

General Practice Updates

NHS

Stockport

Clinical Commissioning Group

Prescribing
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Antibiotic Resistance

BRIT project – Using data to tackle antibiotic resistance

This project, delivered by the Greater Manchester Connected Health Cities, is applying a tech savvy solution to help understand and tackle the problem of antibiotic resistance.

By making better use of health data and presenting results in a more powerful way, researchers at The University of Manchester believe they can start to reduce the demand for antibiotics.

The BRIT team will be accessing anonymous GP records, A&E departments and out-of-hours clinics during the project and are looking for GP practices who may be interested in supporting this local project.

The results of these analyses of the anonymised data will be provided in an easy-to-understand dashboard so you can see how your surgery compares to others. The system will also allow GPs to access more detailed information about symptoms and guidance to ensure they only prescribe antibiotics when they are required by the patient.

To be involved please drop an email to jangrime@nhs.net who will pass on your details to the Greater Manchester lead who will at this stage give you more information about the project and its anticipated benefits.

In 17-18 there was a national drive to reduce prescribing of antibiotics by 10%. Practices that were not making progress on this had letters from Public Health England and this project would most benefit those Stockport practices with the highest rates of antibiotic prescribing, who received a letter. The target reduction for 18-19 has been set at 20% against the 15-16 levels and so many other practices may wish to take part.



Sore throat (acute): antimicrobial prescribing

This recently published NICE guideline sets out an antimicrobial prescribing strategy for acute sore throat. It aims to limit antibiotic use and reduce antimicrobial resistance through assessment based on key symptoms. The main messages are:

- acute sore throat is often caused by a virus
- lasts for about a week
- most people will get better without antibiotics.

Evidence shows that withholding antibiotics rarely leads to complications. To access the recommendations including how to manage 'acute sore throat', self-care advice and diagnostic pointers [click here](#)

Greater Manchester Antimicrobial Guidelines – Quarterly update

The Greater Manchester Antimicrobial Guidelines which replaced our local guidance in October 2017 have recently been updated. There are several changes including:

- **Acute exacerbation of COPD:** changed to make doxycycline an alternative 1st line option to ensure patients who need doxycycline in rescue packs do not receive amoxicillin in error. Amoxicillin 500mg – 1g TDS or Doxycycline 200mg stat then 100mg OD Duration: 5 days If resistance: consider microbiology advice.
- **UTI in children:** Added trimethoprim as an alternative 1st line due to difficulties obtaining nitrofurantoin liquid & its high cost i.e. Nitrofurantoin or trimethoprim as risk of resistance is lower in children.
- **Recurrent UTI's in non-pregnant women:** Changed dose of trimethoprim from 200mg to 100mg to match the dose in NICE, PHE and BNF.

The updated guidance is available on the [GMMMG website](#) or on the formulary section of the [Stockport CCG website](#).

Improving care for patients with diabetes and a learning disability

Diabetes UK have produced resources and tools to improve care for patients with diabetes and a learning disability. This includes identification and communication with people with learning disability and their supporters. Resources and tools include: easy read resources, training and information resources for commissioners and practitioners. These resources can be [accessed here](#).

Updated branded generic list

The updated list is now available [here](#). Practices should replace the old versions wherever they use them.

Please remember generic prescribing should be the norm. The brands specified on this list are where there is a clinical or financial benefit to the NHS from using the brands specified

PBMC corner

March training included:

- A presentation of the Viaduct Enhanced Pharmacy Project by Stacey Davidson, Repeat Prescribing Project Lead
- Details shared of the new brand to generic list and also new items added to black list, these will be included in future ePACT searches. A reminder to PBMCs to access the latest version and archive any previous versions of the list
- A presentation on electronic repeat dispensing (eRD) to support the current work on increasing the number of patients using this method
- SOPs – This month the branded paracetamol SOP was launched and is a change from generic to Mandanol®. Prescribers are encouraged to review the need for prescribing paracetamol and also to consider reducing the quantities prescribed, See SOP guidance for further details.
- The ePACT monthly reports for black, red, grey & specials have been shared, please note these will not include any recent updates to the black/grey lists.

Next PBMC training sessions will be held on Tuesday 22nd May 10.30am-12pm and Thursday 31st May 1.30pm-3pm

Blacklist

GMMMGMG has added some new lines to the Do not Prescribe (DNP) list and we have added them to our local blacklist. These are:

- **Trimipramine**
- **Perindopril arginine**

All were lines identified in the recent national consultation on drugs that were considered to be a low priority for funding. Further changes will be seen over the next few months as the Department of Health acts on the decisions made after the consultation.

The status of **Omega 3 fish oils (Elcosapentanoic acid)** has been updated to a black list status following on from the same consultation. Locally these have been grey- listed but now become blacklisted.

We have also added further lines to the blacklist as they offer no benefit over generic formulations and are significantly more expensive:

- **Branded Lustral**
- **Branded Eflexor**

The updated list, version 1.8 can be found on the [CCG website](#).

NICE Bites - Age-related macular degeneration (AMD)

[The February edition](#) focuses on age-related macular degeneration (AMD). Sections covered include:

- Classification of AMD
- Risk factors
- Diagnosis and referral
- Treatment and management
- Pharmacological management
- Antiangiogenic therapies
- Adjunctive therapies
- Switching and stopping antiangiogenic treatment, and
- Monitoring.



Lacri-lube stock issues

Lacri-lube is currently out of stock and there is no date on when it will be back in stock.

This is a good opportunity to switch to Xailin Night 5g which is the preferred CCG option for liquid paraffin preparations.



Discontinuation: Multiclix lancets



Accu-check has discontinued the Multiclix lancet device used in the self-monitoring of blood glucose in diabetes. Their replacement is the Accu-check Fastclix device which operates in a similar way.

Patients still using the Multiclix will require a new lancet device, so please take this opportunity to upgrade any old meters to one in the [CCG guidance](#). The Fastclix device is included in both of the Accu-check guidance options (Performa Nano and Mobile). Alternatively, the patient can obtain a new lancet device/meter free of charge direct from Accu-check by calling 0800 701 000.

Once the patient has a device they are happy with, new lancets can be issued via an FP10.

MHRA alerts and other safety warnings

There have been recent safety alerts for **Ventolin and Sertide accuhalers**.

Please ensure these have been actioned in your practices and that all prescribers are made aware of alerts. In recent CQC inspections safety has been noted to take on a much higher profile and inspectors have been verifying that action has been taken on key alerts, such as the Sodium Valproate and Warfarin NHRA alerts.

Their focus has not only been on ensuring that action has been taken, but also that the systems and processes within the practice have embedded the advice issued.



Medicines &
Healthcare products
Regulatory Agency

GMMMG Consultations

The current GMMMG consultations are:

- Aligning the GMMMG criteria for listing on the DNP or grey lists with the National criteria used in recent consultations closing on May 22nd
- Shared Care protocols closing on May 18th for:
 - Ciclosporin in Childhood nephrotic syndrome
 - Sulfasalazine in IBD
 - Domperidone in Paediatric gastro-oesophageal reflux
 - Disulfiram in alcohol dependence



Please feed any relevant comments in to [GMMMG here](#).