Bedfordshire, Luton and Milton Keynes Health and Care Partnership

BLMK Wide Joint Formularies Newsletter

NHS

April 2025

Xonvea® audit feedback - **Amber SpIS**

Xonvea® is an enteric coated tablet containing the antihistamine doxylamine (10mg) and the prodrug of Vitamin B6, pyridoxine (10mg). It is currently the only UK licensed product for treating nausea and vomiting in pregnancy and is one of the first line treatment options recommended by the Royal College of Obstetricians and Gynaecologists (RCOG) . The NICE Clinical Knowledge Summary for nausea and vomiting in pregnancy was updated based on the RCOG recommendations to include Xonvea®. The guidance states that there are no clear data supporting increased efficacy of one class of antiemetic over another and Xonvea® represents a significant cost pressure in comparison to the alternatives. BHFT audited the use of Xonvea®. The prevention in admissions would provide a significant cost saving. It was agreed for Xonvea® to move from a red formulary status to SpIS. A link to the RCOG guidance is to be added to the discharge or outpatient letters, and has also been added to the formulary to support primary care prescribers. There will be a clear route back if hyperemesis gravidarum or nausea and vomiting persists. The Bumps website includes medication summaries with safety profiles and women can be signposted to online support such as the HER Foundation.

Bupropion for refractory depression and prescribing guide - Amber SpIS

Bupropion has a unique mechanism of action in which it appears to increase dopamine and norepinephrine turnover in the CNS. Advantages include the fewer sexual or cardiac side effects. This is an unlicensed treatment option, however The Maudsley prescribing guidelines in psychiatry recommends bupropion as monotherapy or augmentation treatment with SSRIs for those with refractory depression. Bupropion was approved for addition to the formularies as SpIS, for refractory depression after licensed options have been explored by the specialist. Patient numbers will be low and are more likely to remain under specialist care. A supporting bupropion prescribing guide was approved with information on an MHRA alert on the risk of serotonin syndrome with other serotonergic drugs.

Proxor 100/6 & Proxor 200/6 pMDI - **Green**

Proxor is a pressured metered dose inhaler containing beclomethasone and formoterol and is equivalent to Fostair® and Luforbec®. Proxor is significantly more cost effective and was approved as the first choice beclomethasone and formoterol pMDI for patients unable to use a dry powder inhaler. Patients stable on Luforbec® do not need to be switched.

Felodipine MR Delofine XL ® **- Green**

The first line calcium channel blockers recommended on our formulary are amlodipine and lercanidipine. However, there is significant prescribing of felodipine MR and a switch to the brand Delofine XL® could release savings. Delofine XL was approved for addition to the formularies as a second line option.

Estring® - Amber SpA

Estring® is a vaginal ring releasing 7.5 micrograms estradiol over 24 hours and is licensed for atrophic vaginitis in post-menopausal women.

It is an alternative option to the cream and pessary for patients that struggle with administration due to dexterity issues or conditions such as dementia as it only requires insertion every 3 months. Prescribing is expected to remain low as an option in a select group of patients.

Aminosalicylates review - Amber SpA (sulfasalazine preparations to remain **Amber SpIS**)

A therapeutic class review was undertaken to rationalise and align product choices. Options dependent on the location of the active disease, cost-effectiveness, and resilience when supply is disrupted have been selected. NICE recommends use of once daily maintenance dosing, but patients may experience increased side effects. The high dose formulations can be of value in patients needing to reduce tablet burden. Any switching needs to ensure patients are supported in monitoring for any changes in tolerability and symptom control with specialist review recommended for complex cases.

Ketamine use in palliative care - Red

A shared care guideline has been in place for Bedfordshire and Luton but ketamine has a red formulary status in Milton Keynes. As only two patients were prescribed it in the last year, it was agreed that the SCG for ketamine should be retired.

Standalone CGM (continuous glucose monitoring) guidance update - **Red**

Freestyle Libre (FSL) 3+ has been launched, as an upgrade from Freestyle Libre 3. FSL2+ is the clear market leader with a lower acquisition cost. As a standalone CGM, the only significant advantage of FSL3+ over FSL2+ is that it is smaller and would be better for children under 12 with a small limb size. Therefore, FSL3+ was approved as a standalone CGM for type 1 diabetic patients under 12 years

Self-care formulary status

SELF A self-care symbol has been added to both formularies for items that should be purchased over the counter but may be prescribed for chronic long-term conditions or on admission to hospital.

The following organisations contribute to and participate in the BLMK APC Formulary Subgroup – 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.