

Prescribing and Medicines Optimisation Guidance

Issue: 81

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Safety guidance

1. Local valproate referral form

Healthcare professionals who seek to prescribe valproate to their female patients must make sure they are enrolled in the Pregnancy Prevention Programme (PPP). This includes the completion of a signed risk acknowledgement form when their treatment is reviewed by a specialist, at least annually. [Link](#)

A local template form has been developed by the Valproate sub-group of the Hampshire Medicines Safety Group to help improve the referrals into secondary care for annual reviews and risk acknowledgement form completion. This Valproate template is now hosted on GP Clinical Systems via Ardens across all areas of the ICB.

2. MHRA: Pholcodine-containing cough and cold medicines: withdrawal from UK market [Link](#)

MHRA have produced advice for healthcare professionals regarding the withdrawal of pholcodine-containing medicines from the market. This is following a review which found that their benefits do not outweigh the increased risk of the very rare event of anaphylaxis to neuromuscular blocking agents (NMBAs) used in general anaesthesia.

Local guidance

3. Formulary update- IQoro (Non-formulary) [Link](#)

Locally, there has been a recent increase in interest in the IQoro neuromuscular training device to reduce symptoms related to hiatus hernia. Whilst the product has been subject to a NICE MedTech briefing (MIB176) there is no robust evidence to recommend this device on prescription at this time. The MedTech briefing suggests that most patients purchase their own devices should they wish to use it.

4. Prescribing resources on HIOW ICS website [Link](#)

A collation of useful links to local and national prescribing / pharmacy resources is now hosted on the Hampshire and Isle of Wight Integrated Care System website. See link above.

National guidance

5. NHS England: What is a biosimilar medicine? [Link](#)

This NHSE guidance supports the safe, effective and consistent use of biosimilar medicines; new biological medicinal products developed to be similar to existing biological medicines.

A biosimilar medicine (known as a 'biosimilar') contains a version of an active substance of an approved biological medicinal product, known as the reference product. Biological medicines are used to treat many conditions including cancers, diabetes, arthritis, psoriasis, neutropenia and enzyme or hormone deficiencies.

Where a biosimilar is available, prescribers and patients are encouraged to have a shared decision-making conversation as part of their medicines review to consider using the biosimilar. This applies to both new patients and those who are already receiving the reference product.

6. NHSE: National primary care clinical pathway for constipation in children [Link](#)

This guidance supports clinicians in the prevention and management of constipation in children and young people by providing a clear and standardised approach, based on guidelines from NICE, the BNFC and clinical expert groups. Other resources also available to watch or download.

NICE guidelines

7. Urinary tract infections in adults – update to NICE Quality Standard [Link](#)

The NICE quality standard on urinary tract infections (UTIs) in adults (QS90) was updated on 15th February 2022, following new guidance on antimicrobial prescribing for UTIs.

Key recommendations are as follows:

- Women aged under 65 years are diagnosed with a urinary tract infection if they have 2 or more key urinary symptoms (dysuria, new nocturia, or cloudy urine) and no other excluding causes or warning signs.
- Adults with indwelling urinary catheters do not have dipstick testing to diagnose UTIs. Catheters quickly become colonised with bacteria and give a positive dipstick result. However, this does not indicate that the bacteria are causing an infection in the bladder or kidneys.
- Men and non-pregnant women are not prescribed antibiotics to treat asymptomatic bacteriuria. Unnecessary antibiotic treatment of asymptomatic bacteriuria is associated with increased risk of adverse events and is of no clinical benefit.
- 3-day courses are sufficient for treating uncomplicated lower UTI in non-pregnant women and minimise risk of adverse events and of antimicrobial resistance.

- Men and pregnant women with an uncomplicated lower UTI are prescribed a 7-day course of antibiotics. Men are more at risk of complications from UTIs than women due to anatomical differences and possible outflow obstruction. Pregnant women are at greater risk of harm from a UTI than non-pregnant women.
- Men with a recurrent UTI, and women with a recurrent lower UTI where the cause is unknown, or a recurrent upper UTI are referred for specialist advice. Repeated antibiotics without identifying the underlying cause risks missing alternative conditions that may be causing the symptoms and could result in more resistant infections.

Practices are able to monitor their prescribing of antibiotics via [PrescQIPP](#), [ePACT2](#), [PHE Fingertips Data](#) and [OpenPrescribing](#).

PrescQIPP has also released a new Antimicrobial Stewardship bulletin (February 2023). Registration to access PrescQIPP resources (free to HIOW ICS) will be required [Link](#)

Those already registered with PrescQIPP may access the new bulletins here [Link](#)

If you need help accessing any of these resources, please contact your local Medicines Optimisation Team. [Link](#)

8. Semaglutide for managing overweight and obesity – New guidance (TA875) [Link](#)

NICE recommends semaglutide as an option for weight loss alongside a reduced-calorie diet and increased physical activity in adults with ≥ 1 weight-related comorbidity and a BMI $\geq 35\text{kg/m}^2$ or $30\text{-}34.9\text{ kg/m}^2$ and meet the criteria for referral to specialist weight management services.

This will be discussed at the next HIOW Prescribing Committee and further information will follow. It is to be prescribed through specialist services only and not via primary care.

Other

9. SPS- Medicine Supply Tool

NHS Specialist Pharmacy Services (SPS) provide a free online tool to provide up-to-date information on current medicines supply issues. The tool allows searches for information by drug class, severity of issue, and by new, ongoing, or resolved issues. The data also includes when a medicine is expected to be back in stock.

Accessing the tool requires registration with the SPS website with a nhs.net email address. It has been developed by the Department of Health and Social Care and NHSE/I in conjunction with SPS. See link to register for SPS access: [Link](#)

10. Inuman® products discontinued [Link](#)

Inuman products are to be discontinued. Please refer to the link above for up-to-date information on affected products and dates of discontinuation. Please do not initiate new patients on these products.

For advice regarding alternative products then please refer to the SPS Medicines Supply Tool, available through free registration on the SPS website, as detailed above, or if already registered via this [Link](#)

11. New patient materials to support practice referrals to community pharmacists [Link](#)

New materials to support referrals from general practice for a minor illness consultation under the Community Pharmacist Consultation Service (CPCS) are now available. The communication materials have been designed to help practice teams and ICBs explain to patients why they **are** being offered a consultation with a community pharmacist and what to expect from it, to increase confidence in the referral process.

The digital materials were tested by practices – who found them a useful resource when making referrals. They include a patient leaflet and easy read version, poster, digital display screen, social media images and accompanying text and a briefing sheet that explains how to use them.

12. AWTTTC: Polypharmacy in older people: a guide for healthcare professionals [Link](#)

All Wales Therapeutics and Toxicology Centre (AWTTTC) have produced a useful polypharmacy medication review document which includes practical guides for stopping antihypertensives, benzodiazepines and Z-drugs, oral corticosteroids, antidepressants, bisphosphonates, acid suppressants, opioids in non-cancer pain, gabapentinoids in neuropathic pain, and antipsychotics, AChE inhibitors and memantine in dementia.

13. PSNC: New regulations to accompany the introduction of HRT prepayment certificates (HRT PPCs) [Link](#)

From 1st April 2023, patients who usually pay for their HRT prescriptions will be able to purchase an annual HRT PPC for the cost of two single prescription charges (currently £18.70). The HRT PPC, valid for 12 months, can be used against any of the listed HRT prescription item(s) licensed for the treatment of menopause. See [Link](#) . The list of eligible HRT medicines will also be published in the April 2023 Drug Tariff.

The Pharmaceutical Services Negotiating Committee (PSNC) have raised the issue that these new regulations give pharmacists facing mixed prescriptions (HRT and another medication) the following options:

- Request two separate prescriptions from GP;
- dispense either HRT or other item as paid or
- dispense both HRT and other item and claim a refund using FP57 refund form.

Further advice from the DHSC and supplementary advice from the PSNC is anticipated shortly.

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Previous bulletins can be found hosted on the ICS website here: [Link](#)

