



**Buckinghamshire, Oxfordshire  
and Berkshire West**  
Integrated Care Board

## BOB Medicines Optimisation Bulletin



This bi-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](mailto:bobicb.medicines@nhs.net)

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

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## National updates

## GLP-1 Medicines for Weight Loss and Diabetes

The MHRA have updated the guidance on 'what you need to know' about GLP-1 medicines:  
[GLP-1 medicines for weight loss and diabetes: what you need to know - GOV.UK](#)

The article covers useful topics such as

- Switching between GLP-1 medicines
- Risks of taking GLP-1 medicines
- GLP-1 medicines, contraception and pregnancy
- GLP-1 medicines and breastfeeding
- GLP-1 medicines and depression or suicidal thoughts
- Using GLP-1 medicines around the time of a surgery or an operation
- Further information to be aware of
- What do those taking or planning to take these medicines need to remember

### So what?

The article is a useful resource to help guide conversations with patients starting on GLP-1 RAs.



## BOB System updates



## Prescribing Quality Scheme Updates

### PQS 2024-25 achievements summary report

The BOB ICB Medicines Optimisation Prescribing Quality Scheme for 2024 – 25 has now been finalised and closed off. The PQS ran from 1<sup>st</sup> April 2024 to 31<sup>st</sup> March 2025 and the MOT would like to share the outcomes of the scheme in which 152 of 153 BOB GP practices participated in.

Thank you for all the hard work carried out through the PQS which demonstrates some of the significant achievements, towards the aim of improving the quality and safety of prescribing across Primary Care, and potential impact to the wider NHS and social care system.

The full report is : [PQS 24-25 EoY Report](#) and a shorter summary: [PQS 24-25 Summary Report](#)

#### So what?

- Please share the report with colleagues and in your clinical meetings.

## Medicines Safety

### NHS South-East Valproate September newsletter

The [latest Valproate Newsletter](#) from the NHS South East Clinical Quality and Improvement team has been published. Information regarding the progress of the digital solution for annual reviews, for which Oxford University Hospitals NHS Trust is a pilot site for, can be found in the newsletter.

## ScriptSwitch Insights: Monthly Top Medication Switches

Each month the Medicines Optimisation Team will be highlighting some key ScriptSwitch recommendations that have been frequently offered. These can have a significant impact on patient care and medication management.

By staying on top of these top switches, and prescribing the preferred product in the first instance, you can help ensure that your patients are receiving the most effective, cost-efficient, and evidence-based treatments.

Here are the Top Offered ScriptSwitch Recommendations in September 2025:

| Prescribed product                     | Preferred product                         | Did you know?                                                                                                                                                                          |
|----------------------------------------|-------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Adcal-D3 chewable tablets tutti frutti | Evacal D3 1500mg/400unit chewable tablets | This is a commonly prescribed cost effective brand to branded generic switch.                                                                                                          |
| Utrogestan 100mg capsules              | Progesterone micronised 100mg capsules    | This is a commonly prescribed cost effective brand to generic switch. Prescribing generically enabled community pharmacy to dispense a brand that they have available in the pharmacy. |
| Cetramen cream                         | Epimax excetra cream                      | Epimax Excetra has been approved for use by BOB APC with input from local dermatologists, to ensure its effectiveness and equivalence to the original product.                         |

#### So what?

- Please disseminate and share across the practice and at practice clinical meetings
- Review ScriptSwitch reports
- If you have any questions or need assistance with navigating ScriptSwitch, please do not hesitate to get in contact via the Medicines Inbox [bobicb.medicines@nhs.net](mailto:bobicb.medicines@nhs.net) or Optum on [customerserviceuk@optum.com](mailto:customerserviceuk@optum.com)

## Cost-effective prescribing

### 1. Melatonin 2mg modified-release (MR) tablets

Generic melatonin is now approved, for use within BOB, for patients over 55 years with insomnia, in-line with [local guidelines](#) and for sleep disorders in children and young people (1-17yrs) with complex neurological / neurodevelopmental disorders, in-line with the local [shared care protocol](#). Whilst there are many different formulations of melatonin, the majority of patients can be treated with the 2mg

MR tablets as these tablets can be halved to aid swallowing (unlicensed use). Previously clinicians were requested to prescribe the Circadin® brand, to avoid inadvertent dispensing of costly and unlicensed specials. However, **generic melatonin 2mg MR** tablets are now available and are significantly more cost-effective (see details of cost comparison below).

|                   | <b>Circadin® 2mg MR</b> | <b>Melatonin 2mg MR (generic)</b> |
|-------------------|-------------------------|-----------------------------------|
| Cost (30 tablets) | £15.39                  | £2.45                             |

In Jun-25, **£27,680** was spent on Circadin® 2mg MR tablets across BOB. If these prescriptions had all been for the generic equivalent, this would have represented a saving to the NHS of **£23,274** per month and an annual saving of approx. **£279,291**. ScriptSwitch messages are in place to support the move to the generic version.

### So what?

Prescribers should consider prescribing generic melatonin 2mg MR tablets for patients requiring a 2mg MR product and switching existing prescriptions for Circadin® 2mg MR tablets to the more cost-effective generic equivalent where appropriate.

## 2. Estradiol 10 microgram vaginal tablets

Vagifem® and Vagirux® vaginal tablets and generic estradiol pessaries each contain 10 micrograms (mcg) estradiol and are all licensed for the treatment of vaginal atrophy due to oestrogen deficiency in post-menopausal women. The generic estradiol pessaries are very similar in both formulation and method of administration to the branded products but are significantly more cost-effective, particularly compared to Vagifem® (see cost comparisons below). The generic preparation is the formulation recommended in the [BOB ICB HRT formulary and treatment guidance](#) and on the BOB ICB prescribing formularies.

|                           | <b>Vagifem® 10mcg</b> | <b>Vagirux® 10mcg</b> | <b>Estradiol 10mcg (generic)</b> |
|---------------------------|-----------------------|-----------------------|----------------------------------|
| Cost (24 vaginal tablets) | £16.72                | £11.34                | £11.04                           |

In June 25, approximately 50% of the prescriptions for this preparation were written for either Vagifem® or Vagirux® at a cost of **£36,836**. Had these prescriptions been written for the generic equivalent, this would have represented a saving for the NHS of **£10,659** (annual saving of approx. **£127,911**). ScriptSwitch messages are in place to support the move to the generic version.

## So what?

Prescribers should consider prescribing generic estradiol 10mcg pessaries for patients requiring vaginal estrogen and switching existing prescriptions for Vagifem® and Vagirux® to the more cost-effective generic equivalent, where appropriate.

## 3. Prescribing of premium priced generic medication

The NHSBSA has reported that there is an increasing volume of computerised prescriptions each month, where generic products have been prescribed but with the name of the brand or the manufacturer added in brackets, often by hand. Most of these products are Category M in the drug tariff with a fixed remuneration price. Where the manufacturer or brand is added to the prescription, the drug costs charged to the NHS and reimbursed to the dispensing practice or community pharmacy will be that of the list price of the branded medicine or the specified supplier. In many cases this cost will be significantly higher than the price listed in the Drug Tariff (see cost comparisons below).

|                                     | Premium priced generic (Sandoz) | Cat M price |
|-------------------------------------|---------------------------------|-------------|
| Apixaban 5mg tablets (56 tablets)   | £53.20                          | £1.69       |
| Apixaban 2.5mg tablets (60 tablets) | £57.00                          | £1.66       |

In June 25, premium priced generic medication cost BOB ICB **£18,840** (80% of the cost of this prescribing was down to 10 GP practices). If these items had been prescribed as standard generics, this would have represented a saving of **£11,948** and an annual saving of approx. **£143,384**.

Practice staff should note that:

- The Prescribing Quality Scheme (PQS) April 2025, states that “practices identified as having a significant variation in prescribing, must be able to demonstrate that prescribing is justifiable and cost-effective for the NHS. Failure to engage with the MOT to review and amend unwarranted variation in prescribing as requested, will result in removal from the scheme and funding being withheld”. Prescribing large quantities of premium priced generics would be considered as an unwarranted variation in prescribing.
- Any alteration to the main body of the prescription, including adding the manufacturers’ name, is technically ‘prescribing’ so must be done by the prescriber themselves and not the dispensary staff.

## So what?

Prescribers should refrain from selecting a generic product on EMIS where the brand or manufacturers name is in brackets and likewise should avoid adding these details to the prescription by hand.

## BOB ICB Medicines Waste Campaign

The BOB ICB Medicines Waste Campaign is attracting local media interest and has been discussed on BBC South and local BBC radio on Tuesday 2 September. We will continue to promote the messages to patients through social media, digital cafes and patient participation groups and work with stakeholders to help promote the campaign over coming months.

Practices can access five short videos for your GP practice screens to support this campaign - these are available to download with either audio or no audio on the GP Bulletin Share Point page see [here](#).

Further information can also be found on the [BOB ICB StayWell webpage](#).

A slide deck is also available for Patient Participation Groups to use on the [YourVoice website](#).

For further information please contact the Medicines Optimisation Team at [bobicb.medicines@nhs.net](mailto:bobicb.medicines@nhs.net)

### **So what?**

Please help to promote this campaign through your website, waiting room screens and via your Practice Participation Groups where possible, together we can make a difference.

## BOB ICB Appliance Management Service

BOB ICB is pleased to announce the launch of a new Appliance Management Service, provided by Bullen Healthcare, for all patients registered with a GP in Buckinghamshire Oxfordshire and Berkshire West on 6<sup>th</sup> October 2025. The service is designed to provide enhanced support for patients requiring prescriptions for urology, stoma and trans anal irrigation products.

The aim of the service is to streamline referrals, reduce complications, and ensure patients receive the highest standard of care overseen by a team of specialist nurses and advisors.

The service will be responsible for reviewing patients receiving prescriptions for these products and transfer prescribing from GP practices to specialist nurses who are part of the new commissioned service. The service will oversee both the prescribing and review of patients with appliance-related issues, especially for those not already under the care of

local teams in primary or secondary care. This initiative will bring significant benefits all described in the links below:

A stakeholder event took place on 28<sup>th</sup> August 2025, describing why the service was set up and how it will operate. You can find the Webinar YouTube Link [here](#), the MOT slides [here](#) and the Bullen's slides [here](#)

Individual practices will be contacted with their specific details regarding the data transfer and go live dates. Please share this email with other members of your team who are involved in prescribing of urology and stoma products in your practice. In the meantime, please don't hesitate to get in touch via the MOT mailbox [bobicb.medicines@nhs.net](mailto:bobicb.medicines@nhs.net) if there are any further questions.

### So What ?

Practices to be aware of this new service and await further information



## Training, upcoming meeting and Resources



### BOB ICB Pharmacy Workforce Conference

BOB ICB is hosting its “**Pharmacy Workforce Conference**” on **Thursday 2nd Oct'25** from **9am – 5pm**, at the *Oxford Belfry Hotel, just off junction 7 of M40*. We hope that you will support the whole-day event, which is free of charge, by permitting your relevant staff to attend. The conference is primarily aimed at pharmacy professionals (pharmacists and pharmacy technicians) working within Primary Care. Attendees will be able to hear from both national and local speakers on many important and topical subjects (see attached [DRAFT AGENDA](#) for details), and they will also have the opportunity to network with colleagues and share ideas and experiences.

Kindly register here: [PCN Conference Registration Form](#)

Deadline for registrations is **Tues 16th Sept'25**.



# CPPE 'Valproate – the hard conversations online workshop' for pharmacy professionals

A reminder that the CPPE [Valproate: the hard conversations focal point online workshop](#) is freely available to all pharmacy professionals to help you engage with people taking valproate and will explore the following questions:

- What is the role of pharmacy professionals in managing valproate risk?
- What are the specific risks of taking valproate in pregnancy?
- Can you convey this information to a patient and signpost them effectively using a person-centred approach to care?

This online workshop is open to all pharmacists, pharmacy technicians and trainee pharmacists working in any sector of practice. The learning programme covers the latest MHRA guidance on valproate and provides learning that covers how you can support people to manage the risks associated with valproate.

To see dates and book a place visit the [CPPE website](#).

For BOB ICB guidance see [Oral valproate medicines shared care protocol](#).

## Respiratory Information and Resources

The BOB Integrated Respiratory Delivery Network (IRDN) have created a webpage on SharePoint to host respiratory resources to support your management of people with respiratory conditions. For the latest information from BOB IRDN, please see the newsletters on this [link](#).

## Diabetes Information and Resources

The BOB Integrated Diabetes Delivery Network (IDDN) have created a webpage on SharePoint 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 [Prescqiipp](#) or the [Medicines Supply Tool](#) on the SPS website. Please note this is not an exhaustive list.

## 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](mailto:nhsbsa.prescriptionservices@nhsbsa.nhs.uk)

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

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