

# Identifying risk factors for developing a long QT interval – SPS guidance

The QT interval represents the heart ventricles contracting and relaxing, and varies with heart rate. Changes in the QT interval can have a significant impact on the heart rhythm. A long QT interval can lead to torsades de pointes, a life-threatening ventricular arrhythmia, and sudden cardiac death. Medicines can impact the QT interval by causing electrolyte disturbance, inhibiting the breakdown of a medicine known to cause long QT interval or by additive effects on the QT interval. There are both predisposing and modifiable risk factors in relation to a prolonged QT interval – these should be taken into account before starting a medicine known to cause a long QT interval. Review people on a case-by-case basis to minimise the risk of a long QT interval.

## Mirena<sup>®</sup> for HRT

Where a progestogen intra-uterine device (IUD) is intended to be used solely for hormone replacement therapy (HRT) and not contraception, please prescribe/supply the branded Mirena<sup>®</sup> product. Other progestogen IUDs such as Levosert<sup>®</sup>, Benilexa<sup>®</sup>, Kyleena<sup>®</sup> and Jaydess<sup>®</sup> are not licensed for use in HRT.

The Dorset formulary entry for Mirena<sup>®</sup> states: *The 52mg LNG-IUS Mirena offers protection against the stimulatory effects of oestrogen as part of hormone replacement therapy. Mirena is licensed in the UK for protection from endometrial hyperplasia when combined with oestrogen. Unfortunately, when the application was made for a licence 4 years was requested, rather than 5 years. However, the Faculty of Sexual and Reproductive Healthcare supports use of up to 5 years for this purpose off label. To guarantee endometrial protection, the device must be changed every 5 years irrespective of age at the time of insertion.* 

Additionally, a reminder that use of Mirena<sup>®</sup> for HRT purposes is outside of the current Public Health Dorset CHIS LARC service, and therefore practices need to have a clear process in place to ensure the correct payment mechanism is used depending on whether the Mirena<sup>®</sup> was used for contraception or HRT.

# SystmOne configuration for non-medical prescribers with HCPC code

The NHS BSA have advised that for healthcare professionals registered with the Health and Care Professionals Council (HCPC) who are working in GP practices and using SystmOne, an extra zero needs to be added to the HCPC code for prescribing purposes.

Professionals who are registered with the HCPC include paramedics and physiotherapists, therefore for these groups of professionals, the HCPC code should be entered into SystmOne with the following format: **PAONNNNN** (paramedic) **or PHONNNNN** (physiotherapist).

In cases where the code is less than 8 digits, it can cause problems with the healthcare professional's prescriptions being processed by the NHS BSA, so practices are encouraged to check current SystmOne configurations for paramedics and physiotherapists to ensure that they are using an 8 digit code. More information about configuring SystmOne can be found in the medicines team <u>prescriber codes guidance</u>.

### Important shortages/supply disruptions

- Serious Shortage Protocols have been issued for clarithromycin 125mg/5ml and 250mg/5ml oral suspension. The SSPs will enable community pharmacists to supply patients with clarithromycin 250mg/5ml oral solution (for SSP053) and clarithromycin 250mg tablets (for SSP054). The SSPs came into effect on 6 April and are currently scheduled to end on Friday 28 April 2023.
- Estriol (Imvaggis®) 0.03mg pessary is out of stock until late May 2023. There are alternative estriol vaginal products available. Estriol (Ovestin®) 0.1% cream is on the Dorset formulary.
- Oxycodone Hydrochloride 5mg/5ml Oral Solution is out of stock until the end of June 2023. 5mg and 10mg immediate release capsules remain available, as do alternative liquid opioid formulations.

This newsletter is for healthcare professionals and must not be discussed with persons outside the NHS. It represents what is known at the time of writing so information may be subsequently superseded.

### Quick bites

- The Dorset Formulary is available at: <u>www.dorsetformulary.nhs.uk</u>.
- Kidzmed Pill School! Teaching children (5 years +) how to swallow tablets & capsules instead of liquid medicines. (Better for children, parents & the environment). Children & parents/carers can be referred to an outpatient Pill School 'class' at Poole Hospital lead by paediatric specialists, and paediatric team also offer training to primary care staff who would like to deliver the KidzMed Pill School in their own setting. Please contact paediatricpharmacists@uhd.nhs.uk for further details.
- In 23/24 the resources to support your practice and quality you deliver will be enhanced by familiarising yourself with PrescQIPP. Many healthcare professionals are already registered, but if not, you could benefit from masterclasses, clinical skills webinars, bulletins and webkits and data that PrescQIPP offers. Please note that you no longer need a key passphrase to <u>register</u>. In the Organisation section of registration, simply choose 'ICS Dorset'.
- Health Education England has commissioned an important study concerning the training, role and employment of pharmacy technicians, designed to support future workforce development. If you are a pharmacy technician, you are invited to <u>participate in the survey</u>.
- Read the report and findings of the <u>community pharmacy oral anticoagulant safety audit</u> conducted as part of the 2021/2022 pharmacy quality scheme (PQS).
- The medicines team is currently undertaking a piece of work to ensure that the current records of nonmedical prescribers linked to GP practices in the NHS BSA database (and able to generate prescriptions for patients of these practices) are correct. All practice managers should have received an email request to review the list of NMPs during April. Thank you to practices that have already responded. Letting us know about non-medical prescribers working with you is important as it helps us to ensure costs of prescribing are allocated to the correct practice and PCN. If you can't find an email about this, please get it touch via: <u>hayley.braid@nhsdorset.nhs.uk</u>
- Please do not send queries to the team via Accurx, as this includes patient identifiable data. Please send any emails from individual or PCN email addresses. The NHS Dorset Medicines Team are able to provide advice on local formulary and local, regional and national commissioning policy/position on drugs and devices. For pharmaceutical advice related to the care of a specific patient, please liaise with your PCN clinical pharmacy teams. The medicines team can only provide information to inform decision making as opposed to individual patient advice.

#### **REGIONAL MEDICINES INFORMATION SERVICE**

If you work in primary care (including community pharmacy), specialist medicines advice can be obtained from SPS via **0300 7708564** or email <u>asksps.nhs@sps.direct</u>. (Staff in Dorset NHS Trusts should seek advice from their pharmacy teams).