NHS Forth Valley

Prescriberfile

From the Primary Care Prescribing Group

Methotrexate—Ensure Folic Acid is Co-prescribed

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Please Circulate to All Staff

Methotrexate (MTX) is commonly used as a first line disease-modifying-anti-rheumatic-drug (DMARD) for rheumatoid arthritis. MTX inhibits a number of folate-dependent metabolic steps which can cause folate deficiency and lead to the following common adverse effects:

- minor effects e.g. mouth ulcers and gastrointestinal disturbance
- major effects e.g. bone marrow toxicity and liver function test abnormalities

It is recommended that folic acid is co-prescribed with MTX to minimise the risk of these adverse effects. Folic acid supplementation should be **continued for the duration of MTX therapy** because adverse effects can occur at any time.

A 5mg dose of folic acid should normally be taken once weekly but **not on the day that MTX is administered**. Occasionally some patients may be recommended to take folic acid daily except on the day that MTX is taken (i.e. taken on 6 days a week).

An easy way to remind patients is -

Methotrexate once weekly on **M**onday

Folic acid once weekly on **F**riday

To minimise the risk of MTX adverse effects:

- Prescribers should ensure that all patients have folic acid 5mg co-prescribed.
- Prescribers and pharmacists should ensure that patients are ordering and taking their folic acid as prescribed.

Ensure Accurate EMIS Records for Safer Hospital Admissions

Recent medication issues in FVRH have highlighted the risks posed when Electronic Care Summaries (ECS) are not an accurate reflection of a patient's current medication. While other measures are also in place to reduce this risk on admission to hospital, inaccurate ECS records pose a threat to patient safety.

GP Practices are reminded of the importance of good housekeeping of patient medication on EMIS, to ensure the accuracy of ECS, and accurate transfer of medicines information at the primary-secondary care interface.

To ensure patient safety at the time of admission to hospital:

- Ensure EMIS Records are up to date, including removal of discontinued medication.
- The addition of any medications prescribed outside the GP Practice will ensure as complete a record as possible —these should be prescribed as '**Outside'** medicines. Recent updates to EMIS prevent these being issued on a GP10, whilst ensuring that the medicines are used for clinical safety check. See the Feb/March 2017 Prescriberfile for details of adding '**Outside'** items.

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Key Points of interest:

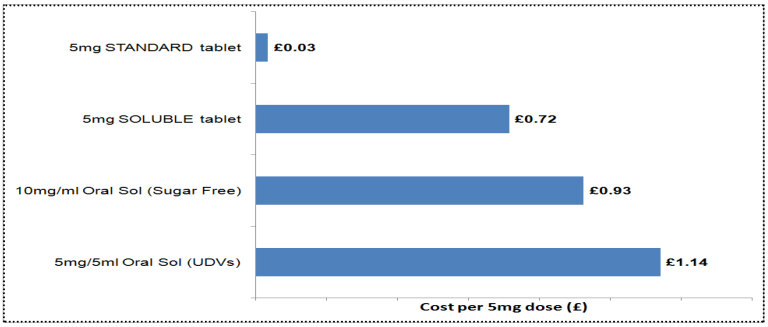
- Ensure Folic Acid is co-prescribed with methotrexate. Ensure Folic Acid being ordered and taken by the patient.
- Ensure accurate EMIS records for accurate ECS and safer hospital admissions
- Crushing/dispersing of prednisolone tablets is NOT supported by ADTC. Use a licensed product for patients with swallowing difficulties.
- Esmya® (ulipristal) safety update—don't initiate or restart. Monitor LFTs in recent users.
- Rapilose® OGTT ,is the product of choice for oral glucose tolerance testing
- Various Drug Safety updates

Choice of Prednisolone Product in Patients Unable to Swallow Tablets

Following agreement by the Area Drugs and Therapeutics Committee (ADTC) prescribers are advised that **standard prednisolone tablets** are the preferred formulation where oral prednisolone is required.

- Crushing or dispersing the standard tablets is **not supported** by the ADTC.
- **For patients with swallowing difficulties who are unable to swallow tablets**, **a licensed product should be used.**
- Options include soluble tablets, 5mg/5ml oral solution unit dose vials or a 10mg/ml solution.
- **The most cost-effective licensed option which is suitable for the patient should be selected.**

Reserving soluble tablets/solution for those situations where they are necessary will ensure clinically appropriate, cost-effective prescribing. This approach will be taken in all sectors (Out-of-Hours, Primary and Secondary Care) for patients unable to swallow tablets.



Costs (£) for 5mg dose of different Prednisolone preparations.
Prices from Scottish Drug Tariff (June 2018) or dm+d (June 2018)

The 10mg/ml oral solution requires fridge storage.

Esmya® (ulipristal acetate) for uterine fibroids: do not initiate or re-start treatment; monitor liver function in current and recent users

Temporary safety measures are in place while an EU review investigates the link between cases of severe liver injury and Esmya®.

Prescribers should not initiate new treatment courses of Esmya®, including in women who have completed one or more treatment courses previously. Liver function tests should be performed monthly in women currently taking Esmya® and after 2-4 weeks after stopping treatment. For further information see the March 2018 Drug Safety Update.

Rapilose® OGTT — the recommended product for Oral Glucose Tolerance Test

The Forth Valley Diabetes Network have noted that there may be variation in how GP practices are undertaking Oral Glucose Tolerance Testing (OGTT) (e.g. using Lucozade®, glucose powder or Rapilose®). Changes in the formulation of Lucozade® last year further complicated this.

The Forth Valley Diabetes Network advises that where a practice decides that OGTT testing is necessary, **Rapilose® OGTT solution** is the agent of choice in Primary Care, as it provides 75g glucose in a fixed quantity of a palatable liquid .

- For oral glucose tolerance testing, the standard dose for an adult is one pouch of Rapilose® OGTT Solution (300ml/75g anhydrous glucose).
- This can be easily adjusted to paediatric applications based on body mass.
- The dose for children that weigh less than 43kg is 7ml (1.75g anhydrous glucose) per kg of body weight. The total children's dose should not exceed 75g (300ml).
- Each 300ml pouch of Rapilose® OGTT Solution contains exactly 75g anhydrous glucose, which is the adult dose recommended by the World Health Organisation in oral glucose tolerance testing.
- Rapilose® OGTT Solution is produced in a ready to drink format in a 300ml aluminium foil pouch with a tamper evident twist off cap.
- Rapilose® OGTT Solution is a pleasant tasting orange flavoured drink that is non-carbonated and contains no colour additives. It is also gluten, lactose, fat, caffeine and alcohol free.
- Rapilose® OGTT Solution is £3.48 per dose and can be obtained via local pharmacies.

Drug Safety Updates

Selected highlights from recent Drug Safety Update Bulletins from the MHRA (https://www.gov.uk/drug-safety-update)
Prescribers are encouraged to subscribe directly to the Drug Safety Updates Bulletin which is only available by email.
www.gov.uk/government/organisations/medicines-and-healthcare-products-regulatory-agency/email-signup

Recent Drug Safety Updates you may have missed.....

Miconazole oral gel (Daktarin®) use with caution in patients taking warfarin

The concomitant use of miconazole oral gel with warfarin may result in over-anticoagulation. Closely monitor patients and advise patients to stop oral miconazole gel and to seek immediate medical attention if they experience signs of over-anticoagulation e.g. unexplained bruising, nosebleeds or blood in urine. For further information see full article Sept 2017 Update.

Quinine: reminder of dose-dependent QT-prolonging effects; updated medicine interactions

- Quinine has dose-dependent QT-interval-prolonging effects and should be used with caution in patients with risk factors for QT prolongation such as pre-existing cardiac disease, electrolyte disturbances or in patients taking other medicines that prolong the QT interval or in those with atrio-ventricular block. For further information see full article Nov 2017 Update.

Prescribers are reminded that quinine should not be prescribed routinely for the treatment of nocturnal leg cramps, and should only be considered when cramps cause regular disruption of sleep. See the Drug Safety Update for more info.

Oral tacrolimus products: reminder to prescribe and dispense by brand name only -

Tacrolimus has a narrow therapeutic index. Inadvertent switching between tacrolimus products has been associated with reports of toxicity and graft rejection. For further information see full article Nov 2017 Update.

Drug-name confusion: reminder to be vigilant for potential errors

The Jan 2018 Update included a reminder to take particular care when prescribing or dispensing medicines that could be confused with others. Recent examples of common errors reported as Yellow Card Reports are:

Clobazam	Clonazepam
Atenolol	Amlodipine
Propranolol	Prednisolone
Risperidone	Ropinorole
Sulfadiazine	Sulfasalazine
Amlodipine	Nimodipine

Co-dydramol—prescribe and dispense by strength to minimise risk of medication error -

Generic co-dydramol (dihydrocodeine/paracetamol) is now available in 3 strengths (10/500, 20/500 and 30/500 tablets). Previously higher strength combinations of co-dydramol (Remediene®/Remediene® Forte) have been prescribed as 'paracetamol and dihydrocodeine'.
As GP and Pharmacy systems are updated to take account of the new generic description, extra vigilance will be required to ensure that the correct strength of co-dydramol is prescribed and dispensed.
For further information see full article January 2018 Update

Head lice eradication products: risk of serious burns if treated hair is exposed to open flames or other sources of ignition –

Some products for the eradication of head lice infestations are combustible/flammable and can ignite or cause serious harm in the presence of an open flame or other sources of ignition e.g. when lighting cigarettes. Those using the product should be advised not to smoke around treated hair and that it should be kept away from open flames or other sources of ignition, including in the morning, after overnight application, until the hair is washed. For further information see full article March 18 Update.

Contact Information:
General Primary Care Prescribing Advice:
Contact your Primary Care Pharmacist; or alternatively
Primary Care Prescribing Support Team on 01324 673611

For Advice Related to Management of Controlled Drugs:
Kirsty Peacock, Inspection Officer for Controlled Drugs,
NHS Forth Valley, Forth Valley Royal Hospital Tel: 01324-566743