

# **Tablet Press**

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

February 2016

**Issue 113** 

#### Antibiotic prescribing from Podiatry

From 1<sup>st</sup> February podiatrists qualified as non-medical prescribers will issue prescriptions for diabetic foot infections for patients on their caseload for the duration of the required treatment, rather than referring to primary care colleagues. Non-prescribing podiatrists will be able to supply courses of certain antimicrobials under PGDs and are currently undergoing training to enable this. This will result in a reducing requirement in requests for antimicrobials from podiatry although some support and advice will continue to be sought where clinically indicated

#### Vitamin D – treatment courses

Prescribers are reminded that the treatment courses for vitamin D deficiency are for 6 weeks (Invita D3) or 12 weeks (Fultium and Desunin) <u>only</u> depending on the product used. After the treatment course, maintenance is with a lower dose and less frequent administration. Practice audits have identified patients receiving repeated treatment courses; these are best prescribed as a single acute script (rather than added to the repeat list) in order to reduce the likelihood of this. The full guidance is on Pathfinder

http://nww.pathfinder-rf.northants.nhs.uk/nene/therapeutics/guidelines-health-promotion/

## Bisphosphonates: very rare reports of osteonecrosis of the external auditory canal

The MHRA has advised that osteonecrosis of the external auditory canal has been reported very rarely (fewer than 1 in 10,000 patients) with bisphosphonates, mainly in association with long-term therapy (2 years or longer). Advice for healthcare professionals can be found at <a href="https://www.gov.uk/drug-safety-update/bisphosphonates-very-rare-reports-of-osteonecrosis-of-the-external-auditory-canal">https://www.gov.uk/drug-safety-update/bisphosphonates-very-rare-reports-of-osteonecrosis-of-the-external-auditory-canal</a>

# Asthma diagnosis and monitoring: primary care implementation feasibility project

NICE are seeking expressions of interest from GP practices to be involved in an asthma diagnosis and monitoring project to help with the development of their guideline on asthma diagnosis and monitoring. Full information can be found at <a href="https://www.nice.org.uk/about/nice-communities/general-practice/asthma-primary-care-project?utm\_source=NICE+Newsletter&utm\_campaign=b8a4607ab6-">https://www.nice.org.uk/about/nice-communities/general-practice/asthma-primary-care-project?utm\_source=NICE+Newsletter&utm\_campaign=b8a4607ab6-</a>
NICE+News+January+2016&utm\_medium=email&utm\_term=0\_8b79289514-b8a4607ab6-169199093

#### Opioids Aware

Opioids Aware is a new resource for all prescribers, patients and their carers to support safe and rational use of opioid medicines. It is a web-based resource, funded by Public Health England and hosted by the Faculty of Pain Medicine, Royal College of Anaesthetists and can be found at: <a href="http://www.fpm.ac.uk/faculty-of-pain-medicine/opioids-aware">http://www.fpm.ac.uk/faculty-of-pain-medicine/opioids-aware</a>

#### Co-proxamol

At the end of January 2005, the MHRA announced that co-proxamol was to be withdrawn from the market. A decision was made to withdraw it over a phased period - until the end of 2007 - to enable patients on co-proxamol to move to suitable alternatives. https://www.gov.uk/drug-safety-update/co-proxamol-withdrawal-reminder-to-prescribers

In Nene and Corby CCGs we are still issuing 167 and 33 scripts per quarter, respectively, for co-proxamol. Until October 2015 co-proxamol appeared in the Drug Tariff at a cost of £21.38 for 100; however it is no longer in the Tariff which means that prices for it to be sourced as an unlicensed "special" are likely to escalate. It is anticipated that this will be a cost pressure of at least £46K per year for Nene CCG and £9K for Corby CCG if these remaining patients cannot be switched to an alternative analgesic.

#### Sanofi insulin shortages

In December we circulated information regarding this and suggested alternatives. The information can be found on Pathfinder at <a href="http://nww.pathfinder-rf.northants.nhs.uk/media/3411378/sanofi-insuman-insulin-supplies-dec-2015.pdf">http://nww.pathfinder-rf.northants.nhs.uk/media/3411378/sanofi-insuman-insulin-supplies-dec-2015.pdf</a>

A reminder that patients will also need to be prescribed a new pen (Savvio) if changing to Humulin cartridges or should alternatively be swapped to Humulin Kwikpen prefilled pens.

### • Summary Care Record (SCR) roll out to Community Pharmacies

NHS England has engaged the Health and Social Care Information Centre to roll out SCR access nationally in Community Pharmacies following a successful Proof of Concept Pilot (PoCP) in which 40 pharmacies in Northamptonshire participated.

In the PoCP, 1 in 10 cases resulting from SCR access avoided a prescribing error that had the potential to cause moderate or major harm.

GEM & Arden CSU has been contracted to roll out the SCR access to 900 pharmacies across the midlands. All pharmacy enquiries regarding the roll out should be directed to <a href="mailto:SCRSupportTeam@ardengemcsu.nhs.uk">SCRSupportTeam@ardengemcsu.nhs.uk</a> (not via the Medicines Management team).

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

#### Disclaimer

Information in this newsletter is believed to be accurate and true. NHS Nene CCG and NHS Corby CCG and their employees accept no liability for loss of any nature, to persons, organisations or institutions that may arise as a result of any errors or omissions.