NORTHERN IRELAND MEDICINES MANAGEMENT

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Health and Social Care Board

NEWSLETTER

In This Issue

Braltus Zonda® is the cost-effective choice

Braltus Zonda® is being promoted as an alternative to Spiriva Handihaler® as it is a more cost-effective option for a Tiotropium DPI (see table of prices for LAMA DPIs). Practices are asked to consider switching adult patients on Spiriva Handihaler® to the Braltus Zonda® device where appropriate as the estimated savings from this switch equate to £840,000pa across Northern Ireland. Resources and information to help GPs with switching patients are on the GP Intranet website.

Other single agent LAMA inhalers are also more cost effective than Spiriva Handihaler® and practices may wish to consider selecting one of these devices when initiating or reviewing patients on a LAMA dry powder inhaler.

LAMA DPI	Cost (for 30days)
Braltus Zonda®	**£25.80**
Incruse Ellipta®	£27.50
Seebri Breezhaler®	£27.50
Eklira Genuair®	£32.50
Spiriva Handihaler®	**£33.50**

Prescribe Methotrexate subcutaneous injection by brand

Methotrexate subcutaneous injections, both paediatric and adult for non-cancer conditions are classified as amber listed drugs. The responsibility for prescribing may be transferred from secondary to primary care when agreed shared care arrangements for the patient have been established between the specialist and the GP. See http://www.ipnsm.hscni.net/shared-care-guidelines/

Pre-filled injectables are also listed as items unsuitable for generic prescribing as listed on the Northern Ireland Formulary website. http://niformulary.hscni.net/PrescribingNewsletters/PDF/GenericsBulletin/Generics%20exception%20list%20January%202019.pdf

Routine monitoring of NI prescribing data has identified that a number of methotrexate subcutaneous pre-filled injections are prescribed generically and also with inadequate directions e.g. “as directed”.

Actions for GPs

- Ensure that all methotrexate subcutaneous pre-filled injections are prescribed as the brand specified by secondary care. If this is not provided, please contact the specialist clinician with whom the shared care guideline has been agreed.
- Ensure the directions on any prescriptions for methotrexate subcutaneous pre-filled injections clearly show the dose and frequency of administration as outlined in the shared care guideline.

Actions for Community Pharmacists

- If you receive a prescription for generic methotrexate injections, check with the patient/carer or GP which brand of injection they usually receive and have been trained how to administer.
- Contact the relevant GP practice which will ensure future prescriptions are prescribed by brand and/or with directions that have a clear dose and frequency.

Helicobacter Pylori Stool Antigen Testing Update

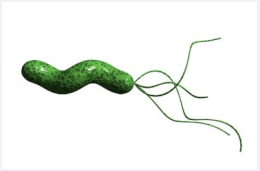
As with many other areas of the UK, NI has adopted the ***STOOL ANTIGEN TEST (SAT)*** as the ***H. Pylori*** **test of choice** and this has been endorsed by the NI Public Health Agency. This replaces the urea breath test (UBT).

Regional roll-out of the SAT for *H. pylori* is well established in the Northern, Southern and Western LCG areas.

The SAT will commence in Belfast and South Eastern LCG areas from **1st October 2019.**

So far the following reductions in prescriptions for the UBT have been recorded since implementation.

Northern LCG - 69%
Southern LCG - 77%
Western LCG -56%



Helicobacter Pylori

ACTION FOR GPs

- Ensure there is no further prescribing of UBT as the initial diagnostic check once the SAT has been implemented in your local LCG area. Prescribing data will be monitored by the Pharmacy Team.
- Cascade this information to all relevant staff including GP locums, practice based pharmacists and treatment room staff.
- Follow the Public Health England document '*Test and treat for Helicobacter pylori (HP) in dyspepsia'*

Stool samples must reach the lab for accurate testing within 48 hours. It is therefore recommended that stool samples are sent to the lab by Wednesday at the latest of any given week to allow for an accurate test to be undertaken.

It is also vital that patients are made aware of the importance in returning samples to the surgery without delay. This will allow for immediate onward transport to the lab.

NICE GUIDANCE — NORTHERN IRELAND SERVICE NOTIFICATIONS

NICE TA581 Nivolumab with ipilimumab for untreated advanced renal cell carcinoma.

NICE TA577 Brentuximab vedotin for treating CD30-positive cutaneous T-cell lymphoma

NICE NG139 Pneumonia (hospital-acquired): antimicrobial prescribing

MANAGED ENTRY DECISIONS

The following medicines were considered in September 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

Blinatumomab (Blincyto®)	**Osimertinib** (Tagrisso®)
Brentuximab vedotin (Adcetris®)	**Palbociclib** (Ibrance®)
Cemiplimab (Libtayo®)	**Perampanel oral suspension** (Fycompa®)
Dacomitinib (Vizimpro®)	**Ribociclib** (Kisqali®)
Fingolimod (Gilenya®)	**Risankizumab** (Skyrizi®)
Fluocinolone acetonide (Iluvien®)	**Rivaroxaban** (Xarelto®)
Golimumab (Simponi®)	**Sodium zirconium cyclosilicate** (Lokelma®)

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:

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