



Bedfordshire, Luton and Milton Keynes Area Prescribing Committee (BLMK APC)

Newsletter Number 20, July 2025

Welcome to the July 2025 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 2nd July 2025.

For full details of Joint Formulary additions / amendments – see separate June 2025 Formulary Newsletter

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 previously approved by the JPC/MKPAG*, can also be found on the website, where applicable).

Medicines Optimisation Team website:

https://medicines.bedfordshirelutonandmiltonkevnes.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 samantha.golton@nhs.net (Website Manager) or sandra.mcgroarty@nhs.net (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

Chronic Kidney Disease Treatment Pathway

NEW **GUIDANCE**

A new BLMK treatment pathway to support primary care clinicians managing patients with chronic kidney disease (CKD) has been developed. The document includes guidance on managing patients both with, and without, type 2 diabetes including key actions to be undertaken in the first 3 months to save lives.

Stoma Accessories Formulary and Agreed Fair usage Guideline

NEW GUIDANCE

Following the launch of the BLMK-wide stoma prescribing service in June 2023, a new stoma accessories formulary and agreed fair usage guideline has been developed to ensure consistency of prescribing between the local stoma nurses and the provider of the stoma prescribing service.

Glucocorticoid-induced Osteoporosis guidelines

NEW GUIDANCE

The guidance on the management of glucocorticoid-induced osteoporosis has been separated out from the main osteoporosis guidelines into a standalone document. The document provides recommendations on treatments and management of patients on steroids, and compliments the main osteoporosis guideline.

Shared care principles and updated template

NEW / **UPDATED DOCUMENTS**

The BLMK shared care quideline (SCG) template has been updated to provide a clearer, simpler layout to support the revision and update of existing SCGs, and the development of new SCGs. Alongside the updated template, BLMK Principles for Shared Care have been developed.

Additional guidelines updated / uploaded to the website

WEBSITE UPDATES

The <u>primary care antimicrobial prescribing guidelines</u> have been updated to included a link to the guidance on the management of recurrent lower UTIs in adults.

SHARED CARE GUIDELINES

The following shared care guidelines have been agreed and uploaded to the Medicines Optimisation website:

NEW / UPDATED SHARED CARE **GUIDELINES**

The 2025 Tavistock & Portman NHS Trust gender identity clinic (GIC) shared care guidelines for transmen and transwomen have been ratified for use in BLMK. Please note: the SCGs contain a GP/primary care clinician acceptance form (appendix iii). On agreement to shared care, the GP/primary care clinician should sign this acceptance letter and return to the GIC (NB This is different to normal BLMK shared care practice).

WOUND CARE FORMULARY UPDATES

The following amendments have been made to the wound care formularies:

- Following the update of the contraindications and precautions for use for Inadine dressings, Inadine dressings have been removed from general procurement and are accessible on the restricted list for TVN use only.
- A new Burns section, and updated Diabetic Foot section, are currently in development.

FORMULARY ADDITIONS/ CHANGES/ UPDATES

Reminder: the wound management formularies have recently been migrated to a new website, **Eolas Medical**, which offers easier access to local guidelines as well as a host of other resources. An Eolas Medical app, with offline functionality, is also available.

NICE TECHNOLOGY APPRAISAL GUIDANCE and GUIDELINES ISSUED / UPDATED

The following NICE Technology Appraisal Guidance (ICB Commissioned) has been published during the period 24 April 2025 until 18 June 2025 inclusive:

Nirmatrelvir plus ritonavir, sotrovimab and tocilizumab for treating COVID-19 Technology appraisal guidance TA878 Published: 29 March 2023 Last updated: 01 May 2025 https://www.nice.org.uk/guidance/ta878 (on formularies with RED traffic light status).

Cenobamate for treating focal onset seizures in epilepsy Technology appraisal guidance TA753 Published: 15 December 2021 Last updated: 06 May 2025 https://www.nice.org.uk/guidance/ta753 (on formularies with Amber SpIS formulary status).

Linzagolix for treating symptoms of endometriosis Technology appraisal guidance TA1067 Published: 04 June 2025 https://www.nice.org.uk/guidance/ta1067 (added to formularies with Amber SpIS formulary status).

Spesolimab for treating generalised pustular psoriasis flares Technology appraisal guidance TA1070 Published: 18 June 2025 https://www.nice.org.uk/guidance/ta1070 (added to formularies with RED traffic light status).

<u>Click here</u> to access **all** technology appraisal guidelines - ICB and NHSE Commissioned (24 April 2025 until 18 June 2025 inclusive)

NICE Guidelines:

NICE have published several NICE Guidelines since April 2025 - click here to access these guidelines.

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 (March, April, May and June 2025). In particular:

Prolonged-release opioids: Removal of indication for relief of post-operative pain (March 2025) Increased risk of persistent post-operative opioid use (PPOU) and opioid-induced ventilatory impairment (OIVI). Actions taken: Linked to formulary for information. Local trusts are discussing the DSU with relevant committees / groups and clinicians to support the implementation of the recommendations, including reviewing Enhanced Recovery After Surgery (ERAS) protocols.

Fezolinetant ▼ (Veoza): risk of liver injury; new recommendations to minimise risk (April 2025)

Liver function should be monitored before and during treatment in all patients. Avoid in patients with known liver disease or at a higher risk of liver disease.

Actions taken: Linked to formulary entry for information (note: fezolinetant is non-formulary, pending NICE appraisal. The draft Technology Appraisal recommendations are negative).

Short-acting beta 2 agonists (SABA) (salbutamol and terbutaline): reminder of the risks from overuse in asthma and to be aware of changes in the SABA prescribing guidelines (April 2025)

Healthcare professionals and patients are reminded of the risk of severe asthma attacks and increased mortality associated with overuse of SABA with or without anti-inflammatory maintenance therapy in patients with asthma. Healthcare professionals should be aware of the change in guidance that no longer recommends prescribing SABA without an inhaled corticosteroid.

Actions taken: Overuse of SABAs has been reviewed by practices as part of the primary care prescribing incentive scheme last year with the potential to switch patients to MART (Maintenance and Reliever Therapy) or AIR (anti-inflammatory reliever) and this work in ongoing. ELFT has reviewed ePACT data for trends in SABA prescribing and no concerns have been flagged recently.

Medicines Safety Group (MSG) Update:

- NHSE identified Medicines Safety Priorities for 2024-2027. A survey will be sent out to the MSG to help prioritise the eight workstreams for local action. The aim of the medicines safety priorities is to reduce avoidable medication-related harm by 1/3 by 2027. The priorities are split into 3 areas:
 - Medication safety leadership approach (incorporating empowering the Medication Safety Officer workforce and increasing the reliable administration of time critical medicines).
 - Whole system approach (incorporating reducing harm in the following areas: opioid use in chronic pain, psychotropics in learning disability, falls-risk inducing drugs in frailty, and valproate taken in pregnancy).
 - Targeted approach (primary care) (incorporating reduced acute kidney injury induced polypharmacy, and optimising dosing of direct oral anticoagulants).
- **Valproate**: All providers are looking at producing a valproate policy. A referral process is in place for primary care into secondary care when it is identified that an annual review is required.
- **Topiramate**. Patient numbers in primary care by condition and age group have been obtained for baseline data. BHFT are planning to check the issuing of ARAF forms and this work will be shared with MKUH to ensure a systemwide approach is taken, involving mental health providers and health and justice. The audit in primary care will be re-run to determine the number of women of childbearing age on the pregnancy prevention programme and patients requiring referral, with percentage compliance.
- Timely administration of critical medicines (TCM). The Royal College of Emergency Medicine
 (RCEM) produced an advisory statement entitled "<u>Time critical medication self-administration in</u>
 emergency departments" in March 2025. These medications are time-critical because a delayed or
 missed dose can result in harm with exacerbation of symptoms and the development of complications
 leading to increased mortality if it continues. TCM lists and self-administration polices are being collated
 and providers are considering how patients can be supported in the timely administration of TCMs.

ANTIMICROBIAL RESISTANCE UPDATE

Prescribing rates for antibiotics in children in BLMK continues to be above target levels. Actions being taken on children's antibiotic prescribing include:

- · Practice staff training
- Public Health engagement
- Out of Hours engagement

Reminder: The BLMK antibiotics guidelines website may be accessed here.

ADDITIONAL PAPERS/ISSUES CONSIDERED BY THE COMMITTEE

The **BLMK Area Prescribing Committee 2024/25 annual report** was approved by the Committee. Click here to view the report.

BLMK APC 2025/26 FUTURE MEETING DATES

Wednesday 24th September 2025

Wednesday 3rd December 2025

Wednesday 4th March 2026

Wednesday 6th May 2026

Wednesday 1st July 2026

Wednesday 23rd September 2026

Wednesday 2nd December 2026

OTHER NEWS

Use of Optimise Rx

To further enhance the communication of BLMK APC advice to primary care presscribers, 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</u> <u>Optimisation website</u>. Please advise us if you notice any issues.

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