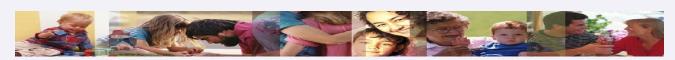
# NORTHERN IRELAND MEDICINES MANAGEMENT



July 2018 Volume 9, Issue 7

Health and Social Care Board

#### **NEWSLETTER**



#### In This Issue

- Launch of Updated Lithium Pathway
- ⊕ Travel Vaccines: Private or NHS prescription?
- Formulary Choices for COCs
- Pain Self-management Courses (Sep-Dec'18)
- NICE Guidance Northern Ireland Service Notifications
- Managed Entry Decisions

## LAUNCH OF UPDATED LITHIUM CARE PATHWAY

The Lithium Care Pathway has recently been reviewed and updated by a multidisciplinary team, including representatives from primary and secondary care. See Table 1 for a reminder of the three lithium care options. Key points to note are as follows:

#### **Monitoring**

The main change to the pathway is the requirement to monitor calcium levels, both at the initial consultation in secondary care and also by the GP practice as part of the six monthly checks. A reminder of the signs of lithium toxicity has also been included.

#### Communication

All patients initiated on lithium in secondary care start on Pathway 1. A new GP initiation cover sheet has been included to ensure that the GP is informed of important information such as baseline tests and their results, which lithium brand the patient is on, target lithium level, and what monitoring tests are required. The GP will be contacted if a switch to Pathways 2 or 3 is considered suitable for the patient.

All clinicians are asked to familiarise themselves with this pathway in order to ensure effective communication and maximise patient care. The pathway can be found at:

http://www.medicinesgovernance.hscni.net/joint-publications/medicines-safety-documents/lithium/.

Pathway 1	Pathway 2	Pathway 3
Patient remains in secondary care for review and monitoring. Lithium blood monitoring results copied to primary care*.	Patient remains in secondary care for review but, with agreement between GP and secondary care, monitoring passes to primary care. Lithium blood monitoring results copied to secondary care*.	If patient is stable or there is a strong patient preference, with agreement between GP and secondary care, review and monitoring passes to primary care. Lithium blood monitoring results not copied to secondary care*.

<sup>\*</sup>A communication proforma from secondary care to primary care will advise on the pathway the patient will follow and responsibilities for review and monitoring. Primary and secondary care lithium registers should be updated using this information.

## TRAVEL VACCINES: PRIVATE OR NHS PRESCRIPTION?

Information on travel vaccines and prescribing for patients travelling overseas can be found on the <u>Primary Care Intranet Travel page</u>, under the Pharmacy & Medicines / Clinical Resources tab.

For a useful summary, see Medicines Management <u>Newsletter September</u> 2014 on NI Formulary website.

A <u>PIL</u> clarifying route for vaccine supply (NHS or private) and malaria prophylaxis, as well as importance of seeking advice on requirements 3 months prior to travel, can be found in Patient Zone section of NI Formulary <a href="http://niformulary.hscni.net">http://niformulary.hscni.net</a>.



## FORMULARY CHOICES FOR COCs

Chapter 7 of the Northern Ireland Formulary lists the preferred first line choices for:

- Monophasic standard strength combined oral contraceptives
- · Monophasic low strength combined oral contraceptives
- Progestogen-only oral contraceptives

The Formulary is available at: http://niformulary.hscni.net/Pages/default.aspx.



Patients commencing a combined oral contraceptive or a progestogen only contraceptive should be prescribed treatment in line with the Formulary choices — as shown in Table 2:

#### **Action for GP Practices:**

When commencing treatment, for all suitable patients please refer to and prescribe in line with the NI Formulary choices of combined oral contraceptives or progestogen only contraceptives.

# Action for Community Pharmacists:

NI Formulary choices of combined oral contraceptives or progestogen only contraceptives are available from local wholesalers. Please provide advice and support to patients as necessary.

	Table 2: NI Formulary Chapter 7 – Oral Contraceptive Pills		
	Monophasic standard-strength combined oral contraceptives		
	1 <sup>st</sup> choice	Rigevidon® (ethinylestradiol 30 micrograms, levonorgestrel 150 micrograms)	
1	Monophasic low-strength combined oral contraceptives		
	1 <sup>st</sup> choice	Loestrin 20 <sup>®</sup> (ethinylestradiol 20 micrograms, norethisterone acetate 1mg)	
		Progestogen-only oral contraceptives	
1	1 <sup>st</sup> choice	Cerelle® (desogestrel 75 micrograms)	
	Whilst the I	Formulary aims to standardise practice and ensure a level of	

Whilst the Formulary aims to standardise practice and ensure a level of consistency, it is recognised that individual patients may require medicines which lie outside the guidance.

# PAIN SELF MANAGEMENT COURSES (SEP - DEC 2018)

HSCB are working with Arthritis Care Northern Ireland to offer more free pain self-management courses for people in Belfast, South Eastern and Northern LCG areas from September to December. The courses are as follows:

- Challenging your condition (2.5hr session for 6 weeks)
- Challenging pain (3hr session for 2 weeks)
- Living well with pain (2.5hr session for 6 weeks).

Patients can confirm a place (or find more information about courses) by contacting:

Yvonne on 028 9078 2940 or <a href="mailto:yvonnek@arthritiscare.org.uk">yvonnek@arthritiscare.org.uk</a>.



## NICE GUIDANCE — NORTHERN IRELAND SERVICE NOTIFICATIONS

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

NICE TA507 — Sofosbuvir–velpatasvir–voxilaprevir for treating chronic hepatitis C.

NICE TA509 — Pertuzumab with trastuzumab and docetaxel for treating HER2-positive breast cancer.

# **MANAGED ENTRY DECISIONS**

No medicines were considered this month as part of the Northern Ireland Managed Entry process. . Please refer to the Managed Entry section of the Northern Ireland Formulary website for details on previous Managed Entry decisions: <a href="http://niformulary.hscni.net/ManagedEntry/MEDecisions/Pages/default.aspx">http://niformulary.hscni.net/ManagedEntry/MEDecisions/Pages/default.aspx</a>

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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