

Tablet Press



The prescribing newsletter for GPs, nurses and pharmacists NHS Northamptonshire

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· Indapamide stock shortage

Standard-release indapamide 2.5mg is in short supply and has been granted NCSO (No Cheaper Stock Available) status in February, which means that any available stocks will be expensive. Prescribers are advised to switch patients to either the m/r indapamide formulation or to bendroflumethiazide 2.5mg until stocks of indapamide 2.5mg become available again.

• Missed ScriptSwitch savings - Ovranette versus Microgynon 30

Our ScriptSwitch reports show that the most frequently rejected ScriptSwitch prompt in Northamptonshire is the suggestion to prescribe Ovranette instead of Microgynon 30, even for newly initiated prescriptions. Although the absolute price difference is small, as a county we would save over £6K per year if these prompts were accepted and Ovranette was prescribed instead of Microgynon 30.

· Colchicine - a reminder

When prescribing or dispensing colchicine remember to warn patients about side-effects and dose restrictions, particularly when it is being used for acute gout. Colchicine frequently causes nausea, vomiting and abdominal pain. Larger doses may cause profuse diarrhoea, gastrointestinal haemorrhage, skin rashes and renal and hepatic damage. The dose for acute gout is: 1mg initially, followed by 500 micrograms every two to three hours until relief of pain is obtained or vomiting or diarrhoea occurs. A total dose of 6mg should not be exceeded. The course should not be repeated within three days. These warnings should appear on the dispensing label and most computer systems *do not automatically add them*. The tablet strength is 500micrograms so patients will need the advice in terms of numbers of tablets rather than mg. Dose adjustments should be made for patients with renal impairment, the elderly or debilitated, as there is a greater risk of cumulative toxicity, and care should be exercised in those with cardiac, hepatic, gastrointestinal disease or if patients are breast-feeding.

See Appendix 1 in the BNF for drug interactions with colchicine and note that grapefruit juice possibly increases the risk of toxicity. http://www.evidence.nhs.uk/formulary/bnf/current/a1-interactions/list-of-drug-interactions/colchicine

Tablets are usually dispensed in small quantities taken from a 100 tablet original pack. Please remember that it is a dispensing obligation to provide the patient with the manufacturer's "Patient Information leaflet" with every prescription. These can be printed off from the manufacturer's website if you have run out. http://www.medicines.org.uk/emc/medicine/22832/PIL/Colchicine+500+microgram+Tablets

Sudocrem prescribing

We spend about £30,000 per year on Sudocrem in Northamptonshire and it appears that most of the prescribing is for the larger 250g or 400g tubs, which may lead to waste, particularly in care homes, where the recommended in house expiry dates of open top tubs is 1 month from the date of opening (and for tubes and pump packs is 3 months). Prescribing the smallest amount required for 28 days is advised; Sudocrem comes in smaller 60g and 125g tubs which may be more appropriate.

PathfinderRF server problems

The PathfinderRF site is kept on 4 servers; these servers should automatically update each night, however this is currently not happening and therefore new documents may not be displayed. Depending on which server your computer accessed last, the site that you see may not be the most recent. The problem only seems to be occurring when accessed via an N3 connection (NWW.).

This can be rectified in two ways. Press Ctrl and F5 to do a complete refresh or alternatively access the site through http://www.plain.pathfinder-rf.net/nene

This is a temporary problem and is currently being worked on by Plain Healthcare. If you experience any further problems with the site please can you let them know via the feedback button link here.

• Patient Group Direction Authorisation Form

The PGD authorisation form has been updated which will simplify documentation of the PGDs practice nurses are authorised to use. Furthermore if the nurse has access to the PGDs on-line then there is no need to print off each PGD.

The authorisation form and all PGDs can be accessed on Pathfinder RF http://www.plain.pathfinder-rf.net/nene/therapeutics/patient-group-directions/

This edition is also available on PathfinderRF via the following link http://nww.pathfinder-rf.northants.nhs.uk/nene

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