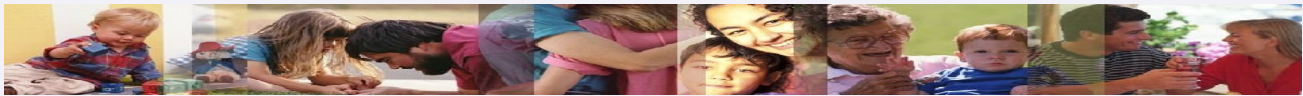


NEWSLETTER



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NI Formulary Correction: Aproderm® Cream range

The NI Formulary previously advised that Aproderm® cream is a cost effective option where a paraffin-free emollient is necessary. This should read Aproderm® **Colloidal Oat** cream. Another form of Aproderm® cream is available that is *not* paraffin-free, i.e. Aproderm® Emollient cream.

Action: practices are asked to search GP clinical systems for patients who are prescribed a cream within the Aproderm® range and ensure that it is suitable for people who require a low or paraffin-free preparation, where necessary.

Otezla® (Apremilast) in Primary Care

Apremilast is accepted for use in Northern Ireland for two conditions:

- alone or in combination with disease modifying antirheumatic drugs (DMARDs), for the treatment of **active psoriatic arthritis** in adult patients who have had an inadequate response or who have been intolerant to a prior DMARD therapy, and
- for the treatment of **moderate to severe chronic plaque psoriasis** in adult patients who failed to respond to or who have a contraindication to, or are intolerant to other systemic therapy including ciclosporin, methotrexate or psoralen and ultraviolet-A light (PUVA).

The Regional Group on Specialist Medicines has recommended that apremilast is classified as an Amber medicine and, as such, the responsibility for prescribing apremilast can be transferred from secondary to primary care with the agreement of an individual GP under a shared care arrangement. The group did not consider that a regional shared care guideline is required to support shared care, but hospital consultants should ensure that GPs are provided with sufficient information to enable them to safely prescribe apremilast for each patient.

Actions:

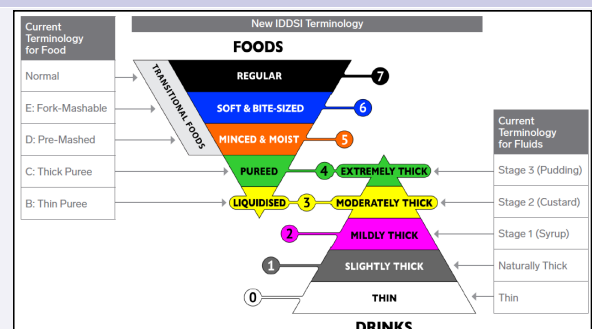
- Search for patients on GP clinical systems who are on apremilast and ensure that it is flagged as an Amber List medicine.
- Prescribe apremilast under a shared care arrangement with secondary care.



Non-IDDSI Stock in Community Pharmacies

Descriptors for food and fluid textures are now changing in line with the new International Dysphagia Diet Descriptors Standardisation Initiative (IDDSI). **IDDSI is being rolled out across the UK between April 2018 and April 2019.**

In line with this, manufacturers of dysphagia products (and caterers supplying texture modified diets) are making changes to their products to ensure they are IDDSI compliant. This will mean a change to the labelling of the products and, for some products, a change in scoop size also. This includes thickening powders such as Thick & Easy® and Nutilis®, as well as pre-thickened oral nutritional supplements. Please refer to [Medicines Management Newsletter Supplement September 2018](#) and [HSCB letter to GPs/CPs November 2018](#) for further information.



Action:

- Community pharmacists may wish to run down non-IDDSI labelled/compliant products over the next few months in order to prevent wastage.
- GP practices are reminded that, if a patient is not managing their matched IDDSI descriptor, to liaise with Speech and Language Therapy urgently.

Keep Antibiotics Working: Public Information Campaign

The Public Health Agency (PHA) is alerting the public to the issue of antimicrobial resistance by highlighting the importance of only using antibiotics when needed and recommended by a healthcare professional. Resistance to antibiotics has been recognised by the World Health Organization as one of the greatest threats to human health and to human medicine worldwide.



It is hoped the *Keep Antibiotics Working* campaign will reduce public expectation for antibiotics and support healthcare professionals. The target audience for the campaign is all adults, with a particular focus on those groups most likely to use or ask for antibiotics for people in their care:

- Women aged 20-45 who have the primary responsibility for family health across socioeconomic groups.
- People aged 75+ with a focus on those with recurrent conditions and high levels of contact with GPs.

The campaign commenced on 24th December 2018 and will run for 8 weeks featuring TV, radio, outdoor, press and online advertising supported by PR and social media. A range of printed materials will also be distributed to community pharmacies during January 2019.

The key messages on all materials is:

- Taking antibiotics when you don't need them puts you and your family at risk.
- Take your doctor's / nurse's / pharmacist's advice.

Actions:

- It would be greatly appreciated if pharmacies could support the campaign by displaying the poster and leaflets within their premises to remind the public of the value of only taking antibiotics when needed.
- For appropriate patients, pharmacies may wish to consider referral into the Pharmacy First Service for sore throats, colds and flu-like illness.
- GP practices are asked to reinforce these messages to patients.

NICE GUIDANCE — NORTHERN IRELAND SERVICE NOTIFICATIONS

Service Notifications have been issued in Northern Ireland for the following:

[NICE TA533](#) — Ocrelizumab for treating relapsing–remitting multiple sclerosis.

[NICE TA534](#) — Dupilumab for treating moderate to severe atopic dermatitis.

[NICE TA537](#) — Ixekizumab for treating active psoriatic arthritis after inadequate response to DMARDs.

[NICE TA539](#) — Lutetium (177Lu) oxodotreotide for treating unresectable or metastatic neuroendocrine tumours.

[NICE TA543](#) — Tofacitinib for treating active psoriatic arthritis after inadequate response to DMARDs.

The following are NOT recommended:

[NICE TA546](#) — Padeliporfin for untreated localised prostate cancer.

[NICE TA550](#) — Vandetanib for treating medullary thyroid cancer for treating medullary thyroid cancer.

MANAGED ENTRY DECISIONS

The following medicines were considered in January as part of the Northern Ireland Managed Entry process. **Please refer to the Managed Entry section of the Northern Ireland Formulary website for full details on Managed Entry decisions:** <http://niformulary.hscni.net/ManagedEntry/MEDecisions/Pages/default.aspx>

Brivaracetam (Briviact[®])

Ciclosporin (Verkazia[®])

Evolocumab (Repatha SureClick[®])

Fosaprepitant (Ivemend[®])

Nivolumab (Opdivo[®])

Pembrolizumab (Keytruda[®]) - two decisions

Regorafenib (Stivarga[®])

Tisagenlecleucel-T (Kymriah[®])

Tofacitinib (Xeljanz[®])

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

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