



Medicines
Optimisation
Update

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Free GP Practice Medicines Co-ordinators eLearning Course

Health Education England has funded free access to the PrescQIPP GP Practice Medicines Co-ordinators eLearning Course.

This course serves as an introduction to medicines and the repeat prescribing processes within a GP practice setting, and is suitable for general members of the practice team undertaking medicines related tasks. Modules include: medication basics, information sources and requirements for prescriptions, repeat prescribing policies and processes, reducing waste, care homes and appliance contractors, hospital discharge, formularies, specials and prescribing incentive schemes, community pharmacy services and an introduction to diabetes, respiratory prescribing and antibiotics. Details of the course can be found here [Practice medicines co-ordinators e-learning flyer \(prescqipp.info\)](#)

BSW Area Prescribing Committee (APC) Updates

The [BSW APC website](#) includes information on the APC and the formulary decision making process. Decisions from the Apr 2021 meeting have been ratified and can be found in full [here](#).

- New – [Guidelines for the use of melatonin in children for Autism Spectrum Disorder \(ASD\)](#). This BSW guideline aims to:
 1. Highlight the evidence base and areas where the evidence for using melatonin is lacking.
 2. Raise awareness of theoretical risks of puberty delay, safety concerns about use in pregnancy and longer term safety in general noting ongoing studies into these areas.
 3. Advise on the 'transition' of patients out of paediatric services at age 18 years. There is a change in TLS from RED to Amber to accommodate prescribing of melatonin in those >18years where a recent drug review by the paediatric service has shown there is a continued need for the GP to continue to prescribe melatonin as per this local guidance. See formulary entry [here](#).
- New - [BSW SCA Midodrine \(licensed\) &/or Fludrocortisone \(off-label\) for orthostatic hypotension – Adults](#). This SCA is new for most prescribing across BSW but note it replaces expired SCA for midodrine previously used at SFT).

Safety and Quality Updates

Reminder: Valproate Pregnancy Prevention Programme

This short video provides a succinct reminder to support healthcare professionals understand their part of the valproate pregnancy prevention programme. <https://youtu.be/VuBq2M1Me04>

The National Director for Patient Safety has this month sent a letter (this will only go to patients who are reviewing their valproate via FP10 route so may not capture every patient) to women and girls aged 12-55 who are currently prescribed sodium valproate. The letter contains reminders of safety considerations, including around contraception, pregnancy and regular prescribing reviews and can be found here [NHS England » Letter to women and girls taking sodium valproate](#)

Across BSW Healthcare system there are around 400 women of childbearing potential prescribed valproate. All women of childbearing potential should be included in the valproate pregnancy prevention program. The programme seeks to prevent harm from valproate in pregnancy by ensuring that women are aware of the risks of valproate during pregnancy (up to 4 in 10 babies are at risk of developmental disorders, and approximately 1 in 10 are at risk of birth defects), there is very effective contraception in place, and that an annual review is completed. The Annual Risk Acknowledgement Form should be completed as part of this annual review. Good communication between the specialist prescriber and the healthcare professional is essential to ensure the safe prescribing of valproate in primary care, a shared care protocol is being developed to support this and will be available later this year.

Our BSW Healthcare System Medicines Safety Group is collaborating to assess how the programme is working across BSW, and facilitating audit work to support this.

Full details of the programme and all resources can be found here <https://www.gov.uk/guidance/valproate-use-by-women-and-girls>
And guidance specifically relating to exceptional circumstances that have been applicable during pandemic restrictions can be found here <https://www.gov.uk/guidance/valproate-pregnancy-prevention-programme-temporary-advice-for-management-during-coronavirus-covid-19>

Recording specialist prescribed drugs on GP clinical system prescribed drugs on GP clinical system

It is important that all drugs that are not prescribed by the GP practice are recorded within the medication of the patient notes (e.g. red drugs / methadone prescribing etc.). This is so that any clinician is aware of all medication the patient is taking and they will appear on any interaction warnings as appropriate. There are two ways to document this.

1. Add to repeat template with a note which states not for GP to issue (usually the quantity would be set to 1 tablet)
2. Add as other medication

Adding as other medication is BSW CCG's preferred method of recording medication which is not prescribed by the GP. Locally a few weeks ago a script was issued and signed for acitretin (a red drug only to be prescribed by a dermatology consultant). Although the quantity was reduced to one capsule and the note stated not for GP issue this was still issued and dispensed to the patient.

Further information and guidance on how to record a specialist prescribed drugs on the clinical system can be found [here](#).

New Nice Chronic Pain Guidance

NICE Guideline 193 'Chronic Pain (Primary and Secondary) in over 16s: assessment of all chronic pain and management of chronic primary pain' was published in April.

The guideline defines chronic pain as chronic *primary* pain and chronic *secondary* pain. Chronic pain persists for more than 3 months. Chronic primary pain has no clear underlying condition or is out of proportion to any observable injury or disease.

Chronic secondary pain is a symptom of an underlying condition. Chronic secondary pain and chronic primary pain can coexist.

The guidance covers assessing all chronic pain (chronic primary pain, chronic secondary pain, or both) and *managing chronic primary pain* in people aged 16 years and over.

It should be used alongside NICE guidelines for other chronic primary and secondary pain conditions, as appropriate.

The guidance found that the evidence overwhelmingly supports non-pharmacological management options such as exercise programmes/physical activity and psychological therapies for management of chronic primary pain. Pharmacological options (including opioids, gabapentinoids, benzodiazepines) are not recommended for initiation in chronic primary pain. The guidance recommends review and shared decision making for people with chronic primary pain who are already taking pharmacological treatments for pain, with the aim of explaining risks, keeping them safe from potential harm and supporting gradual withdrawal as appropriate.

The guidance recommends considering an antidepressant to support management of chronic primary pain and highlights this is an off-label use of antidepressants.

NICE is currently developing a guideline on medicines associated with dependence or withdrawal symptoms: safe prescribing and withdrawal management for adults. Which is due to be published in April 2022.

The current BSW CCG Pain Guidance is under review.

A concise visual summary here <https://www.nice.org.uk/guidance/ng193/resources/visual-summary-pdf-9073473517> . The full guidance can be found here <https://www.nice.org.uk/guidance/ng193> .

Website Updates

MOT Website New documents uploaded

MOCH Newsletter – Spring 2021 edition

<https://prescribing.bswccg.nhs.uk/?wpdmdl=8524>

MOT Website Updated documents uploaded

BSW Nutrition Resource Pack for Care Homes (FULL guidance)

<https://prescribing.bswccg.nhs.uk/?wpdmdl=7290>

BSW Nutrition Resource Pack for Care Homes (SUMMARY guidance)

<https://prescribing.bswccg.nhs.uk/?wpdmdl=7292>