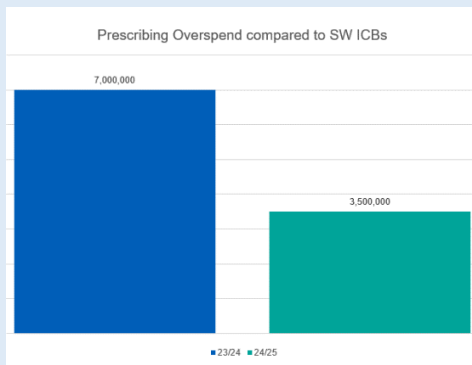


Medicines optimisation and financial stewardship



Prescribing medicines that are both optimised for individuals and make best use of NHS resources in Dorset continues to be a real challenge for clinicians and commissioners as new medicines / technologies become available such as tirzepatide (see below).

Last year we spent £7m (5%) more on medicines in Dorset than other South West ICBs. Together we aim to work to halve that gap this financial year.

A positive approach to using NHS resources for medicines that most benefit people will help us return to financial balance in prescribing.

NHS Dorset have started to explain to people why we are choosing to make the investments in medicines that promote better outcomes (e.g. CVD prevent) rather than [over the counter medicines](#). A good example of working together to explain best use of resources has been the '[Only Order What You Need](#)' campaign where general practice & community pharmacy with NHS Dorset reduced medicines waste by £350,000 in February & March. Thank you to everyone who got involved!

Tirzepatide in type 2 diabetes

During the current shortage of GLP-1 RAs, oral semaglutide first-line (**GREEN**) and second-line tirzepatide (**AMBER** specialist initiation only). We anticipate generic Liraglutide will add to GLP-1 supply in the NHS in November this year and we will continue to provide further updates on supply.

Tirzepatide has been added to the formulary in April as **AMBER** specialist initiation only, after consultation with the diabetes specialist clinicians and in recognition of the drug's black triangle status. NHS Dorset is publishing a revised pathway to help visualise the place of tirzepatide in [pharmacological management of type 2 diabetes in Dorset](#). This will build on the excellent work practices have done in reviewing the clinical effectiveness of GLP-1s and in the future.

The [commissioning statement](#) explains the clinical criteria for prescribing and a diabetes specialist will be able to prescribe the first supply or recommend initiation to a primary care clinician. A 'tirzepatide' [template in SystemOne](#) will support you in read coding and documenting the name of the requesting clinician, clinical criteria, and link you to a patient agreement form which we ask you to use for all initiations of GLP-1/GIP agents to help discussions with patients about when these medicines should change.

MHRA reviewing safety of montelukast as Yellow Card reports increase

Whilst the risk of neuropsychiatric reactions is a known potential side effect of montelukast, it is currently under review by the MHRA following an increased number of reports from patients who have experienced such reactions. [Yellow Card data](#) shows 143 reports of psychiatric disorders associated with the drug in 2023, the highest ever number reported in a year. Whilst the MHRA review is underway, a reminder of the [safety advice published by the MHRA back in 2019](#):

- be aware of recognised neuropsychiatric reactions of montelukast, such as nightmares/night terrors, depression, insomnia, aggression, anxiety, abnormal behaviour or changes in behaviour, suicidal ideation, speech impairment (stuttering) and obsessive–compulsive symptoms
- advise patients and their caregivers to read carefully the list of neuropsychiatric reactions in the patient information leaflet and seek medical advice immediately should they occur. Evaluate carefully the risks and benefits of continuing treatment if neuropsychiatric reactions do occur
- report suspected adverse drug reactions associated with montelukast to the [Yellow Card Scheme](#)

Read the article in full in the [Pharmaceutical Journal](#).

Drug shortages / supply issues

- [Midazolam \(Epistatus®\) 5mg/0.5ml oromucosal solution pre-filled oral syringes](#) are currently out of stock and the resupply date is to be confirmed. Midazolam (Buccolam & generic) 5mg/1ml oromucosal solution pre-filled oral syringes remain available and can support increased demand.
- [Diazepam 10mg/2.5ml rectal solution tubes](#) are currently out of stock until early May 2024. Diazepam 5mg/2.5ml rectal solution tubes can support increased demand, as can midazolam oromucosal solution pre-filled syringes 2.5mg/0.5ml, 5mg/1ml, 7.5mg/1.5ml and 10mg/2ml.
- [Fiasp® FlexTouch® \(insulin aspart\) 100units/ml solution for injection 3ml pre-filled pens](#) will be out of stock from April 2024 until January 2025, but Fiasp® Penfill® 100units/ml solution for injection 3ml cartridges remain available and can support increased demand.

Quick bites

- The Dorset Formulary is available at: www.dorsetformulary.nhs.uk.
- The summary of product characteristics for fluconazole capsules has been updated to note that for longer courses of treatment, contraception may be considered, as appropriate, in women of childbearing potential throughout the treatment period and for 1 week after the final dose.
- The [national flu immunisation programme plan letter](#) sets out guidance for 2024 to 2025 season and includes next steps for providers to take, including which flu vaccines to order. There are no changes to eligible cohorts for coming year, although providers should read section on timing of programme carefully.
- The UK Government has made the regulatory changes to the Misuse of Drugs Regulations 2001 to allow paramedic independent prescribers to prescribe and administer, and direct others to administer, the following five controlled drugs: morphine sulfate, diazepam, midazolam, lorazepam and codeine phosphate. The [legislation](#) came into effect on 31 December 2023.
- [NHS launches 'Get Your Blood Pressure Checked' campaign](#). The campaign is urging those aged ≥40 to get a free blood pressure check at a participating pharmacy. It is estimated that ~4.2 million people in England could be living with undiagnosed hypertension, with survey data revealing only 7% are aware the condition has no symptoms.
- The medicines team is currently undertaking a piece of work to ensure that the current records of non-medical prescribers linked to GP practices in the NHS BSA database correct. All practice managers should have received an email request to review the current list of NMPs linked to their practice during March. Many thanks to those 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/PCN and increases accuracy of prescribing data.
- [Calculating kidney function](#) – a new SPS resource explains the different methods for calculating renal function and their limitations. It has been updated to include information about which weight to use when calculating creatinine clearance (CrCl) using the Cockcroft-Gault formula and how to convert from eGFR to actual GFR.
- Southampton medicines advice service have written a new topic on the medicines learning portal about [pharmacogenomics](#), funded by NHSE. It is aimed at pharmacists & technicians in secondary & primary care who currently have limited experience of working with pharmacogenomic data. The tutorial can be used to contribute to continuing professional development (CPD).

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 askspnhs@sps.direct. (Staff in Dorset NHS Trusts should seek advice from their pharmacy teams).