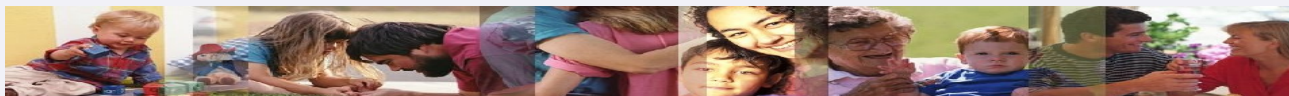


## NEWSLETTER



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## Prescribe Metformin Cost Effectively

Sukkarto<sup>®</sup> SR tablets (metformin, sustained release) will be included within the list of Cost-Effective Choices for primary care in Northern Ireland from 22nd November 2016:

Product	Potential annual savings for NI NHS	Cost effective Choice
Metformin SR 500mg and 1g tablets	£560,000	<b>Sukkarto<sup>®</sup> SR 500mg and 1g tablets</b>

### Action for GPs

- Metformin immediate release (IR) should be used first line as per NICE guidelines.
- When SR metformin is indicated, **new patients** should be commenced on Sukkarto<sup>®</sup> SR tablets.
- **Existing patients** currently prescribed alternative metformin SR products (**including the generic**) should be considered for switching to Sukkarto<sup>®</sup> SR — **\* Prescribe by brand name in order to obtain the savings \***
- When switching, ensure that prescribing records are updated appropriately to avoid duplication of therapy.
- If considering switching, inform local community pharmacists to allow them to adjust their stock levels.
- GPs are encouraged to consider switching suitable patients to the cost-effective choices under the Northern Ireland Prescribing Support LES, if applicable.

### Action for Community Pharmacists

- Clinical checks should ensure there is no duplication of therapy.
- Patients should be reassured that their medication has not changed and that prescribing of cost-effective choices will ensure continuity of product, minimising patient confusion.

The latest cost effective choices list is available on the [NI Formulary website](#). An operating procedure is available on the [primary care intranet](#) to assist with switching suitable patients to IR metformin from SR.

## Methocarbamol – Are You Prescribing Appropriately?

Methocarbamol is listed in the BNF as a medicine 'less suitable for prescribing', as the evidence for its use in muscle spasm or spasticity is limited. **Despite its poor evidence base, over 61,000 scripts for methocarbamol (Robaxin<sup>®</sup>) were prescribed in NI between June 2015 and May 2016, costing £1,278,145.**



Methocarbamol is licensed as a *short-term* adjunct to the symptomatic treatment of acute musculoskeletal disorders associated with painful muscle spasms. However, Clinical Knowledge Summaries do not list it as a treatment option for spasm of the paraspinal muscles in low back pain. Methocarbamol's efficacy in other musculoskeletal conditions has not been investigated in rigorous RCTs. Side effects include drowsiness, dizziness, lightheadedness, amnesia, seizures, blurred vision, headache, fever, and nausea.

### Action

- Prescribers should review patients receiving repeat prescriptions for methocarbamol to ensure it is being prescribed appropriately.

(Refs— [Clinical Knowledge Summaries](#), [Methocarbamol SPC](#), [Formulary Drug Listing Decisions Skeletal Muscle Relaxants](#) [WSIB Ontario](#) 2010).

## Drugs Unsuitable for Treatment of Insomnia

Clinical Knowledge Summaries recommend that sedative drugs other than hypnotics (such as antidepressants, antihistamines, chloral hydrate, clomethiazole, and barbiturates) are **not recommended** for the management of insomnia. This is due to insufficient evidence to support their use and also the significant potential for adverse effects.



The antihistamine promethazine is sometimes prescribed for patients who have difficulty sleeping. Prescribers are reminded of the potential for next-day drowsiness, dizziness, restlessness, headaches, nightmares, tiredness and disorientation. Anticholinergic side effects such as blurred vision, dry mouth and urinary retention are also an issue, particularly for patients who may already be on one or more medications with similar side effects.

Sleep hygiene should be the first course of action for most patients. Further advice on management of insomnia is available in the CKS Insomnia Guidelines and a range of support materials is available on the Choice and Medication website:

<http://www.choiceandmedication.org/hscni/conditions/13/>  
<http://cks.nice.org.uk/insomnia>

### Action

- Prescribers are advised to review all patients taking these products for insomnia to consider stopping.

## Did You Know...?

### Antibiotic oral liquid costs — trimethoprim and nitrofurantoin



Where an antibiotic is required in liquid form, and both nitrofurantoin and trimethoprim are suitable choices, **trimethoprim oral suspension is significantly cheaper** and hence the preferred option:

- Nitrofurantoin 25mg/5ml oral suspension sugar free costs **£446.95** (300ml)
- Trimethoprim 50mg/5ml oral suspension sugar free costs **£6** (300ml).

### Newly licensed glycopyrronium oral liquid



A new *licensed* product of glycopyrronium bromide 1mg/5ml oral solution (by Colonis) is now available, at a price of **£91** for 150ml. Most patients who previously received a 'special', should now receive the licensed product. For further information on the prescribing of 'specials', see '[Specials](#)' supplement on the NI Formulary website.

**Clarification — the September edition of the newsletter provided formulation details for tar pomade — please note that 'coal tar' refers to coal tar solution and not crude coal tar. The on-line version has since been amended [here](#).**

## NICE GUIDANCE — NORTHERN IRELAND SERVICE NOTIFICATIONS

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

[NICE TA390](#) — Canagliflozin, dapagliflozin and empagliflozin as monotherapies for treating type 2 diabetes

[NICE TA396](#) — Trametinib in combination with dabrafenib for treating advanced (unresectable or metastatic) melanoma

[NICE NG54](#) — Mental health problems in people with learning disabilities: prevention, assessment and management

## MANAGED ENTRY DECISIONS

The following medicines were considered in November 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>

Aflibercept (Eylea®)  
Bevacizumab (Avastin®)  
Carfilzomib (Kyprolis®)  
Certolizumab (Cimzia®)  
Cobimetinib (Cotellic®)  
Crizotinib (Xalkori®)  
Dapagliflozin (Forxiga®)  
Grazoprevir + elbasvir (Zepatier®)

Necitumumab (Portrazza®)  
Perampanel (Fycompa®)  
Pegaspargase (Oncaspar®)  
Pirfenidone (Esbriet®)  
Progesterone vaginal tablets (Lutigest®)  
Radium-223 dichloride (Xofigo®)  
Secukinumab (Cosentyx®)  
Talimogene laherparepvec (Imlygic®)

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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