



Medicines Update

January 2024

Acute Pyelonephritis in Adults: Update to Primary Care Antimicrobial Guidelines

The [acute pyelonephritis guideline for adults](#) hosted in the [LLR Antimicrobial Policy and Guidance](#) on the LLR APC website has been updated.

Recent pharmacokinetic studies have raised concerns about the bioavailability of oral co-amoxiclav. Microbiology laboratories have therefore been instructed to never report Enterobacterales as sensitive to co-amoxiclav for the treatment of pyelonephritis and instead to either report as either 'resistant' or 'intermediate'. This means that an increased dose of amoxicillin i.e. **co-amoxiclav 625mg TDS PLUS amoxicillin 500mg TDS** is required for the treatment of acute pyelonephritis in adults, for which our first-line choice of antibiotic in the guideline has been updated accordingly.

Please see the guideline for more information.

Shortage of GLP-1 receptor agonists (GLP-1 RA) update

The supplies of glucagon-like peptide-1 receptor agonists (GLP-1 RAs) continue to be limited, with supply not expected to return to normal until at least the end of 2024. An [updated alert](#) was issued on 3rd January 2024 (see attached) this alert supersedes NatPSA/2023/008/DHSC. Regarding the treatment of patients living with diabetes important updates include:

- Rybelsus[®] (semaglutide) tablets are now available in sufficient quantities to support initiation of GLP-1 RA treatment in **people with type 2 diabetes** (T2DM) in whom new initiation of GLP-1 RA therapy would be clinically appropriate (in line with NICE [NG28](#))
- Byetta[®] (exenatide) 5micrograms/0.02ml and 10micrograms/0.04ml solution for injection 1.2ml pre-filled pens will be discontinued in March 2024.
- Victoza[®] (liraglutide) continues to be out of stock, expected to last until end of 2024.

For full details of the actions to be completed as soon as possible and no later than 28 March 2024 see [alert](#).

Updates to previous actions are:

- Prescribe Rybelsus[®] tablets for new initiations of a GLP-1 RA (in line with NICE [NG28](#)).
- Identify patients prescribed Byetta[®] and Victoza[®] injections and (in line with NICE [NG28](#)) switch to Rybelsus[®] tablets.
- Counsel patients on any changes in drug, formulation, and dose regimen where appropriate.
- Do not switch between strengths of a GLP-1RA solely based on availability.

Shared decision-making principles should underpin any changes made. Patients and their carers should be counselled on dose titration and administration instructions if initiated on or switched to Rybelsus. For full details see [Rybelsus 3 mg - Summary of Product Characteristics \(SmPC\) - \(emc\) \(medicines.org.uk\)](#) and <https://www.cas.mhra.gov.uk/ViewandAcknowledgment/ViewAlert.aspx?AlertID=103245>

As per previous alert:

- Only prescribe GLP-1 RAs for licensed indications.
- Existing stock must be conserved for patients with T2DM.
- Treatment should be reviewed and stopped where treatment goals not achieved (see [NG28](#))
- Do not double up a lower dose preparation where a higher dose preparation of a GLP-1 RA is not available.
- Limit prescribing to minimise risk to the supply chain whilst acknowledging the needs of the patient.

Up to date stock availability information can be found at <https://www.sps.nhs.uk/articles/prescribing-available-glp-1-receptor-agonists/> Patients should be supported to access structured education and weight management programmes where available. As before guidance is available to support clinicians in choosing alternative glucose lowering therapies to GLP-1 RAs during this period of national shortage. [Clinical Guidance](#) from the Primary Care Diabetes Society (PCDS) and Association of British Clinical Diabetologists (ABCD) should be used in conjunction with NICE guidance [NG28](#) for the management of patients living with diabetes.

Sore Throat/ Tonsillitis/ Pharyngitis: Update to Primary Care Antimicrobial Guidelines

The [sore throat/ tonsillitis/ pharyngitis guideline](#) hosted in the [LLR Antimicrobial Policy and Guidance](#) on the LLR APC website has been updated.

NHSE [interim guidance](#) for **group A Streptococcus (GAS) in children** has been withdrawn and [NICE sore throat guidance](#) for children and young people was reinstated in February 2023.

Clinicians should continue to be alert to the severe complications of GAS and maintain a high degree of clinical suspicion when assessing patients, particularly those with preceding viral infection (including chickenpox) or close contacts of scarlet fever/invasive GAS. See [NHSE guidance](#) for more information including FAQs.

Please see the [LLR Antimicrobial Policy and Guidance](#) for more information.

Melatonin Liquid to Ceyesto- New Switch

The LLR Melatonin guideline for children was updated December 23 in collaboration with LPT [Melatonin-Guideline-for-Children.pdf \(areaprescribingcommitteeleicesterleicestershirerutland.nhs.uk\)](#)

Currently a range of melatonin liquid preparations are being prescribed and supplied including unlicensed and special items; the guideline now states that all patients on a different brand or prescribed generically should be switched to Ceyesto oral solution; this will avoid use of unlicensed specials.

There are also substantial savings that can be generated: Ceyesto 75% savings compared to other brands (Ceyesto 1mg/1ml £25.65/150ml; DT Melatonin 1mg/1ml £127.05/150ml); across LLR estimated savings £479k.

This switch will ensure supply of a licenced preparation as well as efficiency savings

It would be advisable to use this opportunity to review appropriateness of the melatonin and consider a drug holiday/deprescribing in suitable patients as mentioned in the PrescQIPP Bulletin 318 below.



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Depot EPS prescriptions

Some practices are stating that they cannot send a depot script electronically to community pharmacies. To send the prescription, the Pers Admin button needs to be unticked; if you cannot untick this box then please speak to your practice manager who may have made it mandatory. Once unticked, the prescription should go via the EPS route to the patient's regular pharmacy of choice.

NHSE Midlands' Controlled Drugs Newsletter - Winter 2023 Issue

Please find attached the Winter 2023 issue of the Midlands' Controlled Drugs Team and circulate within your teams.

MHRA Drug Safety alert Sodium Valproate Nov 23

The MHRA is asking organisations to put a plan in place to implement new regulatory measures for sodium valproate, valproic acid and valproate semi-sodium (valproate) for oversight of prescribing to new patients and existing female patients. Please see the attached alert for more information.

In response, an LLR ICS multi stakeholder Task & Finish group has been configured to agree a plan. Further information will be communicated to primary care in due course.

Medicines Safety Alerts

GP Practices have a contractual requirements to ensure they are receiving safety alerts and should ensure that they are signed up to receive all necessary alerts and that where appropriate, actions are completed as outlined by the [CQC](#). The LLR Medicines Optimisation Team will circulate safety alert information where local recommendations or actions are required based on specialist advice. Practices should not rely on this newsletter to receive all safety alerts and can register to receive them via the [MHRA](#). Medicines Supply Notification (MSN) are sent directly to GP Practices via NHSE&I (please contact england.gp-contracting@nhs.net if you are not receiving these). Additional resources practices can sign up to include the MHRA [drug safety updates](#) and [drug safety newsletter](#) and the [Medicines Supply Tool](#).

Drug Safety Update: December 2023 — Aripiprazole

The Medicines Health and Regulatory Agency (MHRA) published a drug safety update for aripiprazole. Healthcare professionals prescribing aripiprazole are reminded to be alert to the risk of addictive gambling and other impulse control disorders. Healthcare professionals should advise patients, their families, and friends to be alert to these risks.

Advice and guidance can be sought at any time using the usual routes if there are any concerns. Full details of the alert can be found here [Aripiprazole \(Abilify and generic brands\): risk of pathological gambling - GOV.UK \(www.gov.uk\)](#)

Drug Safety Update; December 2023 – Vitamin B12 (hydroxocobalamin, cyanocobalamin)

The medicines used to treat vitamin B12 deficiency, hydroxocobalamin (injectable formulation only) and cyanocobalamin (oral and injectable formulations) contain cobalt. There have been case reports describing cobalt sensitivity-type reactions in patients being treated for vitamin B12 deficiency. Cobalt allergy is estimated to affect 1-3% of the general population, typically presenting with cutaneous symptoms of chronic or sub-acute allergic contact dermatitis. Infrequently this allergy triggers an erythema multiforme-like reaction. Symptom onset may be immediate or delayed up to 72 hours post-administration. Full details of the alert can be found here [Vitamin B12 \(hydroxocobalamin, cyanocobalamin\): advise patients with known cobalt allergy to be vigilant for sensitivity reactions - GOV.UK \(www.gov.uk\)](#)

Product Recall Nutramigen Specific Batches

We have been informed by Reckitt health and nutrition of voluntary recall of 3 batches of Nutramigen. This is due to possibility of cross contamination with Cronobacter sakazakii. Please see attached for details.

MHRA warning for Rivastigmine: Rivastigmine may cause QTc prolongation.

SPC warnings and precautions section has been updated to note that electrocardiogram QT prolongation may occur in patients treated with certain cholinesterase inhibitor products including rivastigmine [Prometax 13.3 mg/24 h transdermal patch - Summary of Product Characteristics \(SmPC\) - \(emc\) \(medicines.org.uk\)](#)

The LLR dementia guidelines have been updated to reflect this.

Tresiba® (insulin degludec) FlexTouch® products: National Patient Safety Alert regarding inappropriate dosing when switching Tresiba products and 100units/ml shortage reminder

A National Patient Safety Alert (NPSA) (see attachment NatPSA_2023_016_DHSC) was issued on 8th December 2023 regarding Tresiba® (insulin degludec) FlexTouch® 200units/ml solution for injection 3ml pre-filled pens and incorrect administration advice, after some patients were switched to the 200units/ml preparation in response to the shortage of the Tresiba FlexTouch® 100units/ml preparation. **Please be reminded that the actions highlighted in the NPSA needed to be completed by 22nd December 2023.**

Please note that there continues to be a supply issue with Tresiba® (insulin degludec) FlexTouch® 100units/ml solution for injection 3ml pre-filled pens, with resupply expected on 31st December 2024. Please see the [Medicines Supply Tool](#) for

Out of stock update

Please see links to the DHSC and NHSE/I online [Medicines Supply Tool](#) where you will find up to date information on out of stock medicines. The DHSC Medicines Supply team update the Medicines Supply Tool monthly. To register, please visit the [Specialist Pharmacy Service \(SPS\) website](#), you will need an NHS email address.

If a pharmacy is unable to obtain stock after following the [LLR APC Out-of-Stock-Guidance](#), an acute prescription for an available equivalent product should be prescribed. Long term supply issues may require a review of the patient and a change to their medication. Please check with your local pharmacies for up-to-date information on stock availability.

Leicester, Leicestershire and Rutland (LLR) Area Prescribing Committee (APC) Newsletter

The monthly LLR APC newsletter is designed to keep you informed of APC outcomes. All current and previous newsletters are available on the [LLR APC website](#).

LLR Medicines Optimisation Team contacts

For any queries or questions please contact the Medicines Optimisation Pharmacist supporting your practice. Alternatively you may email the Medicines Optimisation team at: llricb-llr.medicinesoptimisation@nhs.net

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