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Buckinghamshire, Oxfordshire
and Berkshire West
Integrated Care Board

BOB Medicines Optimisation Bulletin



This monthly newsletter is written by the Medicines Optimisation Team of the BOB Integrated Care Board and is intended for healthcare professionals and practice staff. If you have any questions or feedback, please contact the team via the email address: bobicb.medicines@nhs.net

Past editions of the bulletin can be found on the [SharePoint](#) website.

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National updates



National Patient Safety Alert: Shortage of salbutamol 2.5mg/2.5ml and 5mg/2.5ml nebuliser liquid unit dose vials

Following on from the Medicines Supply Notification (MSN), issued on 14 February 2024, detailing a shortage of salbutamol 2.5mg/2.5ml and 5mg/2.5ml nebuliser liquid, a [National Patient Safety Alert](#) has now been issued on 26 February 2024. The **resolution date is to be confirmed**.

The supply issues have been caused by a combination of manufacturing issues resulting in increased demand on other suppliers.

Terbutaline, salbutamol with ipratropium, and ipratropium nebuliser liquids remain available, however, they **cannot** support an increase in demand.

Ventolin® (salbutamol) 5mg/ml nebuliser liquid (20ml) is out of stock until mid-April 2024 and **cannot** support an increased demand after this date.

Unlicensed imports of salbutamol nebuliser liquid can be sourced. Information relating to imports was outlined in the MSN and is available on the [SPS Medicines Supply Tool](#) which also details any changes to resupply dates, updates to this communication and an up-to-date supply overview.

So what?

- See the [alert](#) for information regarding safety issue, actions required and clinical information. The actions should be completed as soon as possible and not later than **8 March 2024**. Failure to take the actions required under National Patient Safety Alerts may lead to CQC taking regulatory action.
- Primary care prescribers should review need for home nebuliser use, and if deemed necessary, determine if the patient has sufficient supplies of nebuliser liquid at home before issuing.
- All providers **must** liaise with local pharmacy team and place urgent orders and **do not** wait until supplies are exhausted before placing orders for imports.

New Regulatory Measures for oral valproate-containing medicines – Chief Medical Officers letter and BOB Valproate group update

The harmful effects of prenatal exposure to valproate are well documented with congenital malformations and neurodevelopmental disorders which may lead to permanent disability. The UK Chief Medical Officers have recently published a [letter](#) regarding the recently announced new regulatory oral valproate-containing medicines safety measures.

Following a review, the Commission on Human Medicines recommended [further restrictions to valproate use](#) to reduce avoidable harm which were introduced by the MHRA in January 2024. Information of the new regulatory measures are detailed in the [valproate National Patient Safety Alert](#), issued November 2023. The new safety and educational materials to support regulatory measures in men and women under 55 years of age were detailed in the [January 24 Drug Safety Update](#).

Links to the most up to date information, including the new Annual Risk Acknowledgement Forms (ARAFs) for both females and males are available in the **Risk Materials section** of the [electronic medicines compendium](#)

Existing male patients taking oral valproate medicines

The MHRA are still in the process of re-analysing recent [registry data](#) which may suggest an increased risk of neurodevelopmental disorders in children whose fathers took valproate in the 3 months before conception. No action is currently needed from patients. It is very important that patients do not stop taking valproate without advice from their specialist.

BOB valproate safety work

A BOB Integrated Care System Task and Finish Group for Valproate safety has been set up following the [National Patient Safety Alert](#) issued. BOB ICB are working with all BOB organisations, as specified in the safety alert, and includes a national epilepsy charity ensuring involvement of patients with lived experience. The group are continuing to review and work on the aspects of prescribing valproate and pathways.

So what?

- Ensure you are familiar with the most up to date information around the prescribing restrictions for oral valproate containing medicines.
- Existing **male** patients on valproate: GPs and pharmacists should continue to provide repeat prescriptions for valproate. **No action** is currently needed from patients. Further MHRA advice is pending.

- **No one should stop taking valproate unless** they are advised by a specialist to do so.
 - Work is ongoing within the BOB system on valproate safety, further information to update everyone will be circulated.
-

MHRA Drug Safety Update

Codeine linctus (codeine oral solutions): reclassification to prescription-only medicine
Advice for healthcare professionals on the reclassification of codeine linctus oral solution cough medicines to a prescription-only medicine (POM), following a public consultation.

Read more [here](#).

Pseudoephedrine: very rare risk of posterior reversible encephalopathy syndrome (PRES) and reversible cerebral vasoconstriction syndrome (RCVS)

There have been very rare reports of posterior reversible encephalopathy syndrome (PRES) and reversible cerebral vasoconstriction syndrome (RCVS) with pseudoephedrine. Patients and caregivers should be advised to be alert to the symptoms for PRES and RCVS, to stop the medication immediately and to seek urgent medical attention if these occur. If someone presents with symptoms of PRES or RCVS, ask about their medication history.

Read more [here](#).

So what?

- Codeine Linctus – change to status to a POM may result in more requests for GPs to prescribe. Ensure you have considered the risk of addiction/abuse of this medication.
 - Pseudoephedrine – Please be alert to the signs of PRES and RCVS with pseudoephedrine.
-

Important Update: Transition to updated Metoject® (Methotrexate) pen device - from Medac Pharma

The Medicines Optimisation Team have been asked to share the following information by Medac Pharma. If you would like any further information about this change, please contact the local Medac representative:

Karen Anthony

07375 853675
karen.anthony@medacpharma.co.uk

Dear HCP

We wish to inform you of an upcoming change to Metoject® PEN (Methotrexate). The Metoject® PEN device will undergo a transition to a new, updated autoinjector, set to be available from March 2024. Despite this transition, the medicine's formulation and dosage options will remain identical to the previous Metoject® PEN.

This updated Metoject® PEN has several new features designed to improve the patient experience including:

- Button-free autoinjector PEN
- Acoustic signal at beginning and end of injection
- Inspection window to see when injection is complete
- Hidden needle inside blue needle cover
- Larger labelling with colour code
- Angular shape with anti-rolling feature

We kindly request you to inform any patients currently prescribed Metoject® PEN of this update. Further information for patients about key features of the new Metoject® PEN, as well as a self-injection instruction guide video, can be found here:

<https://metoject.co.uk/patients/new-pen/>

Thank you for your attention to this matter.

So what?

- Patients prescribed Metoject® brand should be informed of the change to the Metoject® pen they may receive when their prescription is issued.
- A reminder that patients should be maintained on the same brand of methotrexate pen and not switched to another brand unless advised to do so after the patient has been trained in the correct use of the device.

BOB System updates

ClinOx moving to SharePoint

FROM 1ST MARCH 2024, ALL CLINOX CONTENT WILL BE BASED IN A SHAREPOINT HOSTED BY BOB ICB.

ClinOx will now form part of the BOB ICB SharePoint and will be available from the 1st of March here: [ClinOx SharePoint](#). You will be able to find all the same medicines optimisation information within the ClinOx SharePoint pages, such as shared care protocols, guidelines and PQS information.

The ClinOx website will still be accessible through March, but will cease to exist on 1st April 2024. Clinox.info links will redirect to the SharePoint for one year.

Make sure you bookmark the SharePoint page for future reference and update any old links.

For queries, contact nadia.kuftinoff1@nhs.net.

Testosterone for Hypogonadism in Males: BOB wide Amber Recommendation Guideline for Primary Care

The Testosterone for Hypogonadism in Males Guideline has been updated and aligned across BOB – it is now available [here](#).

This is an update of the previous guidelines available in Oxfordshire and Buckinghamshire and is based on the latest [national guidance available](#).

The update includes:

- Information about discussion of fertility intentions
- Update of GP and specialist responsibilities
- Update of testosterone gel options to include Testavan (a novel hands-free cost-effective option)
- Update of dosing information table
- Update of monitoring information for primary care

So what?

Prescribers should familiarise themselves with the new guidelines and refer to them when prescribing testosterone for hypogonadism.

HRT Guidelines & Testosterone Prescribing – Reminder

Following the article in [issue 3 of the Medicines Optimisation Newsletter](#), the updated version of the BOB HRT formulary and treatment guidance is now available [here](#). Prescribing of testosterone in primary care is ‘Amber Initiation’ in line with [local HRT guidance](#).

Patient information is also available on the NHS website [here](#) Hormone replacement therapy (HRT) - NHS (www.nhs.uk)

ScriptSwitch feedback Survey

Optum have recently emailed practices directly a copy of their ScriptSwitch® practice report. These reports are issued on a monthly basis from ScriptSwitch®. Each month the reports will provide data for the preceding 3 months.

The reports are intended to:

- Provide a general overview of the use of ScriptSwitch® by the practice.
- Allow the practice to view their usage compared to other practices within your locality
- Enable the practice to identify switches where achievement of savings could be improved.
- Enable the practice to provide feedback to the Prescribing Support Team on any messages or switches which would benefit from review.

The Medicines Optimisation Team would greatly appreciate your participation in a brief Microsoft Forms [survey](#), which has been developed for all clinicians to complete to provide valued feedback on ScriptSwitch®. It would be very much appreciated if you could spare a few minutes of your time and participate in this.

Your insights will contribute to enhancing the use of ScriptSwitch® in practices. Please share this link with relevant members of your practice.

<https://forms.office.com/e/F9MUuME8ta>

Thank you in advance for your time.

So what?

- Share the survey link with all colleagues and encourage all to participate in the survey to improve the use of ScriptSwitch®.
- Contact the MOT if you have not received your practice reports from Optum – these have been emailed to the Practice Manager or Prescribing Lead so please check with them first.

Changes to Abbott enteral tube feed names on clinical prescribing systems

Please be aware that the following Abbott tube feeds will now include the words '**tube feed**' on clinical systems to distinguish between an enteral feed rather than an oral nutritional supplement bottle. If a patient requires the ready-to-hang, enteral tube feed version of these products, please select the following options:

- Nepro® HP **tube feed** liquid vanilla 500ml
- Paediasure® peptide **tube feed** liquid 500ml
- Paediasure® plus fibre **tube feed** liquid 500ml
- Peptamen® **tube feed** liquid 1000ml
- Vital® 1.5kcal **tube feed** liquid 1000ml

This will hopefully help to reduce prescribing errors that can occur when the prescriber selects the incorrect product.

If the patient requires the smaller bottled ONS version (to either drink orally or have bolused down a tube), please ensure the option without 'tube feed' is selected instead. Always follow the instructions on the Dietetic letter.

If you need further support with this, contact the Prescribing Dietetic Advisors at bobicb.medicines@nhs.net.

Training, upcoming meeting and Resources

Polypharmacy Community of Practice (CoP) – Bone Health

The fifth BOB ICB Polypharmacy CoP will take place on **Wednesday 20th March, 13:00-14:00**, via Zoom.

The session will be focused on Bone Health and the prescribing of bisphosphonates. We will be joined by **Kassim Javaid, Professor of Osteoporosis and Adult Rare Bone Diseases, University of Oxford**.

If you are not already a member of the BOB Polypharmacy CoP and would join the group, please email <https://forms.office.com/e/0T3P3Gjqk5>. As a member you will be provided with the joining instructions for this and future events.

BOB Pharmacy Workforce Education Events in JUNE 2024

Please circulate to Pharmacy Colleagues in your Practice. Calendar Invites have been sent out too.

BOB Pharmacy Workforce Education Events in **JUNE 2024** from 1pm – 5pm (Refreshments & Lunch will be provided):

- **Berks West** – Thursday 6th June'24 at Holiday Inn Reading-South M4 jct. 11, Basingstoke Road, Reading, RG2 0SL
- **Bucks** – Thursday 13th June'24 at Holiday Inn High Wycombe M40 J4, Crest Road, High Wycombe, Buckinghamshire, HP11 1TL
- **Oxford** – Thursday 27th June'24 at Hilton Oxford Belfry, Milton Common, Oxford, OX9 2JW

BOB ICB PCN Pharmacist Event on **Tuesday 1st October'24** from 9am – 5pm at College Suite, DoubleTree by Hilton Oxford Belfry, Milton Common, Thame OX9 2JW. (Refreshments & Lunch will be provided)

If you require any further information, please contact bobicb.medicines@nhs.net.

Diabetes Information and Resources

The BOB Integrated Diabetes Delivery Network (IDDN) have created a ClinOx webpage to host diabetes resources relating to pathways and guidance to support your management of people with diabetes. For the latest information from BOB IDDN, please see the newsletters on this [link](#).

Other news and information

Medicines Supply Information

Some information on long-term supply issues can be found on [PrescQIPP](#) or the [Medicines Supply Tool](#) on the SPS website. Please note this is not an exhaustive list.

There is a summary of some of the key stock issues that relate to primary care on this [link](#).

Serious Shortage Protocols

Serious Shortage Protocols (SSPs), which enable community pharmacists to supply patients with specific alternative medicines, are available to view on the NHS Business Service Authority (BSA)'s [dedicated SSP web page](#), along with supporting guidance. Questions regarding the SSPs should be directed to the NHS Prescription Service:

Email: nhsbsa.prescriptionservices@nhsbsa.nhs.uk

Telephone: 0300 330 1349. Textphone: 18001 0300 330 1349

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