North Yorkshire and York
Humber and North Yorkshire
Health and Care Partnership

NHS
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Integrated Care Board (ICB)

North Yorkshire and York

Prescribing Focus Festive Refresher December 2024

Here is a reminder of prescribing topics that have been flagged this year:

February 2024 – Medicines Safety Bulletin:

- **Amiodarone monitoring –** A reminder of requirements
- **Tramadol and Warfarin interaction –** A national case study detailing a fatality was shared. Learning points are that careful monitoring is required if starting a warfarin patient on tramadol - a small proportion of patients may need a reduction in their anticoagulant dose. An alternative non-interacting opioid such as codeine may be an alternative choice if appropriate.
- **Tools and resources to support medication adherence –** SPS resources to support medication reviews where adherence may be affected by swallowing difficulties, manual dexterity, visual impairment or for those on complex regimens.
- **Focus on insulin safety –**
  - Patients on insulin pumps require immediate access to both long acting and short acting insulin as a back up in the event of pump failures – ensure these are on repeat prescription.
  - Near misses with Tresiba following a national shortage and drug switches being made – note that both strengths of Tresiba Flextouch pen delivery devices (100units/ml and 200units/ml) dial up the dose in unit increments rather than volume.
  - Reminder to never withdraw insulin from pen cartridges or prefilled pens using a syringe - in the event of a disposable prefilled pen malfunction, discard the faulty pen and use a new pen.
  - Drug name confusion – caution where insulins have a number in their name

April 2024 – Paediatric Emergency Steroid Card:

- Guidance on types of steroid card, which card to use when
- The responsibility to issue the card rests with the prescriber at the point of prescribing – note this relates to all routes of steroid administration
- Verbal counselling should ideally accompany the issuing of a steroid card
- Potent CYP3A4 inhibitors can increase the risk of adrenal suppression and so prescribers must be alert to concomitant use of these medicines with corticosteroids. Issuing of a steroid card is recommended in such circumstances.

May 2024 – 5 Day Course Lengths for LTRIs:

- For LTRIs where antibiotics are considered necessary, course lengths of 5 days are appropriate except for bronchiectasis and including for rescue packs. This reduces side effects and risk of resistance and appears to have no impact on prevention infection-related hospitalisations.
- A reminder to check or enable computer systems to reflect shorter course

June 2024 – Medicines Safety Bulletin:

- **Pseudoephedrine safety –** new safety advice from the MHRA highlighted the very rare risk of posterior reversible encephalopathy syndrome (PRES) and reversible cerebral vasoconstriction syndrome (RCVS).
- **Pregabalin and Gabapentin incident –** a reminder to take extra care when initiating gapapentinoids for pain in selecting the correct dose. Also, EMIS and SystmOne will trigger an alert if gabapentin and pregabalin are co-prescribed.
- **Bone protection consideration for patients prescribed repeated courses of oral steroids –** a BMJ article reported that only a small number of patients who had a significant steroid burden had had an osteoporotic risk assessment despite their prolonged steroid use. See link for local guidelines.
- **Under-recognised risk of harm from Propranolol –** A coroner's report has highlighted the dangers of propranolol in overdose. Information and resources to support those who may be at higher risk are available from PrescQIPP.

- **Administration of live vaccines to patients on immunosuppressant medication –** this safety bulletin referenced when live vaccines should not be administered.

September 2024 – DOAC Safety:
This covered points to consider when calculating renal function, changing anticoagulant choice or dose and reminders re DOAC contraindications and cautions

October 2024 – Valproate in Men:
The MHRA issued new guidance for the use of valproate in men including the following actions recommended for primary care –

- At their next regular treatment review inform male patients (of any age) who may father children, of the possible risks of valproate as per the MHRA advice.
- As the next treatment review may be some months in the future, we would advise practices to send out the MHRA patient information leaflet to all affected patients as soon as possible.
- Send a message out to all affected patients (see example message in prescribing focus linked above)
- Advice given should be clearly documented in the clinical record. There is no specific code for this, so for existing valproate patients a non-specific SNOMED code is appropriate along with a free text annotation of 'valproate' and 'risk of neurodevelopmental disorder': 396080005 Medication side effects education.

November 2024 – World Antimicrobial Awareness Week (WAAW):
WAAW presents an ideal opportunity to discuss and review antibiotic prescribing for all healthcare providers. This time the focus was on:

- Reminder regarding five-day courses of antibiotics for upper respiratory tract infections – 'Shorter is better'
- Metronidazole is no longer indicated for the treatment of clostridioides difficile infections.
- A leaflet included in the original email highlighted two conditions where topical treatments can be considered as options instead of oral antibiotics: acute otitis media and impetigo
- Practice level data included in the original email for penicillin V 250mg tablets and total oral antibiotic prescribing (items per STARPU)

Thank you for reading. We hope that you have found these safety bulletins interesting and helpful.

Seasons Greetings from the Medicines Management Team

For further information or advice please contact us on:

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