



Bedfordshire, Luton and Milton Keynes Area Prescribing Committee (BLMK APC) Newsletter Number 14, May 2024

Welcome to the May 2024 BLMK Area Prescribing Committee newsletter. This newsletter contains a summary of the key recommendations, and reflects the output from, the BLMK APC meeting held on 1st May 2024.

For full details of Joint Formulary additions / amendments – see separate <u>April 2024 Formulary Newsletter</u>

Click <u>here</u> to access the Bedfordshire & Luton Joint Formulary Click <u>here</u> to access the Milton Keynes Joint Formulary

BLMK Medicines Optimisation Team Website

All current, approved BLMK APC documents are available on the BLMK Medicines website (current documents, that were previous approved by the JPC/MKPAG*, can also be found on the website, where applicable).

Medicines Optimisation Team website: https://medicines.bedfordshirelutonandmiltonkeynes.icb.nhs.uk/

Searching the website:

All documents referred to within this newsletter (where appropriate) will be available shortly on the website.

The website has an easy to use search function which should make it easy to find the information you are looking for. If you have trouble searching the website or if you have any comments / suggestions, please do let us know - contact either <u>samantha.golton@nhs.net</u> (Website Manager) or <u>sandra.mcgroarty@nhs.net</u> (Website Pharmacist Clinical Lead).

*Bedfordshire and Luton Joint Prescribing Committee (JPC) / Milton Keynes Prescribing Advisory Group (MKPAG)

The following organisations contribute to and participate in the BLMK APC – Bedfordshire, Luton and Milton Keynes Integrated Care Board; Bedfordshire Hospitals NHS Foundation Trust; Cambridgeshire Community Services NHS Trust; Central and North West London NHS Foundation Trust; East London NHS Foundation Trust; Milton Keynes University Hospital NHS Foundation Trust

TREATMENT / PRESCRIBING GUIDELINES

BLMK Contraception guidance

New contraception guidance and emergency contraception guidance has been developed to support primary care clinicians when making recommendations and choices for contraception. Formulary choices have been reviewed and amendments made in line

with current recommendations and cost-effective prescribing choices. In addition, drospirenone has been added, as a second line choice of progestogen only contraceptive pill, with SpIS traffic light designation (see formularies for full details).

Continence appliance prescribing guidelines

The <u>continence appliance prescribing guidelines</u> have been reviewed and updated as a collaborative piece of work by Community Services across BLMK. The recommended products reflect current availability, new advances and cost-effectiveness of the available products. The guidelines are for use across Bedfordshire, Luton and Milton Keynes.

Icosapent ethyl for reducing the risk of cardiovascular events in people with raised triglycerides

Icosapent ethyl is recommended, in NICE TA805, as a treatment option for patients with a high risk of cardiovascular events and raised fasting triglycerides (1.7 mmol/litre or above) and are taking statins, but only if they have established cardiovascular disease (secondary prevention). The Committee agreed to introduce an additional non-fasting triglyceride level of 2 mmol/litre or above, as an alternative to fasting triglycerides of \geq 1.7 mmol/litre, to facilitate improved access to treatment in BLMK.

SECONDARY CARE PRESCRIBING / COMMISSIONING ISSUES

Intravitreal injection ophthalmology algorithm

The BLMK algorithm for intravitreal injections used in ophthalmology has been updated to include new NICE TA recommenations on the use of the flucocinolone intravitreal implant, and to include the new formulation of aflibercept intravitreal injection (8mg dose).

Ulcerative colitis pathway update

The treatment pathway for moderate to severe Ulcerative Colitis after failure of conventional therapy has been updated to incorporate new NICE TA recommendations on etrasimod. In addition, minor amendments have been made to formatting and to improve clarity in the guidance for the treatment options when switching therapies.

NEW **GUIDANCE**

UPDATED

NEW **GUIDANCE**

UPDATED and extended

across

BLMK ICS





MEDICINES SAFETY DRUG UPDATES (DSU) AND PATIENT SAFETY ALERTS

The APC received a Primary Care Medicines Safety Update and an update from the BLMK ICS Medicines Safety Group (MSG).

This update focussed on the primary care response to the MHRA Drug Safety Updates (<u>January</u>, <u>February</u> and <u>April</u> 2024). In particular:

Omega-3-acid ethyl ester medicines (Omacor/Teromeg 1000mg capsules): dose-dependent increased risk of atrial fibrillation in patients with established cardiovascular diseases or cardiovascular risk factors (January 2024)

Action(s) taken: Link added to formularies. There is low local use of these medicines, as they are medicines of low clinical value (NB: local exception is: approved use for the treatment of severe hypertriglyceridaemia, for the prevention of acute pancreatitis).

Fluoroquinolone antibiotics: must now only be prescribed when other commonly recommended antibiotics are inappropriate (January 2024)

Action(s) taken: Link added to formularies. Actions being undertaken via the Antimicrobial Stewardship group and also within providers. Providers have reviewed their guidance and moved fluoroquinolones to second line within their antimicrobial guidelines where possible. Use for urological indications remains first line.

Valproate (Belvo, Convulex, Depakote, Dyzantil, Epilim, Epilim Chrono or Chronosphere, Episenta, Epival, and Syonell ♥): new safety and educational materials to support regulatory measures in men and women under 55 years of age (January 2024)

Action(s) taken: Link added to formularies. The BLMK valproate subgroup is reviewing this in detail. Good progress is being made within primary care and providers on producing governance policies.

Potential contamination of some carbomer-containing lubricating eye products with Burkholderia cenocepacia - measures to reduce patient risk (updated April 2024)

The recommendations issued in December 2023 to 'avoid the use of all carbomer-containing eye products in individuals with cystic fibrosis, patients being cared for in critical care settings, the severely immunocompromised and patients awaiting lung transplantation' is no longer required and has been stepped down. There is no longer an indication to avoid use of these products (aside from those that have been previously recalled).

National update - new Royal Pharmaceutical Society standards

New standards have been produced by the Royal Pharmaceutical Society (RPS) <u>Patient safety professional</u> standards responding to patient safety incidents 2024-270324-B.pdf (rpharms.com).

ANTIMICROBIAL RESISTANCE UPDATE

The antimicrobial resistance (AMR) group has reviewed prescribing data from primary and secondary care. It was noted that, whilst practices are meeting the target for the prescribing of broad spectrum antibiotics, further work needs to be done to achieve the targets for total antibiotic prescribing, amoxicillin 500mg 5-day course prescribing and prescribing of antibiotics in children and young people.

Reminder: A new BLMK antibiotics guidelines website has been developed, which may be accessed <u>here</u>.

NICE TECHNOLOGY APPRAISAL GUIDANCE and GUIDELINES ISSUED / UPDATED

The following NICE Technology Appraisal Guidance (ICB Commissioned) have been published during the period 15 February until 17 April 2024 inclusive:

Etrasimod for treating moderately to severely active ulcerative colitis in people aged 16 and over Technology appraisal guidance Reference number: TA956 Published: 11 March 2024 <u>https://www.nice.org.uk/guidance/ta956</u> (added to formularies with **RED** traffic light status).

Nirmatrelvir plus ritonavir, sotrovimab and tocilizumab for treating COVID-19 Technology appraisal guidance Reference number: TA878 Published: 29 March 2023 Last updated: 13 March 2024 <u>https://www.nice.org.uk/guidance/ta878</u> (on formularies with the following traffic light statuses: Nirmatrelvir plus ritonavir – **GREEN**; Sotrovimab: **RED**; Tocilizumab: **RED**.

Fluocinolone acetonide intravitreal implant for treating chronic diabetic macular oedema Technology appraisal guidance Reference number: TA953 Published: 13 March 2024 <u>https://www.nice.org.uk/guidance/ta953</u> (NB: replaces NICE TA301 and TA613; on formularies with **RED** traffic light status).

Dupilumab for treating moderate to severe prurigo nodularis Technology appraisal guidance Reference number: TA955 Published: 13 March 2024 <u>https://www.nice.org.uk/guidance/ta955</u> - NOT RECOMMENDED.

Ritlecitinib for treating severe alopecia areata in people 12 years and over Technology appraisal guidance [TA958] Published: 27 March 2024 <u>https://www.nice.org.uk/guidance/ta958</u> (added to formularies with **RED** traffic light status).

<u>Click here</u> to access **all** technology appraisal guidelines - ICB and NHSE Commissioned (15 February until 17 April 2024 inclusive)

NICE Guidelines:

NICE have published several NICE Guidelines since February 2024 - <u>click here</u> to access these guidelines.

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>

ADDITIONAL PAPERS / ISSUES CONSIDERED BY THE COMMITTEE

Access to treatments for Covid-19

BLMK ICB has commissioned the Milton Keynes Urgent Care Service to provide the Covid Medicines triage and prescribing service for the 2024/25 financial year. There is no expectation that GP practices, NHS 111 or secondary care should prescribe for non-hospitalised patients testing positive for Covid 19. The BLMK ICB Ardens template on SystmOne has been updated to include the new cohorts from June 24, and a template letter, which includes a direct referral into the triage service via telephone or e-mail, and care home pathway have been developed to support access to treatment for the new cohorts (see <u>NICE TA878</u>).

Further information may be found <u>here</u>.

NHS England clinical policies: Gender Dysphoria in children and you people

NHS England has recently published two clinical policies in relation to gender incongruence/gender dysphoria in children and young people:

- **Puberty suppressing hormones (PSH):** PSH are not available as a routine commissioning treatment option for treatment of children and young people who have gender incongruence / gender dysphoria. Click <u>here</u> to access the policy.
- **Gender affirming hormones (GAH):** GAH (masculinising or feminising hormones) are available as a routine commissioning treatment option for young people with continuing gender incongruence / gender dysphoria from around their 16th birthday subject to individuals meeting the eligibility and readiness criteria. Click <u>here</u> to access the policy.

Existing local <u>guidance</u> that primary care clinicians should not prescribe GAH in children and young people remains in place.

BLMK APC 2024 FUTURE MEETING DATES

Wednesday 3rd July 2024 Wednesday 25th September 2024 Wednesday 4th December 2024

OTHER NEWS

Use of Scriptswitch/Optimise Rx

To further enhance the communication of BLMK APC advice to GPs, the BLMK ICB medicines optimisation team are actively reviewing the messages on NetFormulary and Optimise Rx to highlight when BLMK APC guidance is available and including a hyperlink to the <u>BLMK Medicines Optimisation</u> website. Please advise us if you notice any issues.

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