

Please circulate to all relevant staff

Prescribing Safety Advice

Combination Products - Interaction Awareness

When prescribing multi-ingredient medicines, it is generally accepted best practice that these products are prescribed by brand name to ensure the correct formulation is supplied. However, a recognised risk of brand prescribing is that prescribers may be less familiar with the individual active ingredients contained within combination products. This can increase the risk of unintended duplication of therapy or failure to recognise relevant cautions and interactions.

A recent Incident Report (IR1) within the acute service highlighted this issue. A patient was prescribed dapagliflozin alongside Synjardy®, a combination product containing empagliflozin and metformin. As a result, the patient was inadvertently prescribed two sodium-glucose co-transporter 2 (SGLT2) inhibitors concurrently.

Prescribers are therefore reminded to remain vigilant when prescribing for, or reviewing patients receiving, brand-named combination products. Where there is any uncertainty regarding the constituent medicines, the product should be checked to confirm that there is no duplication of therapy or interaction with other medicines the patient is receiving.

Incident Reporting - Reminder to include medicine names

A recent review by the Medicines Safety Group (MSG) noted that 50% of medication-related IR1s did not include the name of the medicine involved. When submitting IR1s relating to medication incidents, clinicians are reminded that the name of the medicine involved must always be recorded. Omission of this information significantly limits shared learning from the incident and may increase the risk of similar incidents recurring.

Isotretinoin - Side Effects Awareness

Isotretinoin is licensed for the treatment of severe acne and, within NHS Forth Valley, prescribing is restricted to specialist services only.

Primary Care clinicians should remain vigilant for patients presenting with symptoms that may be associated with isotretinoin use.

Isotretinoin has been associated with psychiatric adverse effects. **Clinicians should therefore be alert to patients treated with isotretinoin who present with symptoms including depression, anxiety, mood changes, aggression, psychotic symptoms, or suicidal ideation⁽¹⁾.**

To support the identification of potential adverse effects, **it is essential that isotretinoin supplied by specialist services is recorded on the patient's Primary Care record as an outside issue.** This not only supports timely recognition of possible side effects but also helps identify potential interactions with other medicines.

1) Summary of Product Characteristics: Isotretinoin 10mg soft capsules. Available at: <https://www.medicines.org.uk/emc/product/10555/smpc> (accessed 10/03/2026)



Safety Reminder: Epimax® Products and Risk of Eye Injury

Epimax® Original Cream is currently listed on the Forth Valley formulary.

In 2023, the manufacturer issued a Field Safety Notice ([FSN](#)) for Epimax Ointment, Epimax Paraffin Free Ointment, and Epimax Original Cream, following reports of eye-related injuries in patients using these products on or around the eye area.

A further [FSN](#) was issued in 2024 for Epimax Ointment and Epimax Paraffin Free Ointment, expanding on the original warnings and highlighting that, due to their ingredients and ointment consistency, these formulations may take longer to remove or wash out from the eye, if accidental exposure occurs.

Key Safety Points

- ➔ Patients should be advised to avoid contact with any of these products with their eyes.
- ➔ Epimax Original Cream should not be applied to the skin on or around the eyes.
- ➔ Epimax Ointment and Epimax Paraffin Free Ointment should be applied to the body only and not used on the face or around the eyes. Patients should be advised to wash their hands after application and avoid touching their eyes.
- ➔ If any of these products come into contact with the eye(s), patients should rinse the eye(s) with water immediately and seek medical advice.
- ➔ Safety warnings are included on product packaging to remind patients to avoid eye contact and the action to take following accidental exposure.

Prescribing Improvement Initiative Update

Update for 2025/26

The 2025/26 PII project is scheduled to complete by the end of March 2026, with the exception of PQI 11 (review of DPP 4 inhibitors), which will continue until the end of July 2026.

To date, 12,105 patients have been reviewed across the 14 workstreams delivered this year. From 1st April 2026, the anticipated recurring annual savings for NHS Forth Valley are estimated to be approximately £1.7 million.

For PQI 11, uptake remains variable, with 25 of the 47 PII participating practices having submitted a claim for this workstream to date. Practices are encouraged to undertake the DPP 4 inhibitor review as part of patients' annual diabetes chronic disease reviews.

Forth Valley Guideline Updates (full list available on intranet)

Prescribing Guidance for GP Practices - A Good Practice Guide

This updated guideline provides good practice guidance for GP practices to support safe and effective prescribing. It covers prescribing of acute, permissible repeat and long-term repeat medicines, prescription processing and security, management of lost and urgent prescriptions, recording of outside and private prescriptions, the Medicines, Care and Review (MCR) service, and signposting to Community Pharmacy services.

For patients receiving medication via a **Monitored Dosage System (MDS)**, such as a dosette box, the read code **8B1A** should be added to the patient record.

Administration of Intravenous (IV) Medications in NHSFV

This guideline sets out education and training requirements and safe procedures for the preparation, labelling and administration of medicines via the intravenous route. It applies to all staff involved in the preparation and administration of fluids and medicines by injection or infusion within NHS Forth Valley.



Useful Information & Resources

Update: [National Polypharmacy Guidance 2026-2029](#)

The Scottish Government has published updated Polypharmacy Guidance (2026–2029), replacing the previous 2018 edition. This fourth edition aims to support the prevention of inappropriate polypharmacy at every stage of the patient journey.

The guidance reinforces use of the 7-Steps approach for both initiation of new medicines and review of existing treatments. Key updates include refinements to the Drug Efficacy (Numbers Needed to Treat) tables, along with updated guidance on cumulative toxicity and anticholinergic burden.

See the full guidance [here](#).

Update: [Quality prescribing for chronic pain: guide for improvement 2026-2029](#)

The Scottish Government has published updated Quality prescribing for chronic pain guidance (2026–2029), replacing the previous 2018 edition.

The revised guidance has been expanded to provide additional practical support to multidisciplinary teams (MDT), with a focus on communication and non-pharmacological options. The guide explores:

- Chronic pain in society
- How to have an effective chronic pain consultation
- Non-pharmacological approaches
- Benefits and limitation of treatment with medication
- Opioid management

See the full guidance [here](#).

UK Medicines Information - Position Statement on Artificial Intelligence (AI)

UK Medicines Information published a “Position Statement on the use of Artificial Intelligence (AI) in Medicines Information (MI) or Medicines Advice Services” (May 25). They acknowledge the rising use of AI in healthcare, including opportunities for improving the efficiency of undertaking medicines information enquiries. However, they also recognise potential risks such as inaccuracies, biases, data privacy concerns, and lack of transparency. For instance, AI may produce responses that appear credible but are not necessarily accurate, sometimes resulting in fabricated information known as ‘hallucinations’.

Further information on the limitations and risks of using AI in Medicines Information is included in their position statement. Consequently, their recommendation is that AI should be seen to augment human intelligence, including the expertise of a healthcare professional, but not replace this human intelligence.

Importantly, when using AI, the accuracy and validity of a response to a medicines information enquiry remains the professional responsibility of the healthcare professional undertaking it. Several risk mitigation strategies have been proposed in the context of Medicines Information Services, including:

- All AI-generated information must be critically appraised for accuracy and relevance by an appropriately trained person.
- All references suggested by AI must be checked for existence and appropriateness before inclusion in developing an MI answer.
- Sensitive patient-specific or enquirer-specific data must never be inputted into an AI server. Compliance with data protection standards is mandatory.

Further information on its use within NHS Forth Valley can be found at the following page: [A.I. in the Workplace: What You Need to Know](#)



Forth Valley Formulary Updates

Addition, deletions & changes

- Systane Balance® eye drops have been **added** to the formulary for meibomian gland deficiency and other severe dry eye conditions. Restricted to specialist initiation only, though may be continued in Primary Care.
- QV Lotion has been **removed** from the formulary
- The Alzest® brand of rivastigmine patches have been **removed** due to their discontinuation. Rivastigmine patches are now listed generically.

Product Updates

New generics to be aware of

- New generics have launched for **Intuniv® 1-5mg modified-release tablets**. If prescribing this medicine, please do so generically as guanfacine 1-5mg modified-release tablets.

