



Important New Evidence Service In Partnership with The Centre for Medicines Optimisation at Keele University

ScriptSwitch Monthly Summary July 2017

Monthly News Update

Welcome to the **KINES Monthly News Update for July 2017**. All KINES articles are available online via the [KINES Evidence Service website](#). Healthcare professionals in CCGs that are Optum ScriptSwitch™ users can register to access this service [here](#).

Other recent KINES Updates have discussed:

- A new [systematic review](#) that looked at the evidence on the effects of temporarily stopping medicines to prevent acute kidney injury (commonly referred to as “*sick day rules*”).
- A [study](#) that has questioned the use of beta-blockers after myocardial infarction (MI) in people without heart failure or ventricular dysfunction. The [KINES](#) notes that the study has limitations and the results should be interpreted with caution.
- A [systematic review](#) looking at the impact of inappropriate prescribing in renal impairment.

Update from NICE:

- Previously recommended for use only in a research setting, NICE has issued a [final appraisal determination](#) (FAD) recommending roflumilast (Daxas) as an option as add-on therapy for people with severe chronic obstructive pulmonary (COPD). Severe COPD is defined as a post-bronchodilator forced expiratory volume in 1 second (FEV₁) < 50% predicted. To be considered for this option, patients should also have had 2 or more exacerbations in the previous 12 months despite use of triple inhaled therapy, and treatment should be started by a specialist. Final guidance is due out shortly.
- NICE is carrying out a [second consultation](#) on [draft guidance](#) on the diagnosis and monitoring of asthma. This follows feedback that had questioned the feasibility of some of the objective tests recommended in earlier draft guidance, in particular the availability of fractional exhaled nitric oxide (FeNO) and quality assured spirometry. This led to the guideline development being paused whilst field testing was carried out. In this latest [draft](#), some modifications have been made to the diagnostic algorithms, and there is a recommendation to consider the establishment of asthma diagnostic hubs to help implement diagnostic testing. Final guidance is due to be published in late October.
- NICE is also [consulting](#) on [draft guidance](#) on antimicrobial prescribing in acute sore throat. The draft guidance, which can also be viewed as a [visual summary](#), recommends use of the [FeverPAIN](#) score (as is also now recommended in [current Public Health England infection guidance](#)).
- A new guideline has been issued on [Parkinson's disease](#). Levodopa is the first-line option for patients with motor problems, with the recommendation to discuss a protein redistribution diet (where the majority of protein is eaten in the final main meal of the day) with people on levodopa that experience motor fluctuations.

Regulatory agency safety update:

- While an EU review of new information on liver safety is ongoing, the [MHRA](#) is advising that all patients taking the multiple sclerosis treatment daclizumab (Zinbryta) should be promptly reviewed to ensure treatment is still appropriate. Restrictions have been put in place on initiating treatment, and the drug is now contraindicated in patients with hepatic disease or impairment. (See [MHRA update](#) for full details.)

NHS England/Department of Health/Public Health England:

- A [consultation](#) has now been launched by NHS England on the proposed [guidance](#) for CCGs on items that should not routinely be prescribed in primary care. 18 products are specified:
 - co-proxamol; dosulepin, modified release (MR) doxazosin; immediate release fentanyl; glucosamine/chondroitin; herbal treatments; homeopathy; lidocaine plasters; liothyronine; lutein and antioxidants; omega-3 fatty acid compounds; oxycodone and naloxone combination product; paracetamol and tramadol combination product; perindopril arginine; rubefacients (excluding topical NSAIDs); once-daily tadalafil; travel vaccines; trimipramine; gluten-free foods.

NHS England is also seeking views on items that are prescribed in primary care and are available over the counter. Over 3,200 products are in this category, with spend by the NHS in England estimated at £645million each year.

- Public Health England (PHE) has published the 2017 [Health Profiles for England](#). Data are provided on a range of indicators for local populations, and are intended as ‘conversation starters’ to highlight local issues. A new [Health Equity Report](#) has also been published, which focusses on ethnicity. The report finds wide inequalities in health by ethnicity, but the picture is complex, with some groups doing well on some indicators and less well on others.
- Vaccine updates from PHE this month include updated leaflets on the immunisation programmes for [premature babies](#), babies at [one year of age](#), and [young people](#). Invitation letter [templates](#) for the 2017/18 flu season are also now available. The latest Vaccine Updates discuss the [BCG vaccine](#), restrictions for which have now been lifted, and the new [hexavalent vaccine](#) for children. Updated [Hepatitis A prevention and control guidance](#) has been published, as have new temporary recommendations on Hepatitis A immunisations for [children](#) and [adults](#), in light of ongoing outbreaks and vaccination shortages. These recommendations cover travel vaccinations and dose-sparing advice to conserve stocks of monovalent hepatitis A vaccines.

Other news:

- A new [BNF & BNF-C App](#) is available to download for free from the App Store and Google Play. It features the same content structure as the new BNF print and web editions, and includes an ‘interactions checker’. Athens authentication is no longer needed to download content.
- The latest overview of [prescriptions dispensed in the community in England](#) is available. The number of items dispensed in 2016 rose by 1.9%, but costs fell by 0.7%. Antidepressants showed the greatest rise in prescribing, increasing by 6% between 2015 and 16. Other notable changes are the increased use of metformin, but decrease in net costs, primarily due to the lower cost of the MR formulation which is seeing significant use. Anticoagulant costs rose by around a third between 2015 and 16. Spend on drugs for mental disorders has fallen, due to Category M price reductions, reduced use of leading branded MR tablets, and the patent expiry of aripiprazole.
- The latest Commissioning Excellence [newsletter](#) looks at the first year of the clinical pharmacists in general practice programme, presenting the experiences of a number of pharmacists who have moved into this role.

Drug update:

Pregabalin update:

- From August 2017, pregabalin capsules will be added to [category M](#) of the Drug Tariff. The Drug Tariff prices for non-proprietary pregabalin are shown below and are **substantially** lower than the Lyrica, as well as the branded generics that may have been recommended by some organisations to help maximise cost savings in the interim period ahead of the move to category M. Thus, generic pregabalin, which can now be prescribed for all licensed indications, including neuropathic pain, is the lowest cost option. Regarding drug switches in epilepsy, the [MHRA advice](#) for pregabalin is that it is considered a category 3 antiepileptic, and that is it is usually unnecessary to ensure that patients are maintained on a specific manufacturer’s product unless there are specific concerns (e.g. patient anxiety; risk of confusion; dosing errors).

Dose (number of capsules)	Non-proprietary pregabalin	Lyrica	Alzain	Lecaent	Rewisca	Axalid* (all 56 capsules)
Pregabalin 100 mg capsules (84)	£2.98	£96.60	£44.95	£96.59	£68.10	£19.95
Pregabalin 150 mg capsules (56)	£2.29	£64.40	£24.95	£64.39	£45.40	£19.95
Pregabalin 200 mg capsules (84)	£3.60	£96.60	£44.95	£96.59	£68.10	£19.95
Pregabalin 225 mg capsules (56)	£3.11	£64.40	£24.95	£64.39	£45.40	£19.95
Pregabalin 25 mg capsules (56)	£1.87	£64.40	£24.95	£64.39	£45.40	£19.95
Pregabalin 300 mg capsules (56)	£4.17	£64.40	£24.95	£64.39	£45.40	£19.95
Pregabalin 50 mg capsules (84)	£2.28	£96.60	£44.95	£96.59	£68.10	£19.95
Pregabalin 75 mg capsules (56)	£2.03	£64.40	£24.95	£64.39	£45.40	£19.95

Prices as of 25/7/17, based on [MIMS](#), except for non-proprietary pregabalin ([Drug Tariff Aug17 update](#)) and *Axalid ([manufacturer's website](#)); all Axalid prices are for 56 capsules)

Other drug updates:

- Nasonex Allergy Control Nasal Spray** (mometasone furoate 50 micrograms per dose nasal spray) has been [reclassified](#) and will soon be available for patients to buy over the counter. Targeted as a prescribing saving by some CCGs, prescribers are reminded that generic mometasone 50 micrograms per dose nasal spray is also available and costs much less than branded Nasonex (costs of £1.98 vs. £7.68 for 140 dose units respectively ([MIMS, Jul-17](#))).
- The anti-malarial Maloff Protect (atovaquone and proguanil) has now also been [reclassified](#) to a pharmacy (P) medicine. The tablets will be available to adults weighing more than 40kg, travelling to areas affected by malaria and where the parasite is not resistant to these antimalarials.
- NovoNordisk has issued [safety information](#) for users of NovoPen Echo or NovoPen5 insulin devices. Users of affected batches (see [announcement](#)) should contact the manufacturer to replace the devices.