

Welcome to the latest edition of our Medicines Safety Bulletin; a newsletter produced by your local Medication Safety Group. Our aim is to highlight to you medication incidents that have occurred both locally and nationally to promote and support safer practice.

## World Patient Safety Day - 17th September 2022 'Medication without Harm'

**\*\*Medication harm accounts for 50% of the overall preventable harm in medical care\*\***

### Campaign Objectives

- **RAISE** global awareness of the high burden of medication-related harm due to medication errors and unsafe practices, and **ADVOCATE** urgent action to improve medication safety.
- **ENGAGE** key stakeholders and partners in the efforts to prevent medication errors and reduce medication-related harm.
- **EMPOWER** patients and families to be actively involved in the safe use of medication.
- **SCALE UP** implementation of the **WHO Global Patient Safety Challenge: Medication Without Harm**

### Key messages for healthcare professionals

- Keep your skills in safe medication practices up to date. Various resources are available from [PrescQipp](#) and [Health Education England \(HEE\)](#)
- Engage patients through shared decision-making using tools such as the [5 Moments for Medication Safety](#) and implement actions related to the [Know.Check.Ask](#) campaign
- Provide clear and full medication-related information to all members of the clinical team throughout the process of care
- Report medication safety incidents, and share and apply lessons learned with your team and patients when possible
- Be mindful of situations where risk from medications is high and ensure safety measures are followed
- Mentor new members of your team on safe medication systems and practices

### Key messages for patients, carers and the general public

- When prescribed a medication, check with your healthcare professional that you have all the information you need to take it safely. Follow [Know.Check.Ask](#) actions.
- Keep an up-to-date list of all the medications you take, including traditional medicines, and share it with your treating healthcare professionals. For example, you could download and use the [NHS App](#)
- Take your medications as recommended by your healthcare professional
- Use the [5 Moments for Medication Safety](#) tool to keep you safe while taking your medications
- Be aware of the potential side-effects of your medications
- Store your medications as indicated and check the expiration date regularly
- Raise any concerns about your medication with your healthcare professional

## The following are three examples of ways where you could utilise 'Know.Check.Ask' for World Patient Safety Day during your day to day work

### Annual medication review for a patient on alendronic acid:

- Do you **KNOW** how long the patient has been taking this medicine? Are they due a pause in treatment ('drug holiday')? A useful tip is to add a script note at the time of adding to the repeat template the end date / DEXA scan due date, which is then visible at the annual medication review thereafter.
- Have you **CHECKED** they are able to take it correctly? Alendronic acid must be taken at least 30 minutes before the first food, other medicinal product, or drink (other than plain water) of the day.
- Have you **ASKED** if they are experiencing any side effects from the medicine? Adverse effects of oral bisphosphonates include:
  - Gastrointestinal (most common) — nausea, dyspepsia, mild gastritis, and abdominal pain.
  - Bone, joint, and/or muscle pain (common).
  - Oesophageal reactions (uncommon) — oesophagitis, oesophageal ulcers, strictures and erosions.
  - Osteonecrosis of the jaw (rare) — an area of exposed or dead bone in the jaw that has lasted for more than 8 weeks.
  - Osteonecrosis of the external auditory canal (very rare).
  - Atypical stress fractures have been reported.

### Prescribing nitrofurantoin for a confirmed UTI:

- Do you **KNOW** the patient's renal function? This antibiotic is safest and most effective in patients with an estimated glomerular filtration rate (eGFR) greater than 45 mL/minute/1.73 m<sup>2</sup>. A short course (3–7 days) may be considered with caution in certain people if the eGFR is 30–44 mL/minute/1.73 m<sup>2</sup> and a urinary tract infection has suspected or proven multi-drug resistance, when the benefits of nitrofurantoin are considered to outweigh the risks of adverse effects.
- Have you **CHECKED** the results of any urine sample sent to the laboratory? Although local resistance to nitrofurantoin is low (community resistance of E. coli urine isolates to nitrofurantoin is 1.9% as at June 2022) it does increase with age and is highest in the older age groups.
- Have you **ASKED** the patient or carers to report any serious adverse effects such as acute pulmonary reactions or signs of peripheral neuropathy? Gastro-intestinal upset is a common side effect. They should also be given safety netting advice on signs of sepsis.

Please refer to [North Yorkshire antibiotic prescribing guidelines for primary care](#) for further information.

### Annual medication review for a patient on regular soluble/effervescent paracetamol or co-codamol:

- Do you **KNOW** that the sodium content in 8 soluble paracetamol per day will exceed the recommended sodium intake for an adult of 2.4g (6g salt)? A recent study reported that sodium intake from soluble paracetamol is associated with a higher CVD and mortality risk in patients with and without hypertension: [Hospital Pharmacy Europe - Sodium intake from soluble paracetamol linked to higher CVD and mortality risk](#)
- Have you **CHECKED** if the person has a genuine swallowing difficulty?
- Have you **ASKED** if the person is willing to try an alternative formulation if they do not have a genuine swallowing difficulty?

## Me and My Medicines

In addition to the 'Know.Check.Ask' campaign we are also promoting 'Me and My Medicines' which is concerned with empowering patients and families to be actively involved in the safe use of medication

The '[Me and My Medicines](#)' is a campaign led by patients and supported by clinical staff to help people raise concerns and use their medicines better, to help everyone benefit from more effective and safer care.

### It's OK to ask...

The intervention ethos is '**It's OK to ask**'. Medicines are widely used by the NHS to prevent and treat poor health. When medicines are not taken or used properly, it can lead to poor and worsening health and wellbeing.

**It's OK to Ask** means patients, families and carers are encouraged to ask questions about their medicines so that they can be helped to get the most benefit. Everyone helping the patient's experience of the NHS, including Community Pharmacy, GPs, Hospital Doctors, Nurses and Hospital Pharmacy are being encouraged to listen to, better understand, and help overcome problems when using medicines.

**Me and My Medicines** aim is that, by adopting this approach, more people will have the confidence to use their medicines as agreed.

### The Medicines Communication Charter

The [Me and My Medicines Charter](#) is about having a better conversation about medicines. The campaign and the charter is not about clinical care, and it is not about any particular medicine. That is strictly between patients and their clinicians.

This bulletin has been produced by the North Yorkshire and York Medicines Management Team on behalf of the North Yorkshire and York Medicines Safety Group. If you have any queries or feedback relating to the bulletin, we can be contacted using the Rxline mailbox: [hnyicb-ny.rxline@nhs.net](mailto:hnyicb-ny.rxline@nhs.net)

We also welcome any suggestions or ideas you may have for future editions.

The information contained in this bulletin is correct as of Sept. 2022 but as advice and guidelines are subject to change, please ensure that you refer to and adhere to whatever advice and guidelines are currently in place at the time of reading.