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NORTHERN IRELAND MEDICINES MANAGEMENT

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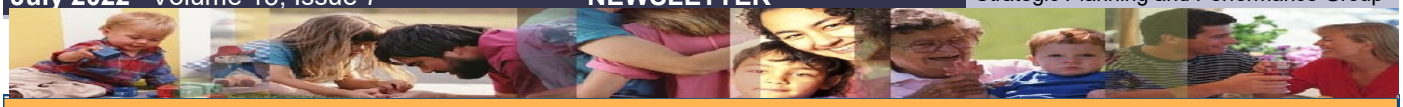

In This Issue

Reducing the Risks of Potassium Permanganate

A Safety, Quality and Standards Circular (HSC (SQSD) 16/22) recently issued in response to a National Patient Safety Alert, outlines the actions that must be taken by healthcare professionals in Northern Ireland to reduce the risks of inadvertent oral administration of potassium permanganate. The British Association of Dermatologists (BAD) have also produced additional advice which supports these actions.

Potassium permanganate is used in healthcare as a mild antiseptic and astringent to treat weeping and blistering skin conditions, such as infected eczema and leg ulcers. It is available in a concentrated form, usually as a 400 mg 'tablet' (Permitabs®, EN-Potab®) or occasionally a solution, both of which require dilution before use as a soak or in the bath. It is not licensed as a medicine.

These concentrated forms can resemble an oral tablet or juice drink. If ingested they are highly toxic and this can be fatal. Even dilute solutions can be toxic if swallowed.

Actions
GP practices should ensure that:

- Prescribing of potassium permanganate is reviewed to consider if benefit outweighs risk
- Potassium permanganate is **prescribed for external use only**
- Prescriptions include clear instructions to **dilute before use**
- If used in a patient's home, a risk assessment is undertaken to ensure safe use and storage – see also BAD recommendations
- It is prescribed as an original pack (thirty 'tablets'), and not on repeat prescription.

Community Pharmacies should ensure that:

- Potassium Permanganate is dispensed in the original container where possible
- The dispensing label does not cover key information
- The dispensing label includes the warning 'HARMFUL IF SWALLOWED'
- Patients are reminded that it is for external use only and dangerous if swallowed
- All patients are supplied with a patient information leaflet (see BAD)
- Advice is provided on safe storage in the patient's home, e.g. store separately from oral medicines

NICE: Medicines Associated with Dependence or Withdrawal

In a recent Clinical Masterclass Dr Cathy Stannard spoke about the NICE guideline on "Medicines associated with dependence or withdrawal symptoms: safe prescribing and withdrawal management for adults". The webinar is available on PrescQIPP (requires registration). This NICE guidance advises that prior to initiation of such a medication, patients should be given information about the medication and the risk of dependence. Recent updates of relevant NICE guidance (April 2022) reflect this advice:

Neuropathic pain – drug treatment

Benzodiazepines and Z-drugs withdrawal

Opioid dependence

Reviewing Naproxen Suspension and Effervescent tablets

Approximately £17,000 is spent annually in Northern Ireland on the prescribing of naproxen suspension and naproxen effervescent tablets. Both preparations are significantly more expensive than Ibuprofen suspension, see table below:

Product	Quantity	Price*
Naproxen oral suspension 125mg/5ml	100mls	£110
Naproxen oral suspension 250mg/5ml	100mls	£45
Naproxen 250mg effervescent tablets (Stirlescent®)	20 tabs	£52.72
Ibuprofen oral suspension 100mg/5ml	100mls	£1.77
Ibuprofen oral suspension 200mg/5ml	100mls	£3.49

*Prices correct as per July 2022 NI Drug Tariff

ACTION:

- Review all patients prescribed Naproxen suspension 125mg/5ml or 250mg/5ml
- Review all patients prescribed Naproxen 250mg effervescent tablets (Stirlescent®)
- Consider if NSAID could be stopped
- If ongoing treatment is appropriate consider switching either of these products to ibuprofen suspension
- An OptimiseRx message is being developed to highlight on the clinical system that ibuprofen suspension should be considered if the patient requires a liquid NSAID preparation (available to those EMIS practices using OptimiseRx)
- Practices should communicate planned changes with local community pharmacies in advance, to allow consistent management of patient queries and to assist with stock management

NICE GUIDANCE

NICE TA 791 Romosozumab for treating severe osteoporosis

NICE TA 792 Filgotinib for treating moderately to severely active ulcerative colitis

NICE TA 794 Diroximel fumarate for treating relapsing–remitting multiple sclerosis

NICE TA 795 Ibrutinib for treating Waldenstrom's macroglobulinaemia (review of TA491)

NICE TA 796 Venetoclax for treating chronic lymphocytic leukaemia (review of TA487)

NICE TA 798 Durvalumab for maintenance treatment of unresectable non-small-cell lung cancer after platinum-based chemoradiation (review of TA578)

MANAGED ENTRY DECISIONS

Mepolizumab (Nucala®)

Cemiplimab (Libtayo®)

Daratumumab (Daralex®)

Ropeginterferon alfa-2b (Besremi®)

Fenfluramine (Fintepla®)

Esketamine nasal spray (Spravato®)

Pembrolizumab (Keytruda®)

Selumetinib (Koselugo®)

Icosapent ethyl (Vazkepa®)

see Managed Entry section of NI Formulary

Every effort has been made to ensure that the information included in this newsletter is correct at the time of publication. This newsletter is not to be used for commercial purposes.

This newsletter has been produced for GPs and pharmacists by the Regional Pharmacy and Medicines Management Team. If you have any queries or require further information on the contents of this newsletter, please contact one of the Pharmacy Advisors in your local HSCB office:

Belfast Office: 028 9536 3926 South Eastern Office: 028 9536 1461 Southern Office: 028 9536 2104

Northern Office: 028 9536 2812 Western Office: 028 9536 1010