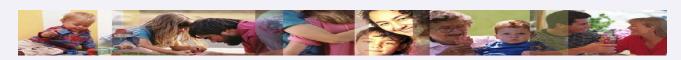
### NORTHERN IRELAND MEDICINES MANAGEMENT



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Health and Social Care Board

#### **NEWSLETTER**



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## **NIECR: Changes to the Medications Section**

The medications section of the Northern Ireland Electronic Care Record (NIECR) is changing. Until now, the medications section has only included medications prescribed by the patient's **registered GP** in the past 6 months.

From August 2017, specialist medicines supplied by NI hospital Trusts will be displayed in an additional section within the existing medication section. Specialist medicines include red and amber list medicines — see Interface Pharmacist Network Specialist Medicines for examples <a href="http://www.ipnsm.hscni.net/">http://www.ipnsm.hscni.net/</a>.



Inclusion / exclusion criteria have been applied to ensure compliance with patient confidentiality policies and legislation. Medicines that meet the <u>exclusion criteria will not appear in NIECR</u> but may still have been supplied to the patient. Exclusions include:

- · HIV medications
- · Clinical trial medication
- · Regional fertility clinic medications

NB: The medicines information displayed in NIECR is <u>one source</u> and must be checked with a second source to confirm current patient medications. Medications displayed may have been discontinued for that patient but will continue to display on NIECR for a period of time for information.

#### What will this mean in practice?

- This new section can be used as another resource within NIECR when undertaking medicines reconciliation as a patient moves between primary and secondary care sectors.
- It can also provide useful information on any specialist medicines, dispensed to a patient by a trust, in case of queries.

# **Prescribe Gliclazide MR Cost-Effectively**

Bilxona® MR tablets (gliclazide, modified release) will be included within the list of Cost-Effective Choices for primary care in Northern Ireland from 18<sup>th</sup> September 2017:

Product	Potential annual savings for NI NHS	Cost effective Choice
Gliclazide MR 30mg and 60mg tablets	£365,000	<b>Bilxona</b> ® MR tablets

#### **Action**

- Gliclazide immediate release (IR) tablets should be used first line (as per NI Formulary).
- When MR gliclazide is indicated, new patients should be commenced on Bilxona® MR tablets.
- Existing patients currently prescribed alternative gliclazide MR products (including the generic) should be considered for switching to Bilxona<sup>®</sup> MR.
- Prescribe by brand name in order to obtain the savings.

## Lidocaine Patches — What's the Harm?

When using lidocaine plasters, about 16% of patients can be expected to experience localised adverse reactions such as burning, dermatitis, erythema, rash, pruritus, skin irritation and vesicles. In addition to localised adverse reactions, the manufacturer of Versatis® and Ralvo® notes that one of the lidocaine metabolites has been shown to be genotoxic and carcinogenic in rats. Secondary metabolites have been shown to be mutagenic. The manufacturer states that the clinical significance of this finding is unknown and therefore advises:



- Long term treatment with lidocaine plasters is only justified if there is a therapeutic benefit for the patient.
- Treatment outcome should be re-evaluated after 2 to 4 weeks.
- If there has been no response after this period (during the wearing time and / or during the plaster-free interval), treatment *must* be discontinued as potential risks may outweigh benefits in this context.
- Long term use of the product in clinical studies showed that the number of plasters used decreased over time.
   Therefore treatment should be reassessed at regular intervals to decide whether the amount of plasters needed to cover the painful area can be reduced, or if the plaster-free period can be extended.
- Because the risk to humans is unclear, long-term treatment with high doses of lidocaine should be avoided.

#### **Action**

- As for all medicines, patients should be made aware of any possible adverse effects prior to prescribing.
- Identify patients on lidocaine plasters and check if patient has had a documented benefit from the treatment. If not, review and discontinue therapy if patient has had no response to the plasters.

#### **Clarification: Prescribing CDs for Syringe Pumps**

Any changes to the dose will require a new 'Prescription and administration of medicines via subcutaneous CME / McKinley T34 syringe pump chart'. A new HS21 prescription should also be issued <u>if necessary</u>. However, if there is a sufficient quantity of medicine for that patient remaining from a previous prescription to deliver the new dose, a new HS21 prescription will not be required immediately, as the nurse will <u>administer using the directions on the chart</u> (rather than the directions on the pharmacy label).

### NICE GUIDANCE — NORTHERN IRELAND SERVICE NOTIFICATIONS

No new Service Notifications have been issued in Northern Ireland for this month.

## **MANAGED ENTRY DECISIONS**

The following medicines were considered in August 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: <a href="http://niformulary.hscni.net/ManagedEntry/MEDecisions/Pages/default.aspx">http://niformulary.hscni.net/ManagedEntry/MEDecisions/Pages/default.aspx</a>

Alectinib (Alecensa®)
Blinatumomab (Blincyto®)

Ciprofloxacin + dexamethasone eardrops

(Cilodex®)

Deferasirox (Exjade®)

Etelcalcetide (Parsabiv®)

Everolimus and sunitinib

Glycopyrronium (Sialanar®)

Idebenone (Raxone®)

Nivolumab (Opdivo®)

Ponatinib (Iclusig®)

Roflumilast (Daxas®)

Safinamide (Xadago®)

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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Northern Office: 028 9536 2845 Western Office: 028 9536 1010