nurses and pharmacists  
NHS Nene CCG and NHS Corby CCG



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- **Use of Plain Prednisolone tablets rather than Soluble**

Prednisolone soluble tablets are now 40 times more expensive than plain prednisolone tablets in primary care and in the acute trusts they are 100 times more expensive. Led by the paediatric department at NGH, there is a countywide intention to use plain prednisolone tablets instead of soluble in the majority of cases from now on. Use of the soluble tablets will be kept to a minimum e.g. in patients with fine bore enteral feeding tubes.

**Plain tablets** should be swallowed with a glass of water, milk or juice. If necessary, they can be crushed and mixed with a small amount of soft food such as yogurt, honey or jam. Plain tablets will also disperse in water to make a fine suspension and take a similar time to disperse as the soluble tablets. Information leaflets or letters are available for patients.

By reducing the use of soluble prednisolone tablets the CCGs could save over £130K per annum. An additional £40K could be saved in the acute trusts.

- **Denosumab (Xgeva▼, Prolia); intravenous bisphosphonates: osteonecrosis of the jaw—further measures to minimise risk**

Osteonecrosis of the jaw (ONJ) is a known side effect of denosumab and bisphosphonates (see Drug Safety Update articles from [November 2009](#) and [September 2014](#)).

The MHRA has announced that patient reminder cards about the risk of osteonecrosis of the jaw are being introduced for denosumab and IV bisphosphonates; denosumab 120 mg is now contraindicated in patients with unhealed lesions from dental or oral surgery. <https://www.gov.uk/drug-safety-update/denosumab-xgeva-prolia-intravenous-bisphosphonates-osteonecrosis-of-the-jaw-further-measures-to-minimise-risk>

- **Xalatan (latanoprost): increased reporting of eye irritation since reformulation**

In 2013, the Xalatan pH was reduced from 6.7 to 6.0 to allow for long-term storage at room temperature. According to the MHRA, following this reformulation there has been an increase in the number of reports of eye irritation from across the EU. No Yellow Card reports of eye irritation in people using Xalatan were received in the year before the reformulation, compared with 22 reports in the year after reformulation.

<https://www.gov.uk/drug-safety-update/latanoprost-xalatan-increased-reporting-of-eye-irritation-since-reformulation>

In Northamptonshire there is a local agreement that generic latanoprost is used first-line unless there is a specified reason from the consultant ophthalmologist not to do so. There was no increase in yellow card reports in the year after generic latanoprost was introduced.

<http://www.pathfinder-rf.northants.nhs.uk/media/2869780/prescribing-of-generic-latanoprost.pdf>

- **The IMPROVE-IT study (ezetimibe plus simvastatin vs simvastatin alone post ACS)**

The NICE Medicines Evidence Commentary on the IMPROVE-IT study is now available via NHS Evidence. The Commentary concludes, “*The large, multicentre randomised controlled trial IMPROVE-IT found that adding ezetimibe to simvastatin 40 mg after acute coronary syndrome produced a greater reduction in risk of cardiovascular events than simvastatin 40–80 mg alone. However, the effect of the combination on this risk is that which would be predicted from the degree of LDL cholesterol-lowering seen with a high-intensity statin such as atorvastatin 20–80 mg daily. The study provides no reason to depart from recommendations in the NICE lipid modification guideline*”. [MEC IMPROVE-IT](#)

- **Generic celirolol stock problem**

Generic celirolol will be unavailable until December 2015 and has therefore been given “NCSO” status i.e. Celestol brand can be supplied and reimbursed against generic scripts; this will mean that scripts for celirolol will be considerably more expensive for the next 6 months. It may be an opportunity for patients to be reviewed to check that celirolol remains the most appropriate antihypertensive for them, given that beta blockers are not a recommended treatment option for most people with hypertension (NICE CG127).

- **Nutripem 2 powder in short supply**

There is a manufacturing problem with Nutripem 2 powder and it will be in short supply for at least a couple of weeks. Dietetic advice is that prescribers can substitute SMA Gold Prem 2 as a near-identical alternative. Please do not prescribe the ready-to-drink formulation of Nutripem 2 as this is a very expensive option.

This edition is also available on PathfinderRF via the following link <http://www.pathfinder-rf.northants.nhs.uk/nene> and on the Nene CCG and Corby CCG websites

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