# **Tablet Press**

# The prescribing newsletter for GPs, nurses and pharmacists in Northamptonshire Primary Care Trust

Issue 72 September 2012

#### MHRA issues updated advice on interactions and contraindications to simvastatin.

The August issue of the MHRA Drug Safety Update includes updated advice on interactions and contraindications to simvastatin. All GP practices and community pharmacists were sent an email from the Prescribing team office regarding this on Friday 24<sup>th</sup> August.

http://www.mhra.gov.uk/Safetyinformation/DrugSafetyUpdate/CON180637

### Primary Care Prescribing Guidelines for Continence Appliances

These were developed jointly by the Continence Nurse Lead (NHfT), Infection Prevention Lead (NHSN), Care Home Advice Pharmacist (CCG) and Head of Prescribing (CCG).

Key points to note are that the use of Bard Foley Trays for catheterisation is not recommended and that catheter maintenance solutions should not be use routinely. The guidelines will be available shortly on Pathfinder.

Pathfinder Link - Continence Guidance 2012

Intranet Link - Continence Guidance 2012

#### Using Appliance Contractors for dispensing prescriptions.

We continue to receive feedback that practices are having problems with some prescription requests from appliance contractors. Full guidance on this was issued last year and can be found at Appliance and nutritional supplies contractor guidance

The key points are -

- Patients must be given the choice where they would like their prescriptions dispensed.
- > The product and quantity supplied on each prescription must be appropriate and **be agreed beforehand** by the prescriber and patient.
- Retrospective prescribing is not allowed, unless it is requested by the prescriber as an emergency supply. See NHS (Pharmaceutical Services) Regulations 2005
- Routine requests for prescriptions should be made at least 7 days before the patient is due to run out to avoid the likelihood of urgent requests.

## • "Green Book" Website Update

To facilitate the updating of the "Green Book" (Immunisation against infectious disease), each chapter is now available on its own web page, together with its patch updates <a href="http://immunisation.dh.gov.uk/gb-individual-current-chapters/">http://immunisation.dh.gov.uk/gb-individual-current-chapters/</a> As the hard copy of the Green Book was last published in 2006 it is recommended that staff involved in vaccination e.g. childhood immunisation programme, travel, occupational health etc should use the website.

#### Screening tests prior to privately funded IVF

Some GPs have reported that couples are coming to them saying that private IVF providers have allegedly advised them to go to their GP for NHS funded screening prior to going through IVF. This includes Chlamydia swabs, HIV, HEP C, sperm tests, hormone profiles etc.

The providers have been formally written to by the NHS Northamptonshire contracting team, but just to confirm that patients who are undergoing private IVF are not entitled to any screening, swabs, blood tests or drugs via the NHS. These should all be undertaken by the private provider at their own cost.

#### . Improvements in the quality of medicines information at discharge from KGH and NGH

Recent audits within primary care have demonstrated significant improvements in the quality of information relating to discharge medication, with both KGH and NGH achieving over 70% accuracy (up from between 50 and 60% the previous year). Both trusts have worked hard to achieve this to ensure that patients receive their medicines in a safe and timely way and have the appropriate information to use them correctly.

The KGH pharmacy department has reengineered Pharmacy Services to improve accuracy of discharge letters, reduce waiting times for TTAs and looking at pioneering research into new models of working to reduce polypharmacy and avoid hospital readmissions relating to medicines.

GPs can support this by encouraging their patients to bring in their own medicines when they go into hospital. Scott Savage (Chief Pharmacist KGH) explains that loss of patients' own medicines is only small, despite previously held concerns that medicines go missing within the hospital system. "Contrary to anecdotal reports, a recent audit shows that 97% of patients' own medicines are accounted for in the hospital."

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

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

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