

Fife Prescribing update

A BI-MONTHLY NEWSLETTER AIMED AT ALL MEDICAL AND NON-MEDICAL PRESCRIBERS ACROSS NHS FIFE

Welcome to issue 53 of the Fife Prescribing Update - I hope you enjoy reading this newsletter. If you have enquiries about the content or articles covered in this newsletter, please contact your Locality Pharmacist. Articles in this newsletter are for guidance only and appropriate medical information e.g. BNF, Summary of Product Characteristics etc. should be consulted before use. Similarly, if you do not wish to receive this newsletter or your contact details are incorrect; please drop a line to gilliankerr1@nhs.net.

In this Issue:

- **Stock Order Forms (GP10A) - Reduce Prescribing Costs by Using Stock Order Forms Appropriately**
- **Reduce the Risk of Falls in the Frail and Elderly by Reducing Anticholinergic Burden**
- **Oxygen Concentrators - New Service**
- **Simvastatin and Amlodipine - Interaction Reminder**
- **Potential Risk of Error in Selecting Incorrect Oxycodone Strength**

STOCK ORDER FORMS (GP10A)

- Reduce Prescribing Costs by Using Stock Order Forms Appropriately

NHS Fife currently spends about £500,000 per year on items ordered on stock order forms (GP10A) that are supplied by community pharmacy excluding influenza and pneumococcal vaccines. Unlike prescriptions, stock orders are subject to the addition of VAT at 20% as well as a 17.5% community pharmacy handling charge. Also, medicines supplied on a stock order will not be recorded on the patient's record. They should therefore only be used for treatments that are required for immediate use by the patients in an unplanned intervention in the practice.

A review in one Fife practice found many items being ordered on stock order where a prescription should have been used. Examples include: Depo-medrone injection®, Depo-Provera®, contraceptive implants, intra-uterine contraceptive devices or woundcare for long term use.

Patients who attend for planned procedures or dressing changes should have associated medications prescribed on prescription eg corticosteroid injections, contraceptive injections or implants.

A small number of items are only prescribable on a stock order form and are not allowed on prescription. Some examples are shown below. The full list of these items is available at: [http://www.communitypharmacyscotland.org.uk/resources/files/Contractor%20Services/Compendium%20of%20Disallowed%20Products%202009%20\(18\).pdf](http://www.communitypharmacyscotland.org.uk/resources/files/Contractor%20Services/Compendium%20of%20Disallowed%20Products%202009%20(18).pdf)

- Histofreezer kits
- Skin closure strips for administration by prescriber (Steri-Strip 6mm x 75mm)
- Tubegauze 20m rolls
- Suture (certain sizes only)
- Fluorets strips

A small number of items are NOT allowed on Stock order (but often requested)

- Pregnancy testing kits
- Multistix GP
- Uristix
- Finger cots
- Gloves (cotton, latex, sterile, linen rubber)

To ensure the correct use of the Stock order forms a core stock list could be used by practices. For further advice, on what items should be prescribed on stock order, please contact a member of the pharmacy prescribing support team.

KEY POINTS –

- **Stock order forms should only be used for:**
 - **Immediate** treatments for patients in an unplanned intervention in the practice
 - Items that can **ONLY** be obtained on the stock order form
 - Certain vaccines e.g influenza
- **Stock order forms are subject to the addition of VAT at 20% plus 17.5% community pharmacy handling charge in addition to prescribing costs.**
- **Medicines supplied on a stock order will not appear on that patient's prescribing record.**

Reduce the Risk of Falls in the Frail and Elderly by Reducing Anticholinergic Burden

Anticholinergic drugs are poorly tolerated in frail and elderly patients. Anticholinergics in the elderly are of concern due to impaired cognition, falls risk and their link to increased mortality. Reducing falls and polypharmacy are high priorities for NHS Fife¹.

Side effects resulting from the blockade of acetylcholine include:

- Dry Mouth
- Blurred Vision
- Constipation
- Urinary retention
- Memory Impairment
- Sedation
- Hypotension
- Drowsiness

The anticholinergic cognitive burden (ACB)² scale or similar³ can be used to help quantify the risk of harm to people taking these medicines. A score of 3 or more is considered clinically significant, the risk of harm increasing with increasing score.

Anticholinergic drugs used to manage urinary incontinence symptoms all score 3 on the scale.

The current recommendation is to review these medicines every 6-12 months and stop them for a trial period where appropriate. Many other commonly prescribed medications have anticholinergic effects which may not be initially obvious. The table below gives some examples¹

1 Point	2 Points	3 Points
Haloperidol Quetiapine Mirtazapine Paroxetine Trazodone Ranitidine	Clozapine Nortriptyline Baclofen Cetirizine/Loratadine Cimetidine Loperamide Prochlorperazine	Chlorpromazine Amitriptyline Imipramine Chlorphenamine Hydroxyzine

Prescribers are therefore asked to consider total anticholinergic burden and side effects in the frail and elderly when prescribing. Practices will be offered this as a 2015/16 GMS prescribing project.

The "MAP" acronym may be useful when reviewing medicines

Medication – Is it essential?

Alternatives – Is there another medication with a lower anticholinergic score?

Patient monitoring – For symptoms and side effects.

It should also be noted that anticholinergic drugs inhibit the acetylcholinesterase inhibitors, such as donepezil, rivastigmine and galantamine used in treatment of dementia.

References

1. Polypharmacy Guidance, NHS Scotland, The Scottish Government, October 2011
2. <https://www.uea.ac.uk/mac/comm/media/press/2011/June/Anticholinergics+study+drug+list>
3. http://www.agingbraincare.org/uploads/products/ACB_scale_-_legal_size.pdf

OXYGEN CONCENTRATORS - NEW SERVICE

A new service has been established by Pharmacy Services, NHS Fife to enable urgent access to an oxygen concentrator, only for patients at home who become hypoxic at the end of life. This service can be contacted Monday to Friday from 8.30am until 2.30pm.

A Standard Operating Procedure (SOP) for this Service has been sent to all GP Practices. For further information or an additional copy of the SOP, please contact Pharmacy Services on 01383 565351.

SIMVASTATIN AND AMLODIPINE - INTERACTION REMINDER

There are still patients who are prescribed higher than the recommended dose of simvastatin in conjunction with amlodipine. Concomitant use with amlodipine may increase plasma concentrations of simvastatin which is associated with an increased risk of myopathy and/or rhabdomyolysis.

Prescribers are reminded that:

- the **maximum** recommended dose for **simvastatin** in conjunction with **amlodipine** is **20 mg/day**.

Full information on this and other interactions with simvastatin can be found in the MHRA Drug Safety Update August 2012 via the link below.

<https://www.gov.uk/drug-safety-update/simvastatin-updated-advice-on-drug-interactions>

Potential Risk of Error in Selecting Incorrect Oxycodone Strength

Reports of incidents involving the selection of the wrong strength of oxycodone oral solution by the prescriber have been highlighted by a Controlled Drug Accountable Officer. Oxycodone oral solution 10mg/ml can sometimes appear as the first option on the Egton Medical Information Systems (EMIS) used by GP surgeries, and has been picked instead of oxycodone oral solution 5mg/5ml. This error appears to have led to two patients needing hospital treatment.

Prescribers should exercise caution to ensure the correct strength is selected from the drop down list in EMIS.

Pharmacists should make sure they check all prescriptions for oxycodone oral solution 10mg/ml and confirm with the prescriber that it is the intended strength.