

UPDATED

Bedfordshire and Luton Joint Prescribing Committee (JPC) Newsletter March 2021, Number 83

Summary of Key Recommendations – 17th March 2021 JPC meeting

(For full details of Joint Formulary additions / amendments – see separate Formulary Newsletter- (<u>Click here</u>)

Bedfordshire Clinical Commissioning Group Luton Clinical Commissioning Group

New BLMK Medicines Management Team Website hosting JPC Documents

Exciting News! We are delighted to announce, as we move towards more joined up working, that the BLMK Medicines Management Team has a new website:-

https://medicines.blmkccg.nhs.uk/

All JPC papers (e.g. bulletins, pathways, guidelines) can be found on the new website and unless otherwise stated, the new/updated documents referred to within the Newsletter will shortly be available on this website. The GPref website and Microguide have been retired, will not be updated and should not be used. The new website has a great search function, is very dynamic and under our control, therefore we really would welcome feedback from users on a continuous basis of ways in which we can make it even more useful. Please contact either <u>Samantha.scholes@nhs.net</u> (Website Manager) or <u>Sandra.McGroarty@nhs.net</u> (Pharmacist Clinical Lead for Website) if you have any feedback.

TREATMENT / PRESCRIBING GUIDELINES

Antimicrobial Guideline Update

Update to 'Introduction' section of the guideline

The introduction section had been updated to include reference to the interaction between DOAC's and macrolides as highlighted by a recent Drug Safety Update.

Bites and Stings

NICE have published new guidelines relating to antimicrobial prescribing in bites and stings. This section has therefore been re-written and includes the following major changes:-

- Addition of a comment regarding insect bites and stings.
 - The introduction of antibiotic prophylaxis for <u>uninfected</u> bites and a decision aid to support prescribing decisions.
- Reduction in duration of recommended course lengths. Treatment courses are now 5 days and prophylactic courses are now 3 days

Fungal Infections

The fungal infection section has not been updated for several years and has now been updated in line with NICE CKS advice.

Major changes from previous version:

• Removal of the option to manage tinea pedis with Mycota (Undecenoic acid)

- Change in advice regarding co-prescription of topical agents with oral treatment to prevent transmission in tinea capitis.
- Addition of criteria where oral antifungal treatment can be considered in the management of • onvchomvcosis.
- Addition of using a topical corticosteroid for treatment of tinea capitis where there is significant inflammation.

SECONDARY CARE PRESCRIBING / COMMISSIONING ISSUES

Subcutaneous (s/c) Infliximab (Biosimilar)

The JPC previously agreed to support the introduction of s/c infliximab as a temporary addition to the Joint Medicines Formulary to assist the Bedfordshire Hospitals NHS

Foundation Trust in reducing pressure on hospital attendance during the Covid 19 pandemic. The current situation was reviewed at the March 2021 JPC meeting and it was agreed to extend the temporary inclusion of s/c infliximab on the Joint Medicine Formulary, with a new review date of June 2021.

Crohn's Disease Pathway

The pathway has been updated to provide clarity on the current local commissioning position with regards to anti TNF dose escalation.

Psoriatic Arthritis (PsA) Treatment after inadequate response to **DMARDs)-** Pathway Update

The major changes to the existing pathway were:-

- Simplification of the flow chart including removal of most of the information on co-morbidities (this information will be retained as an internal Trust document) and amalgamation of first line treatment options.
- Allowing the use of additional third line options aside from ustekinumab +/- methotrexate.
- Allowing three lines of therapy for patients who receive ustekinumab as a first line treatment.

Rheumatoid Arthritis Treatment Pathway Update (Algorithm A)

NICE have published a positive TA for the use of Filgotinib as a treatment option for patients with moderate rheumatoid arthritis (i.e. a DAS $28 \ge 3.2$ and ≤ 5.1 . This is the first NICE TA providing a treatment option for moderate disease as the other NICE TAs for biologics and JAK

inhibitors all relate to the use for treating severe disease only. The Rheumatoid Arthritis Treatment Pathway (Algorithm A) has been updated to incorporate filgotinib as a treatment option for both moderate disease and severe disease.

Local specialists have confirmed that filgotinib will be considered as a treatment option for patients with moderate disease and the patient will be informed that if an adequate response is not achieved then treatment options will revert back to standard conventional DMARDs as progression to the biologic and other JAKi treatment options is not be possible unless the DAS score is > 5.1.

Filgotinib will be prescribed via the hospital homecare, system with no GP prescribing.

Hyperhidrosis Policy and Interim Iontophoresis Commissioning **Statement**

Following an update of the Hyperhidrosis Priorities Forum statement (originally issued April 2017), the committee agreed to retire the previous Hyperhidrosis JPC bulletin (No 251) and to incorporate the latest Hyperhidrosis Priorities Forum statement within the wider JPC Botulinum Toxin Bulletin.

As a result of a review on the current local provision of iontophoresis machines, an interim Bedfordshire, Luton and Milton Keynes commissioning statement has been produced and was supported by the JPC as follows:



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• a patient is not required to have tried iontophoresis prior to being eligible to receive botulinum toxin for the treatment of axillary or palmar/plantar hyperhidrosis.

The interim commissioning statement is in place pending a review of provision of lontophoresis machines by CCG Planned Care regarding access to lontophoresis machines.

NICE TECHNOLOGY APPRAISAL GUIDANCE and GUIDELINES ISSUED / UPDATED The following NICE Technology Appraisal Guidance (CCG Commissioned) have been published during the period 19th November 2020 to 10th March 2021 inclusive :-Liraglutide for managing overweight and obesity, Technology appraisal guidance [TA664] Published date: 09 December 2020 https://www.nice.org.uk/guidance/ta664 Specialist use only ; No GP Prescribing Upadacitinib for treating severe rheumatoid arthritis, Technology appraisal guidance [TA665] Published date: 09 December 2020 https://www.nice.org.uk/guidance/ta665 - Specialist use only ; No GP Prescribing Brolucizumab for treating wet age-related macular degeneration, Technology appraisal guidance [TA672] Published date: 03 February 2021 https://www.nice.org.uk/guidance/ta672 Specialist use only; no GP prescribina Filgotinib for treating moderate to severe rheumatoid arthritis, Technology appraisal guidance [TA676] Published date: 24 February 2021 https://www.nice.org.uk/guidance/ta676 Specialist use only ; no GP Prescribing Dapagliflozin for treating chronic heart failure with reduced ejection fraction Technology appraisal guidance [TA679] Published date: 24 February 2021 https://www.nice.org.uk/guidance/ta679 Specialist initiation with GP to continue prescribing Baricitinib for treating moderate to severe atopic dermatitis Technology appraisal guidance [TA681] Published date: 03 March 2021 https://www.nice.org.uk/guidance/ta681 Specialist use only ; no GP Prescribing Erenumab for preventing migraine, Technology appraisal guidance [TA682] Published date: 10 March 2021, https://www.nice.org.uk/guidance/ta682 Specialist use only; no GP Prescribing

NICE Guidelines :-

NICE have published several NICE Guidelines since November 2020 and these are all available on the main <u>NICE website</u>

NICE COVID-19 Rapid Reviews/Information

The Committee noted that NICE have continued to issue/update a series of covid 19 rapid reviews/information:this information can be accessed from the NICE website <u>click here</u>

DRUG SAFETY UPDATES (DSU) AND PATIENT SAFETY ALERTS

The MHRA Drug Safety Updates for December 2020, January and February 2021 were noted by the Committee for information and action.

December DSU

- Systemic and inhaled fluoroquinolones: small risk of heart valve regurgitation; consider other therapeutic options first in patients at risk
- Erythromycin: caution required due to cardiac risks (QT interval prolongation); drug interaction with rivaroxaban
- Erythromycin: update on known risk of infantile hypertrophic pyloric stenosis

January DSU

- Antiepileptic drugs in pregnancy: updated advice following comprehensive safety review
- COVID-19 vaccines (Pfizer/BioNTech and COVID-19 Vaccine AstraZeneca): current advice
- Dimethyl fumarate (Tecfidera): updated advice on the risk of progressive multifocal leukoencephalopathy (PML) associated with mild lymphopenia
- Fingolimod (Gilenya ▼): updated advice about the risks of serious liver injury and herpes meningoencephalitis
- SSRI/SNRI antidepressant medicines: small increased risk of postpartum haemorrhage when used in the month before delivery
- Aminoglycosides (gentamicin, amikacin, tobramycin, and neomycin): increased risk of deafness in patients with mitochondrial mutations

February DSU

- Ulipristal acetate 5mg (Esmya): further restrictions due to risk of serious liver injury. (NB Local Formulary status: - This is currently Non-Formulary (as there had been a temporary suspension of the licence). This is a hospital only drug; No GP prescribing
- Alkindi (hydrocortisone granules): risk of acute adrenal insufficiency in children when switching from hydrocortisone tablet formulations to granules
- Pregabalin (Lyrica): reports of severe respiratory depression
- Medicines in pregnancy and breastfeeding: new initiative for consistent guidance; report on optimising data for medicines used during pregnancy
- COVID-19 vaccines and medicines: updates for February 2021

Additional Papers / issues considered by the Committee

BLMK Area Prescribing Committee (Next Steps)

From 1st April 2021, Bedfordshire, Luton and Milton Keynes CCGs will merge. As a result of this merger, an Area Prescribing Committee (APC) will be created (replacing the existing JPC and MKPAG committees). The chair of the newly formed BLMK APC and the committee members will be appointed shortly. The meeting chair will be a non-clinical role and membership of the committee will largely mirror that of JPC/MKPAG.

In addition to the APC there will be a set of subgroups (advisory, not decision making):-

- Formulary Group
- Wound Care Group
- Medication Safety Group

It is hoped that the first scheduled BLMK APC meeting will be held in June 2021.

Insulin Paper from ELFT

The paper came to the Committee for information only.

Cost-effective Melatonin Preparation

The Committee was advised that a new, more cost-effective melatonin preparation, Cyesto® 3mg Tablets – will be available in May 2021. The initial licence is for jet lag with the insomnia licence to follow.

OTHER NEWS

Use of Scriptswitch/Optimise Rx

To further enhance the communication of BLMK APC advice to GPs, the BLMK CCG medicine management team are actively reviewing the messages on NetFormulary, Scriptswitch and Optimise Rx to highlight when BLMK APC guidance is available and including a hyperlink to the BLMK Medicines Management website.

Contact Us:- Zacqueline.clayton@nhs.net and sandra.mcgroarty@nhs.net