Tablet Press







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Codeine: restricted use as analgesic in children and adolescents after European safety review
 The June issue of the MHRA safety update advises that the use of codeine for analgesia in children and
 adolescents under 18 has been restricted after a European safety review. The review was triggered by
 case reports of children who received codeine for pain control after tonsillectomy or adenoidectomy (or
 both) for obstructive sleep apnoea and who developed rare, but life-threatening adverse events,
 including death.

The full advice for healthcare professionals can be found at http://www.mhra.gov.uk/Safetyinformation/DrugSafetyUpdate/CON287006

Use of budesonide/formoterol in people at risk of severe asthma exacerbations http://www.thelancet.com/journals/lanres/article/PIIS2213-2600(13)70007-9/abstract
This randomised controlled trial recently published in the Lancet found that budesonide/formoterol maintenance and reliever treatment (the SMART indication) did not reduce the likelihood of episodes of high use of reliever treatment over 24 weeks, compared with standard maintenance treatment with budesonide/formoterol and as needed salbutamol. Maintenance and reliever treatment did not appear to increase the risk of people overusing relievers without medical review, or increase long-term systemic corticosteroid exposure. Although the study provides some reassurance around the risks and benefits of budesonide/formoterol maintenance and reliever treatment, it does not provide any strong evidence for using this treatment regimen ahead of standard maintenance treatment with an inhaled corticosteroid and long-acting beta-2 agonist plus as needed reliever. Clinicians should continue to follow the British guideline on the management of asthma and consider which treatment regimen to use on an individual

• EMA investigation into GLP-1 based diabetes therapies concluded

patient basis. A full analysis of this study can be found at NHS evidence commentary

The European Medicines Agency's Committee for Medicinal Products for Human Use (CHMP) has finalised a review of GLP-1-based diabetes therapies. The Committee concluded that presently available data do not confirm recent concerns over an increased risk of pancreatic adverse events with these medicines. The CHMP also considered after a review of all available non-clinical and clinical data that there is no change in evidence regarding the risks of pancreatic adverse events associated with the use of GLP-1 based therapies.

The CHMP acknowledged that due to their mechanism of action (stimulation of beta-cell- and suppression of alpha cell-function) some uncertainties remain in respect to the long-term effect of these medicines on the pancreas and more data collection efforts are under way.

As per previous advice, prescribers are reminded to use these agents only in accordance with the NICE guidance and to review and stop treatment if the metabolic benefits are not achieved.

The full report can be found at

http://www.ema.europa.eu/docs/en GB/document library/Press release/2013/07/WC500146619.pdf

CRI benzodiazepine protocol

CRI are the new providers of substance misuse and alcohol misuse services in Northamptonshire. They have recently shared their protocol on benzodiazepine prescribing for their clients, which GPs and OOH services are advised to be aware of. The protocol will shortly be available on Pathfinder.

BNF monthly updates

Healthcare professionals can register to receive these monthly BNF updates via e-mail at the following link http://www.pharmpress.com/mailouts/bnf/jul13/BNF enewsletter.html

• Rotavirus case-study

This case-study within the latest BNF update is very good and may be useful for practice nurses. http://www.pharmpress.com/BNFResources/jul13/BNF case study.asp

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

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