

# **BSW Formulary Updates and Recent Decisions – November 2023**

## New additions to BSWformulary and Change in Traffic Light status

- Dexmedetomidine 100microgram/mL solution for injection added with RED TLS.
- <u>Doxylamine succinate 10mg and pyridoxine hydrochloride 10mg tablets (Xonvea®)</u> added with **GREEN** TLS as an option for the treatment of nausea and vomiting in pregnancy.
- Warfarin 1mg/ml SF suspension added to paediatric chapter with AMBER TLS.
- Trifarotene 50 microgram/g cream (Aklief®) added to formulary with GREEN TLS.
- <u>Treatment of scabies.</u> TLS for oral ivermectin tablets and for benzyl benzoate 25% application has been changed to GREEN so these unlicensed treatments may be prescribed in primary care, where clinically indicated, during the current shortage of permethrin.
- <u>Semaglutide solution for injection Pre-filled pens (Wegovy®)</u> added with RED TLS as an option for managing overweight and obesity alongside a reduced-calorie diet and increased physical activity in adult patients meeting the criteria defined in <u>NICE TA875</u>. A review of the tier 3 weight management service locally is ongoing. Information from DHSC about accessing Wegovy® for weight loss available <u>here</u>.
- Mirikizumab solution for injection (Omvoh®) added with RED TLS for use in line with <u>NICE</u> <u>TA925</u>. An update to the existing BSW treatment pathway for ulcerative colitis is underway and will follow in 2024.

## New and Updated Shared Care Agreements and Prescribing Guidance

- UPDATE <u>BSW Prescribing Guidance for Moderately to Severely Frail Patients</u>. An education programme and webinars to support the continued use of this guidance to aid deprescribing will follow in 2024.
- NEW <u>Shortest Effective Course Lengths for Antibiotics</u> New guidance summarises recent local and national updates to support reduced patient exposure to antibiotics and address antimicrobial resistance.
- UPDATE <u>BSW Management of Infection Guidance for Primary Care</u> Includes updates to sections on recurrent UTI (methenamine Hippurate now GREEN TLS), and to pelvic inflammatory disease (as per <u>CKS update</u> Oct 23). Also includes new section on boils and carbuncles.
- UPDATE The SCAs for <u>Apixaban, Edoxaban or Rivaroxaban for the OFF-LABEL treatment</u> of <u>Cancer Associated Thrombosis</u> and for <u>Dalteparin for the Treatment of Cancer Associated</u> <u>Thrombosis</u> have been updated and now include patients under the care of SFT as well as at RUH.



### Minor amendments to Netformulary

We have recently updated some information in the 'about us' page of the formulary and have amended the definition of RED TLS medicines to represent current clinical settings:

**RED** - These medicines are considered suitable for prescribing ONLY by a specialist clinician throughout treatment. The specialist clinician is commonly situated in a hospital but may be within a virtual ward or a locally commissioned specialist-led service situated in primary care or other community setting. General non-specialist prescribing of a RED TLS medicine is NOT recommended unless there is a specific protocol under direct authority of a specialist employed within BSW set up to support this.

### What the BSW ICB formulary team are currently working on

- Updating <u>BSW Acne Prescribing Guidance</u> to include trifarotene.
- Updating <u>BSW Migraine Treatment Pathway</u> to include rimegepant.
- Drafting local guidance on new insomnia drug daridorexant, which will be prescribable in 2024.
- Ongoing work to update existing BSW SCAs and to adopt national SCA templates for BSW where required.

Reviewing the national NHSE <u>Shared Care Protocols</u> for implementation locally. The BSW APC has prioritised adoption of these according to existing local protocols (and their date of review) and patient safety factors. As a result, amiodarone and valproate have been selected for implementation.

The BSW joint formulary remains under construction and is designed to be an evolving, dynamic resource. We are working to ensure the messages on GP prescribing systems and Optimise Profiles are in line with the joint formulary. If you discover information you believe to be inaccurate or misleading, or for further information, email <u>bswicb.formulary@nhs.net</u>