Pharmacy & Medicines Directorate Weekly Update



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Increased Diagnoses of Gonorrhea

Public Health Scotland have issued an alert to health boards about the increased diagnoses of gonorrhoea infection in women and men in all ages across Scotland. Gonorrhoea is sexually transmitted infection caused by bacteria passed from person to person through vaginal, anal or oral without a condom.

Diagnoses for Gonorrhoea have been increasing over the last five years, but more recent figures now show a rate per 100,000 which is above pre-pandemic levels (15 diagnoses per 100,000 in July 2022 compared to an average monthly incidence in 2019 of 9 per 100,000)

Levels of testing have not returned to pre-pandemic levels therefore it is suggestive that the increase in rates is due to increases in transmission. From the Sexual Health IT system, NaSH, it is clear that transmission is mainly being driven by Gay and Bi-Sex Sexual Men who have with Men (GBSMSM) however there are marked also increases in heterosexual males and females.

Primary Care colleagues are being asked to help ensure that people presenting with symptoms are able to access prompt testing for diagnoses and treatment as appropriate; similarly, community pharmacies, where people may present for advice/with symptoms are also asked to enable people to access testing either through GPs or Sexual Health Services.

In addition, colleagues are asked to remind people about the prevention of Gonorrhoea and other Sexually Transmitted Infections and other person-toperson infections such as Monkey Pox, by accessing and using condoms and lubricant. Free condoms and lubricant are available direct in Grampian: Free Condoms by post (nhsgrampian.org) GPs/Community Pharmacies can also order to distribute condoms (and lube) Free of charge by contacting gram.resources@nhs.scot.

Please also see attached for additional information.

New Guidance Concerning Lamotrigine and Contraception

It has been known for a while that estrogen in combined hormonal contraception (CHC) can affect lamotrigine levels which could result in reduced seizure control. Conversely, there is a potential risk of lamotrigine toxicity in the hormone -free interval

In addition, the Clinical Effectiveness Unit (CEU) of the Faculty of Sexual and Reproductive Health (FSRH) has released new guidance on drug interactions with hormonal contraception.

- 1. Desogestrel might increase exposure to lamotrigine in some individuals
- 2. Lamotrogine may reduce exposure to contraceptive progestogens.

The resulting effect on contraceptive effectiveness of CHC or progestogen only contraceptives is not known. It could potentially reduce the effectiveness of hormonal contraception.

Here are some good practice points with an exert from the CEU.

"If use of combined hormonal contraception is unavoidable, lamotrigine dose may need to be increased (potentially as much as two-fold) and serum lamotrigine levels monitored to avoid reduction in effectiveness of lamotrigine. It is suggested that a continuous combined hormonal contraceptive regimen (with no hormone-free interval) is used to avoid cyclical changes in lamotrigine levels.

Individuals using lamotrigine who commence a progestogen-only contraceptive should be vigilant for signs of lamotrigine toxicity (dizziness, ataxia, diplopia). Consider monitoring serum lamotrigine levels when the progestogen is stopped. It is suggested that when hormonal contraception is started or stopped by an individual using lamotrigine, this should be done in consultation with the individual's GP or neurologist/psychiatrist so that any dose adjustments required can be made. It is possible that contraceptive effectiveness of combined hormonal contraception, **all progestogen only pills** and the **etonogestrel implant** could be reduced during use of lamotrigine.

There are no study data to inform this. It is suggested that, erring on the side of caution, **additional reliable use of condoms** should be advised with these contraceptive methods.

Contraceptive effectiveness of depot medroxyprogesterone acetate and levonorgestrelreleasing intrauterine systems (as well as copper intrauterine devices) is not expected to be affected by lamotrigine."

Drug Interactions - Faculty of Sexual and Reproductive Healthcare (fsrh.org)

Reminder: Community Pharmacy Work Flow Survey

We acknowledge the ongoing challenges in community pharmacies relating to all elements of pharmaceutical service provision. In discussion with your team, we would like you to detail the top 5 changes we could make to improve community pharmacy workflow. These could be really simple e.g. pharmacies to align prescriptions for patients so all repeats collected at same time, more medium term asks e.g. specific PGD's or the "big asks" such as a shared PCR accessible by acute pharmacy / pharmacotherapy / community pharmacy. Survey Link Here

Smoking Cessation E-Learning

Pharmacy Smoking Cessation Programme elearning - <u>www.smoking2.nes.scot.nhs.uk</u>, please note that Adobe no longer supports Flash Player. We advise you overlook those very small sections within the 6 modules. As always, please do not hesitate to contact the Public Health Practitioners with any training issues, contact details available on NHSG CP website. If above hyperlink does not work please paste to browser.

Teach & Treat Hubs

Starting a Pharmacy First Plus (PF+) service can be daunting. You may have run different clinics before or perhaps you qualified as a prescriber a long time ago but have not found a way to use it for your patients before PF+. You will have completed the required NES courses or be in the process of completing them as per PCA(16) but might still be apprehensive about offering this new service.

Within pharmacy education, there is an increased focus on experiential and workplace-based training, with this type of training being used at all levels and increasingly in post qualification activities. The Common Clinical Conditions Teach & Treat Programme is delivered for community pharmacists, by community pharmacists. Experienced Community Pharmacist Independent Prescribers (CPIPs) have been identified across Scotland to deliver high quality experiential training within their pharmacy training hub. Utilising the Teach and Treat methodology and incorporating workplace-based assessments such as mini-CEX (mini clinical evaluation exercise), the Teach and Treat Lead provides clinical supervision to fellow CPIPs to further develop their clinical assessment, consultation and clinical decision-making skills.

If you attend a NES Common Clinical Conditions Teach & Treat Hub which are currently situated in 10 locations across the country, you will have the opportunity to observe a peer, be observed and participate in a mini-CEX. You will receive immediate feedback of your skills, attitudes, knowledge and behaviours in a supportive environment. Hub attendance will be beneficial in further developing your skills and ability to provide the PF+ service for your patients

Our NHSG Teach & Treat hub is currently based at Buchanhaven Pharmacy in Peterhead.

The <u>Turas page</u> here contains application forms, selfassessment and process charts that can guide any potential attendees that might wish to attend as part of their prescribing journey. If TURAS link does not work please search for "Teach and Treat for Common Clinical Conditions" on the TURAS home page.

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Community Pharmacy Scotland Newsletter Round-up



Funded Post-registration Foundation programme: last call for applications for October start! Peter is a fee fon or othegas at NSS dealing the process and dealine (or estands to 76 September)

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Aripiprazole and Temazepam Update

We are assess that this mooth these takes been addelowed concerns over pricing of both Archiptomore and Termanipues. The following adjusted prices have been agreed for the month of August only.

Road Maria



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Updated Uninary Tract Infection (UTI) and Impetigo Resources

Dur colleagues at NDS have shared the following detail on updated UTI and impelign Resources

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Alendronic Acid Short Supply

Pendously we had coole you aware that the short wapsis flag had been applied to Aierdoole Add Yong Tatis, which allowed you to be windowed for either the dog to IP plan, or a plane you endowe.





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Additions and Deletions to Part 7 as of 1st September 2022

The new subtlet vestion of Port 7 is now evaluate for September 2003, to this nonth theirs are a sumber of additions and deletion to Plat 78 we wanted to name you aware of





We Want You!



Do you or your team have anything you would like to share within our weekly brief? Good news stories? Learning points? If you do please contact us by email below.

Email Contact: gram.pharmaceuticalcareservices@nhs.scot

Newsletter by,

The Pharmaceutical Care Services Team,

Have a great weekend.

Missed a copy of an update? Weekly Updates are uploaded to the CP Grampian website

Password: NHSGrampianCP2022