



- **MTRAC guidance on transdermal analgesic patches**

MTRAC, the Midlands Therapeutics Review & Advisory Committee, has issued its latest Commissioning Guidance report on fentanyl and buprenorphine transdermal patches for the treatment of chronic intractable non-cancer pain.

They suggest that the use of fentanyl or buprenorphine transdermal patches should be restricted to -

- patients who cannot tolerate tablet formulations, or have difficulty swallowing
- patients with mental health problems
- patients with compliance issues or for those who are socially isolated with limited access to care

They rate the transdermal analgesic patches as having “weaker evidence and a lower place in therapy”.

Use of buprenorphine patches in Northamptonshire is twice the national average and both fentanyl and buprenorphine patches are included in the Prescribing Incentive Scheme for 2012-13 to try to reduce inappropriate use.

<http://www.keele.ac.uk/media/keeleuniversity/fachealth/fachealthsop/mtrac/documents/esca/Bupren%20SUM5.pdf>

<http://www.keele.ac.uk/media/keeleuniversity/fachealth/fachealthsop/mtrac/documents/esca/Fentanyl%20TD%20SUM%205.pdf>

- **Risks associated with PPIs**

[Evidence from a large cohort study](#) suggests that postmenopausal women who were previous or current smokers and who regularly used PPIs for more than two years had about a 50% increased relative risk of low-trauma hip fracture. However, in absolute terms the risk was small: about 8 extra fractures per 10,000 women years. This was independent of risk factors such as dietary calcium intake, physical activity, history of osteoporosis or other drugs known to affect the risk of hip fracture. Women who had stopped using PPIs more than two years previously had a risk of fracture similar to that of women who had never used a PPI.

In addition the FDA has recently issued a communication about a link between use of proton pump inhibitors (PPIs) and an increased risk of Clostridium difficile-associated diarrhoea.

Health professionals should carefully review PPI prescribing and make sure it is in line with the relevant NICE guidance. PPIs have several important places in therapy. Nevertheless, PPIs should not be initiated or continued long term without careful thought and a discussion with the patient of the likely risks and benefits.

- **Prescribing for patients with swallowing difficulties**

We are aware that representatives from companies which manufacture liquid “specials” have been offering advice to care homes, community pharmacist and GP practices regarding the relative merits of different options for patients with swallowing difficulties.

We would advise all practices to contact one of the Care Home Advice pharmacists

([Najma.momen@northants.nhs.uk](mailto:Najma.momen@northants.nhs.uk) or [Marianne.price@northants.nhs.uk](mailto:Marianne.price@northants.nhs.uk))

or their Prescribing Adviser before changing any patients’ medicine formulation.

The NHS Northamptonshire Guidelines for prescribing for patients with swallowing difficulties are available on Pathfinder at [Prescribing difficulties Prescribing Guidelines](#) and [Swallowing difficulties flow chart](#) and are circulated with this bulletin.

- **Acne algorithm**

An algorithm which advises on the place in treatment of various agents including Epiduo has been agreed with KGH dermatologists. The algorithm will shortly be available on Pathfinder.

This edition is also available on HNN (Health Network Northants)

<http://www.northants.nhs.uk/Display/Dynamic.jsp?topid=14070&lhsid=514&oid=2854&currentid=2854>

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