Bath and North East Somerset, Swindon and Wiltshire Integrated Care Board



To contact NHS BSW ICB Medicines Optimisation Team:
bswicb.prescribing@nhs.net
Website: https://bswtogether.org.uk/medicines/

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

New additions to BSWformulary and Change in Traffic Light Status (TLS)

- **Pylera® capsules** (140mg bismuth subcitrate potassium, 125mg metronidazole and 125mg tetracycline hydrochloride) for the treatment/eradication of H pylori infection in conjunction with omeprazole with GREEN TLS.
- <u>Vaginal pessaries</u> (plastic and silicone) entry now published.
- Change in TLS <u>Camellia Seinensis (Catephen®)</u> for the treatment of external genital warts changed from RED to GREEN in view of shortages of alternative options.
- Tadalafil 5mg added to formulary for daily prescribing if patient meets SLS criteria. Updated guidelines to follow see Formulary

New and Updated Prescribing Guidelines and Shared Care Agreements

- UPDATE Lidocaine Plaster Guidance reference to Ralvo® brand removed, following its discontinuation, and suggests prescribing should be generic.
- NEW Relugolix Guidance for treating hormone-sensitive prostate cancer to support implementation of NICE TA995.
- UPDATE BSW Guidance for Prescribing Hayfever and Allergic Rhinitis link to Flixonase nasules removed following discontinuation, links and prices corrected and updated. Budesonide and beclomethasone to state for children over 6 years.
- UPDATE Ibandronic acid for Postmenopausal Women with Early Breast Cancer Shared Care Agreement updated to include use at SFT and update costs and contact details.
- UPDATE -BSW -BSW Primary Care Guidelines for the Pharmacological Management of Vitamin B12 deficiency in Adults

Minor amendments to Netformulary

- Zostavax shingles vaccine moved to non-formulary, unavailable
- Bromocriptine 1mg removed from formulary as no longer available
- Freestyle Libre 2 moved to non-formulary, to be replaced with Freestyle Libre 2+
- Emerade moved to non-formulary as discontinued
- Primidone 125mg tablets additional indication of epilepsy
- Added link to MSN for Neutrogena T/Gel therapeutic 2% shampoo as it is being discontinued in Feb 25. Moved to non-formulary section.

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 besternation.com 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 besternation.com 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 besternation.com 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 besternation.com and optimise Profiles are in line with the joint formulary.

Exciting news in ASTHMA



Points to Remember:

NO SABA without ICS in asthma!

STOP SABA if starting AIR or MART regimes!

(ICS/formoterol have a class effect, although licenses for MART and AIR vary, and some may be used off-label. Please refer to the SmPC - Summary of Product Characteristics - of the product you are prescribing for correct dosing and further information.) Home - electronic medicines compendium (emc)

The long awaited <u>NICE/BTS/SIGN asthma guideline [NG245]</u> was published on 27/11/24 and is now available. The guideline also contains various resources which you can find <u>here</u>.

The BSW Area Prescribing Committee approved our local asthma guidelines on 23/01/2025. The Asthma Guidelines for Children and Young People (0-16y) can be found <u>here</u> and the Asthma Guidelines for Adults and Young People Over 16 Years Old <u>here</u>

We have updated the <u>Adult asthma formulary</u> and the separate respiratory section in the <u>Paediatric Asthma</u> <u>Formulary</u>

Searches and search outputs are now available in TPP – *Reporting* » *Clinical reporting* » *BSW General Practice* » *Medicine Optimisation Team* » *I Asthma* .For **more information and guidance** see email sent to all practices on 29th January.

We are planning various educational events, so please watch this space!

In the meantime, there is a very **informative PrescQIPP Clinical Masterclass** with Prof Anna Murphy Consultant Respiratory Pharmacist you can catch up on <u>here</u>.

Medicines Optimisation website updated document BSW Prescribing 2024-25 Savings

Recommendations Prescribe Well – Spend Less <u>PWSL - January 2025</u> To ensure you are always using the most

up to date information, please always check and search for our latest documents and information via the <u>BSW</u> <u>ICB Medicines Optimisation Team</u> <u>website</u>

Seroxat (branded paroxetine) being discontinued

We have been advised by GlaxoSmithKline that Seroxat® 20mg tablets will be discontinued in the UK from March 2025, Seroxat® 30mg from May 2025 and Seroxat® 10mg from November 2025. Generic versions of Paroxetine remain available. A S1 search is available to identify patients, it can be found here- Clinical Reporting > BSW General Practice > Medicine Optimisation Team > c Cost Savings > 5.4 Seroxat - prescribe generically (paroxetine) due to brand discontinuation in 2025.

Catheter Know how

Catheters

There are 2 types of Urinary catheters:

- Intermittent catheters also known as ISC catheters these are single use and can be changed anything from 1-6 times per day dependant on the patient's medical/clinical reason. The patient changes these themselves, so would need to have good dexterity and cognition.
- Indwelling catheters these remain in situ for a longer period with the aid of a ballon and are for use up to at 12 weeks and changed by the District Nurse or catheter clinic.

Catheter Lengths

These are made in 3 different lengths. A standard catheter when requested is a Male catheter which can also be used for Female patients. Female catheters CANNOT be used for Males.

- Male/Unisex length usually 40-45cm in length
- Female usually 7-26cm in length
- Paediatric Usually 30-31cm in length

Catheter Sizes - (CH) also known as gauge or size

- Male 8 to 26CH
- Female 6 to 26CH
- Paediatric 6 to 10CH

The British Menopause Society: Frequently Asked Questions – Management of unscheduled bleeding on HRT

Following the issue of the Joint Guideline for the Management of Unscheduled Bleeding on HRT many healthcare professionals have sought further clarification on aspects of the guidance. Including the suggested doses of **progesterone for endometrial protection** with the categorisation of different oestrogen products as ultra-low dose, standard dose, moderate dose, and high dose.

Recognising there is a paucity of evidence in some areas and acknowledging the need for further research, the lead authors have provided this FAQs. <u>New FAQ document – Joint Guideline on</u> management of unscheduled bleeding on HRT - British Menopause <u>Society</u>

SPS Swallowing difficulties resources

The SPS has published some useful resources around swallowing difficulties -

Choosing medicines formulations in swallowing difficulties (Published 17 December 2024)

Some adults cannot swallow tablets or capsules safely. We describe a process for choosing suitable formulations, including crushing tablets.

Checking if tablets can be crushed or capsules opened (Published 17 December 2024)

We suggest information resources and points to consider before crushing tablets or opening capsules.

Checking if medicines can be given with food (Published 17 December 2024)

Many medicines can be given safely with a spoonful of soft food. Use the suggested resources and clinical considerations to support decision-making. Why and how medicines are given with soft food or thickened fluid (Published 17 December)

Giving medicines with food or fluid may be needed for people with swallowing difficulties or for covert administration. Practical advice is provided.

Advising how to crush or disperse tablets and open capsules (Published 17 December)

How to disperse tablets in water, crush tablets and open capsules safely for oral administration in adults.

Thickeners and thickened fluids (Published 17 December 2024)

Follow specific product information when using thickeners. Avoid mixing starch-based thickeners with macrogol (polyethylene glycol) laxatives. Thickening liquid medicines (Published 17 December 2024)

Liquid medicines should not be thickened routinely. It is difficult to check fluid consistency, and this can affect whether the medicine is swallowed safely.

EEEE Cost saving switch of the month -Haloperidol 500mcg tablets switching to Haloperidol oral solution **EEEE**

In the past 12 months, £149k has been spent on haloperidol 500mcg tablets. If each prescription was prescribed as haloperidol oral solution, it would cost BSW ICB less than £5k.

Product	Pack size	Cost	Price per 500mcg dose
Haloperidol 5mg/5ml oral solution sugar free	100ml	£13.46	£0.07
Haloperidol 10mg/5ml oral solution sugar free	100ml	£8.33	£0.02
Haloperidol 500microgram tablets	28	£430.78	£15.39

As we are fast approaching the end of the financial year, a reminder to send in any cost savings that that your practice has completed as this will contribute towards your Prescribing Quality Scheme (PQS) target. BSW ICB pharmacy technicians now have limited capacity, so please do not delay in contacting the team at <u>bswicb.prescribing@nhs.net</u> if you have not already done so, to determine how your practice can be supported.

MHRA Drug Safety Update

Healthcare professionals should be aware of the **potential risk of pulmonary aspiration** in patients using GLP-1 or dual GIP/GLP-1 receptor agonists who undergo surgery or procedures with general anaesthesia or deep sedation. This is thought to be due to delayed gastric emptying, which may increase the risk of residual gastric contents despite preoperative fasting <u>GLP-1 and dual GIP/GLP-1 receptor</u> <u>agonists: potential risk of pulmonary aspiration during general anaesthesia or deep sedation</u>

Healthcare professionals are asked to remind patients to inform their healthcare teams and anaesthetists if they are on GLP-1 or dual GIP/GLP-1 receptor agonists before surgery and specifically at pre-assessment clinic before surgery.

We acknowledge that some patients are accessing GLP-1s and dual GIP/GLP-1s privately. Details of how to record specialist prescribed drugs on each GP clinical system can be found here, we encourage clinicians to record these medications when made aware that patient is accessing privately<u>Recording</u>
<u>Hospital / Other Medications : Ardens</u>

This newsletter represents what is known at the time of writing so information may be subsequently superseded. Please contact the Medicines Optimisation Teams with comments/feedback or information for inclusion. This newsletter is aimed at healthcare professionals working within BSW.