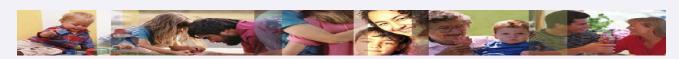
NORTHERN IRELAND MEDICINES MANAGEMENT



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NEWSLETTER



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Prescribing of CDs for Administration via Syringe Pump

When prescribing or dispensing controlled drugs (CDs) for administration via a syringe pump, there are several legal requirements that should be followed.

1) Prescription details

A prescription for Schedule 2 and 3 CDs must contain details of the dose to be taken, written indelibly on a HS21 prescription (handwritten in ink or computer generated). A prescription where the dose is written as "mdu" or "as directed" or "as directed, via syringe driver / pump" is not a legally valid prescription. The dose unit must be expressed, e.g. "10mg twice daily", "1 tablet twice daily", or even "1 as directed" is acceptable, although including details of frequency is preferable.





Prescribers should:

- State the prescribed dose of CD.
- State the dosage form (i.e. ampoule).
- Write the directions as 'dose via CSCI [continuous subcutaneous infusion] in syringe pump over 24 hours.'
- State the number and strength of ampoules to be supplied (in both words and figures).

2) Diluents for CSCI via a syringe pumps

Prescribe as required water for injections or sodium chloride 0.9%, with quantity as required to make CSCI up to volume and directions to make CSCI up to volume over 24 hours.

Example HS21 Prescription

Dose of diamorphine required for patient in 24 hrs = 70mg, for 5 days



"Diamorphine 70mg via CSCI in syringe pump over 24 hours

Diamorphine 30mg ampoules x 10 (ten) Diamorphine 10mg ampoules x 5 (five)

Water for injections 20ml ampoules to make CSCI up to volume over 24 hours x 5"

3) Changes of dose for patients using 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 if necessary. It is important that the chart is updated by the prescriber to allow the district nurse to administer the altered dose. NB: the district nurse will administer from the patient's own supply, according to the chart, not necessarily as per the label on medication.

4) Record keeping

Administration of patient's own CDs by healthcare professionals in a patient's home must be recorded in the patient's notes kept in the house, preferably on a Controlled Drug Stock Monitoring Record reconciliation chart. Further prescriptions can be issued when existing supply is finished, with directions for the current dose.

Action:

• Please ensure prescriptions for CDs comply with legislation and include dose details.

A New BNF and BNF for Children App is Now Available

The BNF have launched a new version of the app for the BNF and BNF for Children: 'BNF & BNFC App'. This replaces the previous version, 'NICE BNF app'.

The new app is free to use and does <u>not</u> require an Athens password.

Key features of the app include:

- BNF and BNF for Children accessible from a single app
- Easy to use interactions checker
- Faster content updates
- Purpose-built versions for Apple and Android devices.

The new **BNF & BNFC App** can be downloaded from the AppStore for iOS devices, and the <u>Google Play</u> for Android devices. For further information please visit https://www.bnf.org/products/bnfbnfcapp/.



Levonorgestrel-releasing Intrauterine Systems – Prescribe by Brand

The MHRA recommends that levonorgestrel-releasing intrauterine systems should always be **prescribed by brand name** because the available products have different indications and duration of use, which are summarised in the table below. Furthermore, these products have different introducers, requiring different insertion techniques. The choice of intra-uterine progestogen-only device in the NI formulary is Mirena[®].

Mirena® 20mcg/24 hours	Levosert® 20mcg/24 hours	Jaydess [®] 13.5mg
Licensed for <u>5 years</u> use for: contraceptionheavy menstrual bleeding	Licensed for 3 years use for: contraception heavy menstrual bleeding	Licensed for 3 years use for: contraception only
Licensed for <u>4 years</u> use for: Endometrial protection as part of hormone-replacement therapy regimen		

Action for GPs

- Ensure that levonorgestrel-releasing intrauterine systems are always prescribed by **brand name**.
- Refer to the NI formulary when prescribing levonorgestrel-releasing intrauterine systems.

Action for community pharmacists

 Refer to the prescriber if presented with a prescription written generically for a levonorgestrelreleasing intrauterine system.

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Further information

- MHRA Drug Safety Update January 2016: https://www.gov.uk/
- Items unsuitable for generic prescribing: http://niformulary.hscni.net

NICE GUIDANCE — NORTHERN IRELAND SERVICE NOTIFICATIONS

Service Notifications have been issued in Northern Ireland for the following: NICE TA433: Apremilast for treating active psoriatic arthritis (rapid review of TA372).

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: http://niformulary.hscni.net/ManagedEntry/MEDecisions/Pages/default.aspx

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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