

### Medicines Formulary Assessments

**Febuxostat and colchicine for gout** are now Green on the Formularies and can be prescribed without specialist input in Primary care:

NICE NG219 guidance for management of gout was published in June 2022. The recommendations included febuxostat as joint first line therapy for treatment of gout alongside allopurinol. Healthcare professionals are advised to avoid treatment with febuxostat in patients with pre-existing major cardiovascular disease (e.g. myocardial infarction, stroke, or unstable angina), unless no other therapy options are appropriate, in line with [MHRA alert](#).

**Mefenamic acid capsules** are now Green on the Formularies (previously Amber/Amber2) for short term use to treat menorrhagia and dysmenorrhoea in patients who require a reduction in blood flow. NB: The tablets remain Non-Formulary.

**Trurapi biosimilar insulin aspart** was added to the Formularies (Green) as a cost-effective choice alongside Novorapid. The interim decision for rapid implementation by exception was driven by a Novorapid shortage which has now resolved. Trurapi represents a 30% cost saving vs Novorapid and therefore should be considered for initiation first line in new patients, with opportunistic switching of existing patients where appropriate. When switching, please counsel patients to monitor glucose levels more closely in the initial weeks as some may respond differently to the biosimilar.

**Softacort (hydrocortisone) preservative free eye** drops were added to the Formularies for the treatment of dry eye. The product has a lower impact on intraocular pressure vs prednisolone through a reduction in corneal penetration. Initiation is via specialist (Amber/Amber3) with continuation in Primary Care. Please ensure a stop date is included on the prescription.

**Ethinylestradiol 30 mcg / drospirenone 3 mg tablets for contraception** are now Green on the Formularies. Available brands include Yinzell, Lucette and Yasmin—please prescribe the most cost-effective product by brand name (advised via Optimise Rx/Scriptswitch). Due to differences in excipient content not all products are suitable for patients with peanut allergy.

**Hypromellose 0.3% eye drops** were removed from the Drug Tariff, resulting in a high cost increase for prescribing as an unspecified item (circa £30 a bottle). Prescribe Evolve brand as the cost-effective Formulary choice.

A reminder that prescribing of **Norditropin FlexPro** and **NordiFlex** pre-filled pen is restricted to secondary care (no GP prescribing). Existing patients only may remain in Primary Care setting.

**Dexcom ONE** and **GlucoRx Aidex** real-time continuous glucose monitoring (rtCGM) have been added as the preferred devices (Amber/Amber3) which may be continued in primary care following specialist initiation and stabilisation.

### Products not added and minor amendments

- **Fixkoh Airmaster inhaler** for asthma and COPD was assessed and not added to the Formularies.
- **Ephedrine 0.5% nasal drops** are no longer listed in the Drug Tariff as a prescribable item. The Formularies have therefore been updated to indicate this product is a self-care item (purchase over the counter).
- **Flurbiprofen** and **canakinumab** were removed from the Formularies as there is no prescribing of either in BLMK.

The **Shared Care Guidance** for [Denosumab](#) and for Azathioprine/mercaptopurine\* have been updated. \*Publication pending

**Is there a medicine you would like added to the Bedfordshire, Luton and Milton Keynes Joint Formulary?**

Email us via [blmkicb.medsopt@nhs.net](mailto:blmkicb.medsopt@nhs.net) to discuss how

