**Pharmacy Department** NHS Lanarkshire Headquarters Kirklands Fallside Road

www.nhslanarkshire.co.uk

Bothwell G71 8BB

TO ALL COMMUNITY PHARMACIES IN NHS LANARKSHIRE PLEASE SHARE WITH LOCUMS &

SUPPORT STAFF AS APPROPRIATE

1st October 2015 Date

Your Ref

GL/GL Our Ref

Enquiries to George Lindsay Direct Line 01698 858127/8 Fax 01698 858271

Email George.Lindsay@lanarkshire.scot.nhs.uk

Dear Colleague,

## COMMUNITY PHARMACY: PUBLIC HEALTH SERVICE **EMERGENCY HORMONAL CONTRACEPTION (EHC) UPDATED DIRECTIONS AND** SERVICE SPECIFICATION PCA (P) (2015) 20

The service extension described in the above circular comes into effect today and the purpose of this letter is to remind pharmacists of some of the key elements and to place this in a local context.

- Ulipristal acetate has now been added as an alternative choice to levonorgestrel.
- Pharmacists providing the service must complete the National Education for Scotland (NES) "Contraception" e-learning resource as detailed in the updated service specification.
- There is no requirement for a PGD for ulipristal acetate as it has been reclassified as a P medicine so pharmacist should supply the P pack.
- When pharmacists supply levonorgestrel it should the POM pack against the PGD.
- When deciding on the most appropriate choice of therapy, pharmacists should take account of both clinical need and local prescribing guidance as determined by their NHS Board Area Drugs and Therapeutics Committee.
- Within NHS Lanarkshire this is available from the Joint Formulary which is accessible via www.communitypharmacy.scot.nhs.uk/nhs\_boards/NHS\_Lanarkshire/formulary.html
- The current guidance is clear. Ulipristal acetate (EllaOne®) is a new oral contraceptive which is licensed up to 5 days after unprotected intercourse. Ulipristal acetate (EllaOne®) has been shown to work at least as well as levonorgestrel however due to its cost it should mainly be used for clients not wishing a coil who present for emergency contraception after 72 hours and up to 120 hours or at the doctors discretion. It is licensed for usage once in a menstrual cycle.
- Bearing in mind the niche for ulipristal and the long history of the success of the community pharmacy emergency hormonal contraceptive service when levonorgestrel was the only medication available, we would still anticipate that the vast majority of prescribing will be with levonorgestrel.



Prescribing data will allow us to audit that, but if any pharmacist anticipates that they
will prescribe any more than a minority of ulipristal or if they see this developing in
practice, I would be grateful if they could provide me with early notice. That would
allow us to plan accordingly.

I hope that pharmacists will complete the e-learning resource required to provide this service and then provide the service in line with the NHS Lan Formulary recommendations

Yours sincerely

GEORGE LINDSAY
CHIEF PHARMACIST
PRIMARY CARE
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Dr Anne McLellan, Lead Consultant Sexual Health Services Katrina Mackie, Formulary and Clinical Effectiveness Pharmacist Ann Auld, Lead Pharmacist, Prescribing Management