

To contact NHS BSW ICB Medicines Optimisation Team:

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Website: <https://bswtogether.org.uk/medicines/>

## BSW Area Prescribing Committee (APC) Updates (see all recent decisions in full [here](#))

### No Updates as APC meetings- cancelled due to Holiday season and Industrial action

The [BSW 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 BSW formulary. If you discover information you believe to be inaccurate or misleading, or for further information, email [bswicc.formulary@nhs.net](mailto:bswicc.formulary@nhs.net)

### Did you see - Hormone Replacement Therapy Special Edition MOP UP in August?

During the summer we issued an HRT Special Edition MOP UP covering some key safety issues and other top tips when prescribing HRT. It can be found [here](#)

We thought we'd share the link again, as we know summer is a busy time and you may have missed it!

In addition, we'd like to highlight that **Arden's** have recently published a **search** which includes all oestrogen only HRT products for those wishing to audit prescribing of all oestrogen only HRT products within their practice.

The search can be found in Arden's - **Prescribing > Registers > On repeat > HRT – Oestrogen only.**

### ££££££££ Cost Saving drug switch of the month: generic Ethosuximide 250mg capsules and 250mg/5ml oral solution to the branded Emeside 250mg capsules and 250mg/5ml oral solution ££££££££

Drug	Quantity	Cost	Switched to	Quantity	Cost	Saving
Ethosuximide 250mg capsules	56	£210.68	Emeside 250mg capsules	56	£100.42	<b>£110.26</b>
Ethosuximide 250mg/5ml oral solution	200ml	£173	Emeside 250mg/5ml oral solution	200ml	£91.43	<b>£81.57</b>

Approximately **£30K** could be saved if this switch was carried out across BSW ICB. Although this may not seem a great deal across the whole area, it can have an enormous impact on individual practices that are still prescribing it generically. Emeside has been approved as an alternative by all three trusts and is a switch that we are now promoting on Prescribe Well Spend Less [PWSL](#)

We have reassurance from the manufacturers that there are no known shortages and local suppliers assure us that stock is available.

At the **end of each financial quarter** please remember to **complete and submit the cost savings recording template** which accompanied the Q2 report to [bswicc.prescribing@nhs.net](mailto:bswicc.prescribing@nhs.net)

### New Resource: Medication Review for People at **Risk** of Falls

While anyone can experience a fall at any time in their life, the likelihood increases as we age. National data indicates around a third of people aged 65+ and approximately half of people aged 80+ will fall at least once a year.

Around one in three adults over 65 and half of people over 80 will have at least one fall a year. Falls and related injuries are increasingly common, and their impact reaches across the Health and care system. Falls are an important driver for urgent and emergency care, with emergency admissions for falls in people 65+ increasing year on year in England – from 185,000 in 2010/11 to 234,000 in 2019/2020, representing a **26%** increase.

There are a [range of tools and resources](#) from across the BSW system that can help individuals and practitioners mitigate falls which we will be showcasing on our social media channels across the week - make sure you give us a follow, we are @nhsbswicc.

#### Medication Review for People at Risk of Falls

Medication is a common cause of, or contributory factor in, falling. Reviewing medication is an important part of reducing falls risk.

PrescQIPP has a very useful Bulletin - [Bulletin 300: Medication and falls | PrescQIPP C.I.C](#) . This bulletin and resources highlight medicines that can increase the risk of falls in older people. Guidance is provided on deprescribing Fall-Risk-Increasing Drugs (FRIDs) and when deciding whether to initiate medicines in older people at risk of falls.

New information and guidance has been published to assist with reviewing medicines for people at risk of falls: [National Falls Prevention Co-ordination Group guidance](#)

The document has been written by Consultant Pharmacists Heather Smith and Dula Alicehajic-Becic for the National Falls Prevention Co-ordination Group.

It contains a list of falls risk increasing drugs (known as FRIDs) and information on reviewing them. It also covers drugs which may increase the risk of fracture & orthostatic hypotension.

### [Medicines Optimisation website](#)

#### Updated document

BSW Prescribing 2023-24 Savings Recommendations Prescribe Well – Spend Less (September 2023 v38)PWSL

[BSW Prescribe Well Spend Less PWSL \(September 2023\)](#)

### **Cholesterol and Lipid Disorders: - 5 October, 1:00-2:20pm**

AHSN is providing a series of free, 80-minute online education sessions for GPs and Health Care Professionals on the management of patients with high cholesterol and lipid disorders. Delivered by secondary care consultants and pharmacists, the session (**which will be repeated on multiple dates**) will cover the optimisation of treatment of patients with established CVD, including the use of high intensity statins and ezetimibe, when to refer to secondary care and the secondary care prescribing options available. It will also cover the proactive identification of patients with Familial Hypercholesterolaemia (FH). The webinars will reference the local pathways developed within the West of England (including BSW) which are consistent with the NICE approved lipid management pathway.

[More info and booking HERE](#)

### National **shortage** of catheter maintenance solutions/bladder washouts

Bard have put a stop to the manufacturing of all **Optiflo** catheter maintenance preparations with currently no date of re-supply - OPTIFLO® G (Suby G - 3.23% citric acid), OPTIFLO® R (Solution R - 6% citric acid), OPTIFLO® S (0.9% saline) are affected.

This has impacted **B Braun** who make **Urotainer** especially Uro-Tainer® NaCl 0.9% , Uro-Tainer Twin Suby G citric acid 3.23% and Uro-Tainer Twin Solution R citric acid 6% . They have supplies but are honouring their prescription direct customers first and then remainder (a few thousand) will go out to wholesalers .They are increasing manufacturing and hope to impact shortage.

**TriOn** who make **Uroflush** has also been impacted.They plan to increase manufacture and currently only have 50ml rather than 100ml size of UroFlush Saline 0.9% .UroFlush R citric acid 6% catheter maintenance solution, UroFlush G citric acid 3.23% catheter maintenance solution have also been affected.

All community continence leads are aware and are communicating with their teams.

Please contact [bswicb.prescribing@nhs.net](mailto:bswicb.prescribing@nhs.net) if you are experiencing problems.

We would also encourage our **Community Pharmacy** colleagues to report shortages that are having an impact on patients via [Medicine Shortages - Community Pharmacy England \(cpe.org.uk\)](https://www.cpe.org.uk)

### Serious **Shortage** Protocols for Estradot® 100mcg patches and Jext® 300mcg adrenaline auto-injectors

Serious Shortage Protocols have been issued for **Estradot® 100mcg patches** (SSP057) and **Jext® 300mcg adrenaline auto-injectors** (SSP058)

SSP057 will allow pharmacists to **supply either Evorel® 100mcg patches or Estraderm MX® 100mcg patches as alternatives** and is currently due to end on 13th October 2023 .

SSP058 will allow pharmacists to supply **EpiPen® 300mcg adrenaline auto-injectors as the alternative** and is currently due to end on 20th October .

The SSPs are now available to view on the NHS Business Service Authority (BSA)'s dedicated SSP web page along with supporting endorsement guidance. [Serious shortage protocols \(SSPs\) | NHSBSA](#)

### Important DOAC update – Edoxaban v Apixaban

*BSW guidance for Anticoagulation in non-valvular atrial fibrillation (NVAf)* is now **under review** pending the outcome of a successful Apixaban patent challenge by two generic companies (as it stands Apixaban patent has expired as of May 2022, but there is still the option for the patent holder to challenge in the supreme court).

Apixaban is now category M in the drug tariff (Apixaban 5mg tablets cost **£15.73 for 56**) and will be significantly cheaper than Edoxaban as of 1<sup>st</sup> October 23.

The national IIF scheme for Edoxaban has also ended and so there is no longer any financial incentive for general practice to switch patients to Edoxaban

**The ICB therefore discourages any further switching of Apixaban to Edoxaban for the purpose of cost saving** and would continue to encourage both Apixaban and Edoxaban as first line options depending on patient need in line with local guidelines. Click [here](#) for further details

In the meantime, we will of course keep you updated of any further developments with respect to the Apixaban patent challenge and review of local guidelines as these become available.

### Structured Medication Reviews (SMR)

A range of nationally produced resources are now available to support and prepare patients for Structured Medication Reviews (SMR).

The resources are available in a range of languages, as well as audio versions, and include:

- Patient invitation letter, which you can edit to add the patient's name and your contact details.
- Me and My Medicines or Are Your Medicines Working? information – to be shared with patients invited to attend a Structured Medication Review.
- Safely stopping your medicine leaflet – to be shared with patients if you agree to stop or gradually stop any medicines.
- An animation to help patients think about their medicines and to prepare for a Structured Medication Review.

These materials are free to use and can be printed and used in paper format, or shared electronically with patients by email, text or any other electronic systems used within your workplace, the animation could also be shown in waiting rooms.

The resources are available here: <https://www.ahsnnetwork.com/programmes/medicines/polypharmacy/patient-information/>

### AHSN Polypharmacy Programme Launch

The AHSN Polypharmacy Programme- **Launch of Resources for Patients** Webinar took place on Monday 25<sup>th</sup> September view the recording [here](#).

### MHRA Drug **Safety** Updates (DSUs) August & September 2023

Both DSUs remind prescribers to be alert to the **potential for serious side effects with fluoroquinolone antibiotics (ciprofloxacin, delafloxacin, levofloxacin, moxifloxacin and ofloxacin)**. Including psychiatric reactions, depression and psychotic reactions potentially leading to thoughts of suicide or suicide attempts, and potential disabling, long lasting or irreversible side effects sometimes affecting multiple systems, organ classes and senses. These include, tendinitis, tendon rupture, muscle pain and weakness, joint pain and swelling, peripheral neuropathy and central nervous system effects. Despite the introduction of new restrictions and precautions in 2019, there hasn't been a change in fluoroquinolone prescribing patterns within the UK. Fluoroquinolone antibiotics should only be prescribed in limited scenarios in accordance with local BSW antimicrobial prescribing guidance which can be found [here](#).

The MHRA have produced a patient information leaflet available [here](#). Patients should be advised to stop treatment and contact the prescriber immediately if they experience signs of serious adverse reaction such as tendon pain or swelling, pain or swelling in joints, abnormal sensations (pins and needles, numbness, burning), severe tiredness, depressed mood, distressing thoughts, changes in vision, taste, smell or hearing. Please report adverse reactions via the Yellow Card system [here](#).

Other DSU articles cover statins and very infrequent reports of myasthenia gravis, announcement of the re-analysis of a study analysing risks in children born to men who took valproate in the 3 months before conception and advice to patients to take precautions in the sun due to photosensitivity reactions with methotrexate.

Full details can be found in the Drug Safety Updates [here](#). Subscribe to the MHRA's monthly Drug Safety Update [here](#)