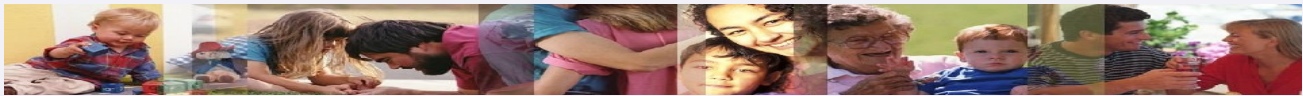


## NEWSLETTER



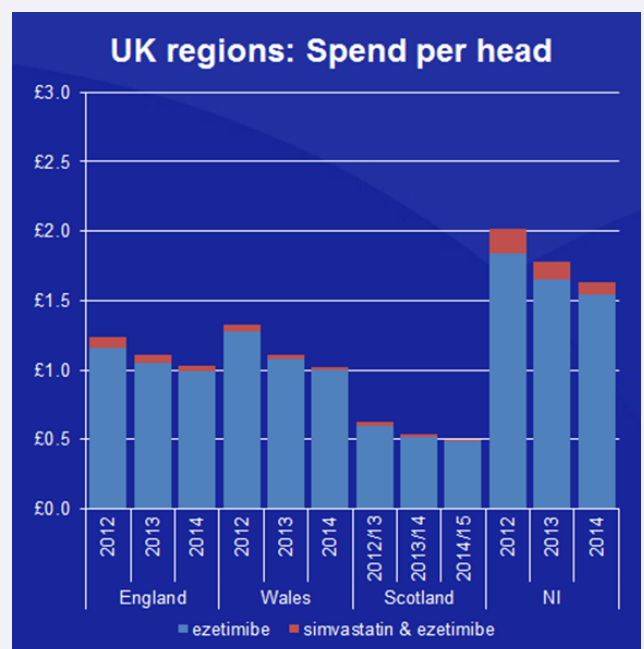
### In This Issue

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## NICE: 'NO CHANGE IN PRACTICE' FOLLOWING EZETIMIBE'S IMPROVE—IT STUDY

NICE published a Medicines Evidence Commentary last month, following the publication of results from the IMPROVE-IT trial. The IMPROVE-IT trial was a large, multicentre randomised controlled trial that compared the effects of ezetimibe plus simvastatin and simvastatin alone in people with acute coronary syndrome (ACS).

NICE concluded that the trial found that 'adding ezetimibe to simvastatin 40 mg after ACS produced a greater reduction in risk of cardiovascular events than simvastatin 40 to 80 mg alone. However, the effect of the combination on this risk is that which would be predicted from the degree of LDL cholesterol-lowering seen with a high-intensity statin such as atorvastatin 20 to 80 mg daily. **The study provides no reason to depart from recommendations in the NICE lipid modification guideline.**'



Northern Ireland spends considerably more on ezetimibe than other regions of the UK, as shown in the graph. The HSCB Ezetimibe review tool on the Primary Care intranet has been updated to incorporate these NICE recommendations and the new version will be uploaded to the website next month.

### Action

- Prescribers should continue to follow NICE guidance on [lipid modification](#).
- Only consider adding ezetimibe to statin therapy if the person is not achieving target despite maximum tolerated statin dose (at least 3 statins should be tried before concluding statin intolerance) and both adherence and lifestyle issues have been addressed.
- Consider carrying out an ezetimibe review through the NI Prescribing LES (practices will need to update their action plan if ezetimibe not already added to the plan) or contact your MMA for further support.

## NI FORMULARY: USER SURVEY INVITATION

HSCB is seeking feedback on how the NI Formulary website is performing.

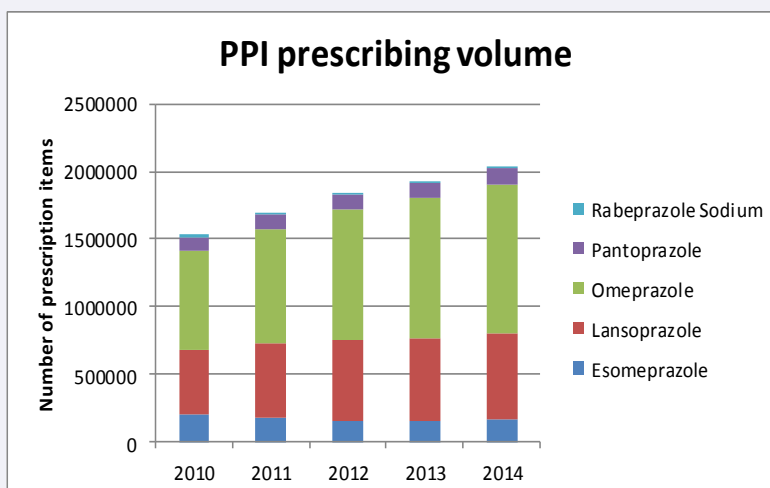
A short online survey is available on the home page of the NI Formulary or by clicking here: <https://www.surveymonkey.com/r/LD7Q3CX>. It typically takes no more than 3 minutes to complete and all responses will be kept confidential.



## FIVE REASONS TO AVOID LONG-TERM PPIs

The number of prescriptions for proton pump inhibitors (PPIs) in Northern Ireland has risen steadily over the years. This is despite recent studies on PPIs that have found:

1. Postmenopausal women who were previous or current smokers and who regularly used PPIs for more than two years had an increased risk of low-trauma hip fracture.
2. Hospital inpatients taking daily PPIs had an increased risk of developing diarrhoea associated with *Clostridium difficile*.
3. There may be an increase in the risk of hip, wrist, or spine fracture, especially if PPIs are used in high doses and over long durations (>1 year). The increased risk was observed mainly in elderly patients.
4. Prolonged use of PPIs has been associated with hypomagnesaemia. Caution is required especially in patients who will take a PPI concomitantly with digoxin or drugs that may cause hypomagnesaemia, for example diuretics.
5. Proton pump inhibitors can cause interstitial nephritis and are an underappreciated cause of acute kidney injury.



## NEW NICE GUIDANCE

[NICE Guideline NG8](#) — Anaemia management in people with chronic kidney disease

[NICE Guideline NG12](#) — Suspected cancer: recognition and referral

## MANAGED ENTRY DECISIONS

The following medicines were considered in August as part of the Northern Ireland Managed Entry process. **For details of the outcomes please refer to the Managed Entry section of the Northern Ireland Formulary website:** <http://niformulary.hscni.net/ManagedEntry/MEDecisions/Pages/default.aspx>

### Primary and Secondary Care

- Edoxaban (Lixiana<sup>®</sup>)

### Secondary Care

- Tinzaparin (Innohep<sup>®</sup>)

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 Medicines Management pharmacists in your local HSCB office.

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### References

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- 2) Clostridium difficile infection: guidance on management and treatment. Public Health England. June 13
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