



Important New Evidence Service

In Partnership with The Centre for Medicines
Optimisation at Keele University

ScriptSwitch Monthly Summary December 2017

Monthly News Update

Season's Greetings! Welcome to the KINES Monthly News Update for December 2017.

Other recent KINES Updates have discussed:

- An [analysis of data](#) from GP practices in England and Wales that found evidence of underuse of QRISK2 to guide decisions on initiating statins.
- A [case-control study](#) reporting an increased risk of opioid-related death in people using opioids in combination with gabapentin.
- An [investigation](#) of antihypertensives, based on their potential impact on serum potassium, and the risk of cardiac arrest. Risk was higher in users of hypokalaemia-inducing, and a combination of hypo- and hyperkalaemia-inducing antihypertensives. However, given the limitations of this study, these findings should not undermine the important role of antihypertensives in reducing the risk of cardiovascular events.

Update from NICE:

- NICE has published [final guidance](#) that naltrexone-bupropion (Mysimba) **is not recommended** for managing overweight and obesity. Uncertainties about the cost-effectiveness and long-term effectiveness of this treatment were noted by NICE.

Regulatory agency safety update:

- The MHRA has issued a [Drug Safety Update](#) for eluxadoline (Truberzi), which is licensed for the treatment of irritable bowel syndrome with diarrhoea. Following reports of pancreatitis, eluxadoline should not be used in patients without a gallbladder or where there is a possibility of biliary tree/pancreatic duct obstruction (for example, gallstones) or sphincter of Oddi disease or dysfunction. Patients should be told to avoid drinking alcohol whilst on treatment, report any symptoms suggestive of pancreatitis (e.g. abdominal pain that may radiate to the back/shoulder, nausea, vomiting), and stop treatment if symptoms occur. Eluxadoline should also be under the supervision of a specialist in gastrointestinal disorders.
- The European Medicines Agency is reviewing the use of [ulipristal acetate](#) for the treatment of uterine fibroids, in light of several reports of liver injury. This review relates only to ulipristal acetate (Esmya) 5 mg tablets - there have been no reports for ellaOne (single-dose [30 mg] ulipristal acetate), which is authorised for use as an emergency contraception.

NHS England/ Public Health England:

- Following last month's publication of [guidance for CCGs](#) on items that should not be routinely prescribed, NHS England is now consulting on the prescribing of [over the counter products](#) for minor and/or self-limiting conditions. Examples of common conditions listed in the [consultation document](#) include mild acne, athlete's foot, cold sores and head lice. Vitamins, minerals and probiotics have also been included, as items of low clinical effectiveness but high cost to the NHS. The [consultation](#) runs until 14th March 2018.
- Public Health England has [advised](#) that measles outbreaks have now been confirmed in several areas of England. This is linked to large outbreaks that are ongoing in Europe (currently in Romania, Italy and Germany), with cases reported in people who had not had the complete 2 doses of the MMR vaccine. This serves as an important reminder for parents to take up the offer of MMR vaccination for their children, and to contact their GP if there is uncertainty about their child's vaccination history (see *PHE advice on [vaccine catch up](#)*). The PHE [update](#) is also encouraging people to ensure their MMR vaccines are up-to-date before travelling to countries with ongoing measles outbreaks.
- PHE has issued updated guidance on how to manage [influenza-like illness \(ILI\) outbreaks in care homes](#). An outbreak in this guidance is defined as the occurrence of 2 more cases an ILI (see [guidance](#) for definition of an ILI) or which have been laboratory-confirmed, and that have arisen within the same 48-hour period, with an epidemiological link to a care home.

- The latest [report](#) on the shingles vaccination programme indicates there has been a decline in coverage in both routine and catch-up cohorts in 2016/17 compared with previous years. (*Data for individual CCGs are also available*). GPs are being urged to continue to offer vaccinations to [eligible patients](#).
- NHS England has published '[Challenging Health Inequalities: Support for CCGs](#)'. The guide presents local data on emergency admissions, with the aim of identifying variation in more and less deprived CCGs, to help promote local discussion.

Other news:

- The useful Specialist Pharmacy Service resource "[Suggestions for Therapeutic Drug Monitoring in Adults in Primary Care](#)" has been updated. This latest version highlights situations where national guidance on monitoring either varies or is lacking, and where local guidance may therefore be useful.
- Data on the prescribing of antipsychotic drugs to patients with dementia are now available from [NHS Digital](#) ([link to Excel spreadsheet that includes CCG-level prescribing data, and other data reports on dementia diagnosis](#)). 9.4% of patients with a recorded dementia diagnosis were prescribed antipsychotic medication in the 6 weeks to 30 November 2017. Healthcare professionals may be interested in the recently-published [Practice Primer on mental health in the elderly](#), which is aimed at primary care and includes a discussion on the use (and stopping) of antipsychotics.

Drug update:

Launched

- [Trelegy Ellipta](#) (GSK), a combination inhaler containing the inhaled corticosteroid fluticasone, the long-acting beta₂-agonist vilanterol and the long-acting muscarinic antagonist umeclidinium, has been launched. This is the second 'triple' inhaler to come to the market, the first being [Trimbow](#). Both are licensed for the management of moderate to severe chronic obstructive pulmonary disease in adults who are not adequately treated by a combination of an inhaled corticosteroid and a long-acting beta₂-agonist, and are both priced at £45.50 for 30 day's treatment ([MIMS](#); Dec-17). Trelegy is used once daily, whereas Trimbow is taken twice daily.
- A previous KINES newsletter noted the launch of [Fobumix Easyhaler \(budesonide 320 micrograms and formoterol 9 micrograms\) dry powder inhaler \(DPI\)](#), a branded generic inhaler equivalent to Symbicort Turbohaler 400/12. Additional doses are now available and are priced lower than their equivalent Symbicort products, taking into consideration the price drop of Symbicort from January 2018. Current options for budesonide/formoterol DPIs are therefore as follows:

Originator product	Equivalent branded generics that are available	
Symbicort Turbohaler 100/6 120 inhalations = £28 from 1/1/18	Fobumix 80/4.5 120 inhalations = £26.99	---
Symbicort Turbohaler 200/6 120 inhalations = £28 from 1/1/18	Fobumix 160/4.5 60 inhalations = £16.99 120 inhalations = £26.99	Duoresp Spiromax 160/4.5 120 inhalations = £29.97
Symbicort Turbohaler 400/12 60 inhalations = £28 from 1/1/18	Fobumix 320/9 60 inhalations = £26.99	Duoresp Spiromax 320/9 60 inhalations = £29.97
Prices as listed on MIMS on 18/12/17, except Symbicort - communication from AZ regarding price revision from 1/1/18		

Reclassification:

- [Viagra Connect \(sildenafil 50 mg tablets\)](#) has been reclassified from a Prescription Only Medicine (POM) to a Pharmacy (P) medicine, and from Spring next year will be available without prescription for use by men over 18 who have erectile dysfunction. Pharmacists will need to complete a [checklist](#) ahead of supplying Viagra Connect, which will not be sold to men with: severe cardiovascular disorders; at high cardiovascular risk; liver failure; severe kidney failure; or taking certain interacting medicines. Use in these groups must remain under the supervision of a doctor. The [recommended retail prices](#) for Viagra Connect are: 4 Tablet Pack £16.66; 8 Tablet Pack £29.16 (excluding VAT)

On the Horizon:

- A positive opinion has been issued for [semaglutide \(Ozempic; Novo Nordisk\)](#), a once-weekly glucagon-like peptide 1 (GLP-1) receptor agonist. A final decision on approval is expected in the new few weeks.