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**Nutilis Clear fluid thickener is changing**

Nutilis Clear, the D&G formulary choice for fluid thickeners, is altering to align with the new dysphagia definitions for texture modified food & fluids; the International Dysphagia Diet Standardisation Initiative (IDDSI) which will be adopted throughout the UK over a year from April 2018.

Nutricia anticipate the new tins of Nutilis Clear powder to be in pharmacies from 21 May 2018. They will no longer produce the old tins from this date. There will be 4 levels of thick fluids, instead of the current 3, and the amount of powder required for each level of fluid will change. Directions are on the side of the new tin and there will be a red alert sticker on the new tin lids.

Speech and Language Therapists (SLT) will continue to advise patients current with the service, on the recommended level of thick fluids and the quantity of powder to use. However, to inform those people who have been discharged from SLT, a leaflet will be sent to their home address and we aim for pharmacies to provide a further copy with their Nutilis Clear prescription.

For more information contact Speech & Language Therapy, Dumfries & Galloway Royal Infirmary, tel : 01387 – 241422.

**Valproate medicines – MHRA advice Drug Safety Update 24<sup>th</sup> April 2018**

Valproate medicines (Epilim ▼, Depakote ▼) are contraindicated in women and girls of childbearing potential unless conditions of Pregnancy Prevention Programme are met. Ensure all women and girls (and their parent, caregiver, or responsible person, if necessary) are fully informed of the risks and the need to avoid exposure to valproate medicines in pregnancy.

- Materials should be received by post in the coming weeks to use in the implementation of the Pregnancy Prevention Programme (Patient Guide, Healthcare Professional Guide, Risk Acknowledgement Form, and, for pharmacists, Patient Cards and stickers to attach a warning label to the pack)
- GPs must identify and recall all women and girls who may be of childbearing potential, provide the Patient Guide and check they have been reviewed by a specialist in the last year and are on highly effective contraception (see later for information on contraception)
- specialists must book in review appointments at least annually with women and girls under the Pregnancy Prevention Programme and re-evaluate treatment as necessary

For more information; <https://www.gov.uk/drug-safety-update/valproate-medicines-epilim-depakote-contraindicated-in-women-and-girls-of-childbearing-potential-unless-conditions-of-pregnancy-prevention-programme-are-met>

**Free-style Libre availability**

The benefits of Flash Glucose Monitoring have been summarised in the 'Diabetes UK Consensus Guideline for Flash Glucose Monitoring', published in September 2017 and endorsed by the Association of British Clinical Diabetologists. There is currently limited good quality clinical trial data to support long-term clinical evidence, benefits and cost-effectiveness for FreeStyle Libre.

Until such time when there is a fuller evidence base, the advice below, broadly in line with the Diabetes UK consensus guideline, has been developed by the Scottish Diabetes Group (Type 1 Diabetes Subgroup) to help identify people who should be considered for NHS funded Flash Glucose Monitoring in Scotland.

**Flash Glucose Monitoring should be considered in people who:**

- 1. Use intensive insulin therapy (multiple daily injections or continuous subcutaneous insulin infusion); and**
- 2. Agree to attend a locally provided Flash Glucose Monitoring education session; and**
- 3. Agree to scan glucose levels no less than six times per day; and**
- 4. Agree to share glucose data with their diabetes clinic; and**
- 5. have attended a recognised diabetes structured education programme. And/or clinical team are satisfied that the person has required knowledge/skills to self-manage diabetes.**

**The recommendation to commence Freestyle Libre should originate from a secondary care diabetes specialist. Prescriptions for Freestyle Libre sensors (like blood glucose test strips) should be issued by the patient's primary care provider.**

In addition, a small supply of finger-prick blood glucose measurements will still be needed, such as when a person is ill or to meet the requirements of the Driver and Vehicle Licensing Agency in assessing fitness to drive. Continuing prescription for long-term use of Free Style Libre would be contingent upon evidence of compliance with the above conditions and that on-going use of the Freestyle Libre is demonstrably improving an individual's diabetes care. This will be assessed every 6 months by a secondary care diabetes specialist.



## Specific Drug Issues

### Topirimate tablets price hike

Topirimate tablets have increased in price. Please consider alternative options before prescribing e.g. for migraine prophylaxis

### Flunarizine in migraine

Flunarizine can be used for treatment of migraine. This is unlicensed and should be recommended by a specialist. Before prescribing please check that there is an IPTR.

## Community Pharmacy Referral Guide

This referral guide has been circulated to all practices and will be a helpful guide for practice staff so that they can direct patients appropriately. For further information see;

<http://www.dgprescribingmatters.co.uk>

Please note: All services described below are at the discretion of the Pharmacist.

### Minor Ailments Service- Advice and Treatment for:

Aches and pain (minor), allergy, athlete's foot, cold sores, conjunctivitis (1+ years old), constipation, cough, diarrhea, dry eyes, ear wax, eczema, hayfever, haemorrhoids, head lice, indigestion/heartburn, mouth ulcers, nasal congestion, teething, thrush, sore throat, threadworms, warts/verrucae.

### Emergency contraception

### Impetigo (topical fusidic acid)

### Uncomplicated UTI; (trimethoprim)

### Smoking Cessation Service

### Unscheduled Care – Community Pharmacy Urgent Supply (CPUS)

Pharmacies can provide an urgent supply of medication in certain circumstances where a GP is unavailable.

### Gluten Free products

If you haven't received the guide please see your PST/GP Clinical Pharmacist



## Summary of the latest Scottish Medicines Consortium decisions; for full advice see:

[www.scottishmedicines.org.uk](http://www.scottishmedicines.org.uk)

### Accepted and available from a specialist center:

**asparaginase (Spectrila) medac Pharma**; as a component of antineoplastic combination therapy for the treatment of acute lymphoblastic leukaemia (ALL) in paediatric patients from birth to 18 years and adults.

**teduglutide (Revestive) Shire Pharmaceuticals Ltd**; for the treatment of patients aged one year and above with short bowel syndrome (SBS). Patients should be stable following a period of intestinal adaptation after surgery.

**SMC restriction:** initiation in paediatric patients (aged 1 to 17 years). **ACCEPTED RESTRICTED WITH PAS**

**Available in line with national or local guidance for prescribing**

**dimethyl fumarate (Skilarence)**; for the treatment of moderate to severe plaque psoriasis in adults in need of systemic medicinal therapy.

**SMC restriction:**

for use in patients in whom other non-biologic systemic treatments (methotrexate, ciclosporin and acitretin) are not appropriate or have failed and who are considered unsuitable for biologic therapy given their current disease state or personal preference.

**ciprofloxacin eardrops (Cetraxal) Aspire Pharma**; treatment of acute otitis externa in adults and children older than 1 year with an intact tympanic membrane, caused by ciprofloxacin susceptible microorganisms.

**SMC restriction:** when off-label or unlicensed ciprofloxacin formulations would otherwise be used.

Ciprofloxacin eye drops (used off-label) or unlicensed ciprofloxacin ear drops have been in use in NHS Scotland for this indication. Ciprofloxacin ear drops (Cetraxal®) provide a licensed alternative.

**sofosbuvir/velpatasvir (Epclusa) Gilead Sciences Ltd**; treatment of chronic hepatitis C virus (HCV) infection in adults.

**SMC restriction:** in patients with genotype 1 or 4 HCV infection. Sofosbuvir-velpatasvir was associated with high rates of sustained virologic suppression in adults with genotype 1 and 4 chronic HCV infection, including those with decompensated cirrhosis. **Restricted with PAS**

**sofosbuvir/velpatasvir/voxilaprevir (Vosevi) Gilead Sciences Ltd**; Treatment of chronic hepatitis C virus (HCV) infection in adults.

**SMC restriction:** for patients who:

- (1) Have failed to achieve a sustained virologic response (SVR) with a direct-acting anti-viral (DAA)
- (2) are DAA-naïve, have genotype 3 (GT3) HCV infection, with or without cirrhosis, and are suitable for treatment with an eight-week course.

Sofosbuvir-velpatasvir-voxilaprevir was associated with high rates of SVR in adults with chronic HCV who had failed to achieve a response with DAA medicines and in those who were naïve to these medicines.

**ACCEPTED RESTRICTED WITH PAS**

**Not routinely available as local implementation plans are being developed/ADTC is waiting for further advice from local clinical experts.**

**sarilumab (Kevzara) Sanofi Genzyme**; in combination with methotrexate for the treatment of moderately to severely active rheumatoid arthritis in adult patients who have responded inadequately to, or who are intolerant to one or more disease-modifying anti-rheumatic drugs (DMARDs). Sarilumab can be given as monotherapy in case of intolerance to methotrexate or when treatment with methotrexate is inappropriate.

**SMC restriction:**

in patients with severe disease (a disease activity score [DAS28] greater than 5.1) that has not responded to intensive therapy with a combination of conventional DMARDs. In patients with severe disease inadequately controlled by a TNF antagonist, it may be used in patients ineligible to receive rituximab.

**ACCEPTED RESTRICTED WITH PAS**

**Not recommended for use in NHS Scotland and NOT added to D&G formulary:-**

**ceritinib (Zykadia) Novartis Pharmaceuticals UK**; As monotherapy for the first-line treatment of adult patients with anaplastic lymphoma kinase (ALK)-positive advanced non-small cell lung cancer.

**parathyroid hormone (Natpar) Shire Pharmaceuticals**; As adjunctive treatment of adult patients with chronic hypoparathyroidism who cannot be adequately controlled with standard therapy alone.

## Dehydration – it affects us all!



UTI's are the most common type of infection seen in both acute and primary care settings in Scotland. The Scottish UTI Network are hosting this campaign.

For more information see <http://www.hps.scot.nhs.uk/haic/sutin.aspx>

### Contact the Prescribing Support Team @

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