



Important New Evidence Service

In Partnership with The Centre for Medicines
Optimisation at Keele University

ScriptSwitch Monthly Summary February 2017

Monthly News Update

Welcome to the KINES Monthly News Update for February 2017. Other recent 'KINES Rapid Updates' have covered:

- A [UK study](#) that found evidence supporting the under-prescribing of stroke prevention therapies.
- A [retrospective cohort study](#) of UK primary care data has found evidence of poor adherence to guideline-recommendations on creatinine and potassium monitoring for renin-angiotensin system (RAS) drugs.
- A [national survey](#) that has investigated GPs' understanding of, and attitudes towards, prescribing of tamoxifen in primary care for the prevention of breast cancer.

Update from NICE:

- NICE is currently [consulting](#) on potential new indicators for general practice and CCGs to be included in the NICE indicator menu. There is one proposed indicator that is related to medicines: the percentage of adult patients with an episode of acute kidney injury in the past 12 months who have received a medication review within 1 month of the diagnosis. Feedback on the indicators can be submitted until the 8th March 2017.
- NICE evidence summaries have been published for [safinamide](#) for Parkinson's disease and [oral glycopyrronium bromide](#) for drooling in children.
- NICE has [recommended](#) apremilast as an option for treating active psoriatic arthritis. The guidance specifies criteria for eligibility and continuation of the treatment.

Regulatory agency safety update:

- The European Medicines Agency's (EMA's) Pharmacovigilance Risk Assessment Committee (PRAC) has [concluded](#) that the sodium-glucose cotransporter 2 (SGLT2) inhibitor [canagliflozin](#), which is used in the treatment of type 2 diabetes, may contribute to risk of toe amputation. This safety signal has been observed in two ongoing studies that enrolled patients with a high risk of heart problems, but has not been seen in other trials of the drug. An increased risk has also not been seen with the other SGLT2 inhibitors, [empagliflozin](#) and [dapagliflozin](#), but, as data are limited, PRAC has advised that the risk may also apply to these medicines. Warnings on the risk of lower limb amputation will be included in the prescribing information, highlighting the importance of preventative foot care. For canagliflozin, lower limb amputation is listed as an uncommon side effect (occurring in between 1 and 10 patients in 1,000), and that doctors should consider stopping treatment if patients develop significant foot complications.
- The EMA has started a [review](#) into the persistence of side effects with quinolone/fluoroquinolone antibiotics. This follows the [FDA's update](#) last year to the safety warnings for fluoroquinolones and the risk of serious disabling side effects. The FDA also took the decision to restrict their use in certain uncomplicated infections.
- The MHRA has announced that [atezolizumab](#) is now available under the Early Access to Medicines Scheme (EAMS) for treatment of advanced cancer of the bladder and urinary system.

NHS England/Department of Health/Public Health England:

- The latest update to PHE's [Managing common infections: guidance for primary care](#) has been published. There have been some changes to the wording in the section on urinary tract infections (*NB first line use of nitrofurantoin remains*). Use of the [TARGET UTI](#) leaflet is also advocated.
- Public Health England and the National Falls Prevention Coordination Group (NFPCG) have published a consensus statement on [Falls and Fracture](#). The guidance is aimed at local commissioning and strategic leads in England with a remit for falls, bone health and healthy ageing, and outlines approaches to interventions and activities that may help prevent falls and fractures to improve health outcomes for older people.
- **Data update:** NHS England has made the latest update to the 'CCG Improvement and Assessment Framework Indicators', which are accessed via My NHS, [available](#) as Excel files to download. This is to enable further local analyses to be undertaken. This set of indicators covers areas such as Improving Access to Psychological Therapies recovery rates, dementia diagnosis rates, and financial performance. An [update](#) has also been published to the NHS RightCare 'Commissioning for Value Where to Look' packs. Also, NHS RightCare [mental health and dementia packs](#) are now available for CCGs.
- NHS England has published new [guidance](#) on managing conflicts of interest in the NHS. The guidance comes into force on the 1st June 2017 and is applicable to CCGs, NHS Trusts and NHS Foundation Trusts, and NHS England. It

does not apply to bodies not listed above (including, for example, general practices and community pharmacies), but NHS England is inviting these organisations to consider implementing the guidance.

- NHS England has recently launched the Veterans Trauma Network, an initiative to help deliver comprehensive ongoing medical care to veterans. More information about the initiative is available on the [NHS England website](#). Referral is via an email from the veteran's GP to a [central email address](#). A review will then be arranged at a local centre, and a personalised treatment plan developed and provided by military and civilian experts in trauma.
- New [resources](#) are available for GP surgeries, community pharmacies, etc. to help promote Hepatitis B vaccination in at-risk adults.

Other news:

- The [British Oncology Pharmacy Association \(BOPA\)](#) is the latest organisation to give support to the use of biosimilars. BOPA's position is that biosimilar monoclonal antibodies (MABs) are therapeutically equivalent to the originator molecules and can and should be used for all commissioned indications, provided pharmacovigilance safeguards are in place, e.g. branded prescribing. See the BOPA [website](#) for the full position statement. The document also describes the evidence, recommendations and practical considerations for adoption of biosimilars.
- The Royal Pharmaceutical Society (RPS) has issued new [standards](#) on optimising medicines for people in secure environments. They are for use by anyone with a role in optimising and handling medicines in England; they may also be a useful reference for organisations in Wales and Scotland.

Drug update:

SPC changes / license extensions

- The SPC for [empagliflozin](#) has now been revised to incorporate the data in reductions in cardiovascular deaths, as seen in the [EMPA-REG OUTCOME](#) study.
- [AirFluSal Forspiro](#), a branded generic version of Seretide 500 Accuhaler, is now licensed in line with the reference product for use in asthma, as well as in COPD. AirFluSal Forspiro costs less than Seretide 500 Accuhaler: 60 dose inhalers cost £32.74 and £40.92 respectively; prices may be different if rebate schemes are in place locally (costs from [MIMS](#), Feb-17).

AWMSG/SMC Update

The Scottish Medicines Consortium (SMC) has published the following advice this month:

- Accepted for use in NHS Scotland: [everolimus](#) (Afinitor; *unresectable/metastatic tumours of gastrointestinal system or lung*); [trifluridine/tipiracil](#) (Lonsurf; *metastatic colorectal cancer*); [iron III isomaltoside 1000](#) (Diafer; *iron deficiency in patients with CKD on dialysis*)
- Accepted for restricted use: [botulinum toxin A](#) (Botox; headaches in chronic migraine); [osimertinib](#) (Tagrisso; non-small-cell lung cancer); [evolocumab](#) (Repatha; primary hypercholesterolaemia/mixed dyslipidaemia)
- Not recommended: [pitolisant](#) (Wakix; narcolepsy); [vernakalant](#) (Brinavess; conversion of atrial fibrillation to sinus rhythm); [desmopressin](#) (Noqdirna; nocturia)

Please see above verdicts for full advice