



Tablet Press

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

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- **Soluble drug formulations: sodium content and association with cardiovascular events**

An observational study has shown an association between sodium-containing formulations of effervescent, dispersible and soluble medicines and adverse cardiovascular events. This study suggests that there are potentially significant clinical grounds for avoiding these products in almost all patients, and especially those at risk of cardiovascular disease. Clinicians should avoid prescribing sodium-containing effervescent analgesics unless there are compelling reasons to do so.

Most patients can be switched directly to a standard formulation of the same analgesic and will readily accept this change if the reason for doing so is explained to them. This advice does not apply to low-dose dispersible aspirin formulations, which contain virtually no sodium.

As long as 10 years ago, we promoted this message in Northamptonshire, using bottles filled with the amount of salt contained in 8 effervescent tablets as a method of demonstrating the issue to patients. At that time the prescribing of effervescent and soluble analgesics fell considerably as a result. This study highlights that perhaps it is worth re-visiting this simple intervention. [NICE Medicines Evidence Commentary](#)

- **Shortec (Qdem Pharmaceuticals)**

This branded generic version of standard-release oxycodone is now available and practices are recommended to switch patients from Oxynorm or the generic. It is available from all main wholesalers. Practices are asked to give community pharmacists at least 2 weeks' notice of a switch.

- **Nacrez**

Nacrez is currently out of stock and not likely to be available until 10 February. Prescribers are advised to prescribe as generic desogestrel as there is now very little difference in price.

- **Pathfinder login for community pharmacists**

Community pharmacists can now access the "Therapeutics" guidance on Pathfinder. This contains information produced by the CCGs' Prescribing and Medicines Management Team, which you may find useful. Community pharmacists need to be aware that the CCGs do not commission some medicines at NHS expense (double red medicines) e.g. topical fungal nail treatments, heel balms, vitamins for macular degeneration. Patients should be advised that these products need to be purchased OTC and should not be directed to their GP for a prescription. All details are on Pathfinder under "Traffic Lights".

<http://www.plain.pathfinder-rf.net/nene>

User Name: pharmacists Password: N3n3

- **Statins and Myalgia**

Whilst patients on statins often complain about myalgia the risk of myopathy is very low at standard doses (typically <1 in 10 000 patient-years) and the risk of rhabdomyolysis is about one-third of that. The risk increases with higher doses, in patients with certain risk factors such as renal impairment, and when statins are used in combination with drugs such as fibrates. An algorithm has been produced recommending what prescribers should do if a patient on statins complains of myalgia

<http://www.pathfinder-rf.northants.nhs.uk/media/2529915/statin-myalgia-algorithm.pdf>

- **Prescribing for minor ops**

A reminder that sutures, dressings, swabs and local anesthetics should not be prescribed or ordered via ONPOS as the cost of these is already included in the GP enhanced service fee for the minor op. and should be purchased by the practice.

- **OroNac**

OroNac is a relatively cost-effective option for the supply of acetylcysteine. We have been made aware that there is a product available in India called Oronac Plus which contains diclofenac – patients can be reassured that this not the product being supplied.

- **Middle aged medicine**

Readers aged over 45 might be interested in this article in the BMJ.....<http://tinyurl.com/lndsz9s>

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

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