

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.

Adrenaline auto-injectors (AAIs): new guidance and resources from MHRA

The Medicines and Healthcare products Regulatory Agency (MHRA) has launched new guidance to highlight the latest safety advice on the steps to take during anaphylaxis. This new guidance includes an easy step-by-step guide on what to do in an emergency and provides updated advice on body positioning. A toolkit of resources is included for health and social care professionals to support the safe and effective use of AAIs.

For further information see: [Adrenaline auto-injectors \(AAIs\): new guidance and resources for safe use](#)

Topical testosterone: risk of harm to children following accidental exposure

The MHRA have issued a **Drug Safety Update** for topical testosterone products due to a risk of harm to children following accidental exposure from skin-to-skin contact.

The MHRA received a report of a child who was repeatedly accidentally exposed to the topical testosterone product that their parent was using, resulting in increased growth and genital enlargement. It was confirmed that the child had increased testosterone in their blood and that the topical testosterone product was the source of the testosterone. There are also literature reports and non-UK reports of premature puberty and genital enlargement in children who were repeatedly accidentally exposed to a topical testosterone product via transfer from an adult with whom they were in close contact.

The Paediatric Medicines Expert Advisory Group of the Commission on Human Medicines have recommended that a specific paediatric warning be added to the product information for topical testosterone products. The MHRA update advises that when prescribing topical testosterone, patients should be informed of the potential consequences if the product is accidentally transferred to other people. For example, this could be actioned via an accurx message. Further information can be found here: [Topical testosterone: risk of harm to children](#)

Interactions which reduce absorption of levothyroxine

Simultaneous intake of levothyroxine with food and drink such as milk, coffee, grapefruit juice, soya products, and papaya can impair absorption of levothyroxine.

For this reason, patients should be counselled to take levothyroxine once a day in the morning, ideally at least 30 minutes before having breakfast or a drink containing caffeine, grapefruit juice or milk/soya milk. We would ask dispensing practices to consider adding this information to their standard thyroxine label instructions.

Levothyroxine has many [interactions](#) with other medication that may reduce its absorption, including calcium and iron salts, antacids, multivitamins and other over-the-counter medication. Advise the person to leave an interval of four hours between taking levothyroxine and the potentially interfering drug, if possible.

For further information see: [Levothyroxine](#) | [Prescribing information](#) | [Hypothyroidism](#) | [CKS](#) | [NICE](#)

Oral tacrolimus and ciclosporin products: reminder to prescribe and dispense by brand name only

Both tacrolimus and ciclosporin are medicines with a narrow therapeutic index, and even minor differences in blood levels have the potential to cause graft rejection reactions in transplant patients. It is recommended that both tacrolimus and ciclosporin are prescribed and dispensed by brand name.

Inadvertent switching between oral tacrolimus products has been associated with reports of toxicity and graft rejection: [Oral tacrolimus products: reminder to prescribe and dispense by brand name only](#)

For further information on ciclosporin see: [Ciclosporin | Drugs | BNF | NICE](#)

For further information on tacrolimus see: [Tacrolimus | Drugs | BNF | NICE](#)

Aciclovir Dosing in Patients with Reduced Renal Function

In patients with renal impairment aciclovir will accumulate as the majority of the dose is excreted unchanged by the kidney. Aciclovir is neurotoxic and accumulation can lead to confusion, agitation, decreased consciousness, myoclonus and seizures.

These neurotoxic side effects of aciclovir can mimic the presentation of varicella zoster virus central nervous system disease. A local hospital has had 2 cases in recent years where aciclovir-induced neurotoxicity was initially overlooked as the symptoms are similar to encephalitis.

When treating Herpes Simplex or Herpes Zoster, the Renal Drug Handbook and the BNF advise reducing the frequency of aciclovir doses if the patient's GFR is below 25ml/min. For specific guidance on dosing schedules please see the [BNF](#).

Aciclovir can also potentially cause crystal nephropathy and so patients should be encouraged to drink plenty of fluids.

Further guidance on the use of high risk medicines in patients with renal impairment may be found on the '[Think Kidneys](#)' website.

Medicines use in paediatrics – really useful resources

SPS has put together a number of resources in one place (available [here](#)) which are really useful in supporting you to answer questions (your own or a patient's/carer's) on medicines use in paediatrics .

If you cannot find the information you need in the resources listed, or your clinical scenario is complex, primary care health professionals can seek further advice from the [SPS Medicines Advice Service](#)

This bulletin has been produced by the North Yorkshire and York CCGs Medicines Management Teams 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 mail box: 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 July 2023 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.