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## NEW: RDTC Monthly Formulary Amendments report

**This new monthly report highlights to formulary and medicines optimisation groups national decisions made by NICE, MHRA, NPSA and RMOC. It supports committees in ensuring that their formularies reflect latest guidance, but also provides a suggested formulary position, together with a summary of any financial or commissioning implications.**

The document intends to support consistent decision making by APCs and should support Integrated Care Systems with multiple APCs.

The document is available in an editable word version so that stakeholders can complete their local current formulary position, and add in other requests for local formulary amendments for consideration.

This report is published before the end of the first working week of each month, and can be accessed through the [Formulary tab on the RDTC Prescribing Support website](#); you will need to be registered and logged in to access, access is available to any NHS employee within a stakeholder organisation.

If your organisation is not currently a stakeholder we are happy to explain the benefits of our service. Email us at [nuth.nyrdtc.rxsupp@nhs.net](mailto:nuth.nyrdtc.rxsupp@nhs.net)

## Use of steroid medication warning cards for children and young people

The Neonatal and Paediatric Pharmacist group (NPPG) have published a position statement on the use of steroid medication warning cards in children and young people.

It is recommended that HCPs dispensing corticosteroids for children and young people check whether the patient and family have received the appropriate steroid card, and if not, issue one where applicable. The full statement can be accessed [here](#).

### What's new from RDTC

#### Publications

- Monthly Horizon Scanning:
  - November, December, January
- **NEW\*\* Monthly Formulary Amendments**
  - **November, December**

#### Prescribing Analysis reports

- ◆ Monthly Financial Headlines (November 2021)
- ◆ Price concession bulletin (December 2021)
- ◆ Drug Tariff Monitor (October 2021)
- ◆ Top 50 BNF Sections and Drugs reports (21/22 Q2)
- ◆ Growth Contrast (21/22 Q1&2)
- ◆ Cost Comparison Charts (January 2022)

#### Therapeutic reports with Q2 2021/22 data:

- ◆ Drugs in Diabetes
- ◆ Cardiovascular
- ◆ Drugs for Dementia
- ◆ Respiratory

#### Topics in development

- New Drug Evaluation:
  - estradiol spray
  - bio-identical estradiol and progesterone
- Medicines in Practice:
  - orodispersible budesonide for maintenance of eosinophilic oesophagitis

## National Detect, Protect and Perfect programme and choice of DOACs

CCGs should now have received from NHSE/I the [operational notes](#) relating to the outcome of the national procurement for DOACs which were circulated in December. These contain details on the value of the opportunity and the actions required by CCGs if they wish to access the framework prices, as well as some information on the Detect, Protect and Perfect initiatives that will be accessible for participating CCGs.

As a result of the procurement, it is now recommended that:

- **For patients commencing treatment for AF:** subject to the criteria specified in the relevant NICE technology appraisal guidance, clinicians should use edoxaban where this is clinically appropriate. If edoxaban is contraindicated or not clinically appropriate for the specific patient then, subject to the criteria specified in the relevant NICE technology appraisal guidance, clinicians should then consider rivaroxaban first, then apixaban or dabigatran.
- **For patients already prescribed a DOAC for the treatment of AF:** subject to the criteria specified in the relevant NICE technology appraisal guidance, commissioners may wish to consider developing local policy to review patients currently prescribed apixaban, rivaroxaban or dabigatran, where clinically appropriate.

Commissioners and medicines optimisation teams may wish to review their current rates of prescribing of each of the DOACs which is available using the RDTC's Cardiovascular Therapeutic Report. A summary of the data at ICS level is available below. This shows that many areas have lower rates of edoxaban prescribing than the England average of 8.4% of all oral anticoagulants, thereby reducing the available opportunity to a number of CCGs offered by the national framework. These commissioners may want to review local prescribing recommendations.

North West, North East and Yorkshire ICSs: Weighted prescribing volume of Oral anticoagulants (per AF patient) - April 2021 to September 2021

Selected CCG profile: NHS area		DDD's per patient with atrial fibrillation			Total			
CCG								
South Yorkshire & Bassetlaw					175.08			
Greater Manchester HSC Partnership					171.43			
England					169.65			
W Yorkshire & Harrogate H&C P/Ship					168.12			
Humber, Coast & Vale					166.40			
Cumbria & North East					165.13			
Cheshire & Merseyside					160.44			
Healthier Lancashire & South Cumbria					158.93			
				Variation:	1.1			
1	Apixaban	70.48	2	Rivaroxaban	49.14	3	Warfarin sodium	28.34
4	Edoxaban	17.23	5	Dabigatran etexilate	4.26	6	Acenocoumarol	0.18
7	Pentosan polysulfate sodium	0.01	8	Phenindione	0.00	9	Phenprocoumon	0.00
10	INR blood testing reagents			Others				
Highlighting key:		Selected CCG/organisation & its Top 3 values (where applicable)						

## Primary Care Discussions: Focus on Diabetes

An 'On the Couch' webinar discussion between specialist pharmacists hosted by SPS will be held on Thursday 31 March 2022.

Speakers will share their experiences of working across the healthcare interface in the area of diabetes. This event invites you to join a discussion on how we revive, reinvent and run with integrated services empowering people living with diabetes.

Registration before the event can be done [here](#).

## New SPS publications

Recently added resources on the SPS website:

- [Using desiccated \(natural\) thyroid extract products for hypothyroidism](#)
- [High dose loperamide use in high stoma output or short bowel syndrome](#)
- [Understanding informed consent in medicines-related conversations](#)
- [Understanding polypharmacy, overprescribing and deprescribing](#)
- [Taking a person-centred approach to managing polypharmacy](#)
- [Covert administration of medicines in adults: legal issues](#)
- [Covert administration of medicines in adults: pharmaceutical issues](#)
- [Sodium content of miscellaneous preparations](#)

**Have you got a issue regarding medicines that you are unable to answer?**

Contact our Medicines Information Service

0191 2824 631  
or [email us](#)

We provide a comprehensive answering service to support NHS healthcare professionals in primary care deal with clinical questions across a wide range of therapeutic, pharmaceutical and pharmacological issues in primary care

**Have an idea for a new document?**

If you need a report, document, or prescribing data that we don't already produce, get in touch at [nuth.nyrdtc.rxsupp@nhs.net](mailto:nuth.nyrdtc.rxsupp@nhs.net) or tweet us at [@RDTC Rx](#)

## Medicines Availability Information

**Tocilizumab** (RoActemra®) in the clinical prioritisation section of the [Supply Disruption Alert](#) (SDA). \*\*\*\*\*  
**Desmopressin** (Octim®) 150mcg/dose nasal spray is unavailable until November 2023. Where patients have insufficient supplies of nasal spray, clinicians should refer

them to their haemophilia treatment centre for consideration of switching to Octim 15mcg/ml injection. Patients who are switched should be counselled regards the SC administration and storage requirements of the product (refrigerated between 2– 8°C)



Details of all national shortages can be found on the [SPS web-site](#). Registration is required.

## SPS: New guides for providing medicines advice and/or prescribing in pregnancy

New resources available on the SPS website regards providing medicines advice and / or prescribing in pregnancy include:

- [Training resources](#) supporting health care practitioners through the process of handling an enquiry and providing advice including individual risk assessment.
- [Treatment of 13 common conditions](#) covering the relevant current guidelines, stepwise recommendations (including non-pharmacological management), pregnancy outcome information and patient information.
- [Pain](#)
- [UTIs](#)
- [Nausea and Vomiting](#)
- [Epilepsy](#)
- [Hypertension](#)
- [Asthma](#)
- [Constipation](#)
- [Depression](#)
- [Diabetes](#)
- [Hayfever/Allergic rhinitis](#)
- [Heartburn and Dyspepsia](#)
- [Thrush / Vaginal candida](#)
- [Haemorrhoids](#).

These resources can be found at <https://www.sps.nhs.uk/home/guidance/safety-in-pregnancy/>

## Change to NICE publications

NICE Pathways will not be updated after 31 December 2021 and will be withdrawn in spring 2022. NICE will be focusing their resources on providing dynamic, living guideline recommendations.

Therefore, from 1 January 2022, the content in Pathways will not reflect the latest NICE recommendations. For up to date guidance and advice, visit [www.nice.org.uk/guidance](http://www.nice.org.uk/guidance).

The NICE evidence search service will be closing on 31 March 2022. You will not be able to use the service after this date.

## New and updated NICE guidance

### NICE Guidance—updated

CG150: [Headaches in over 12s: diagnosis and management](#)  
NG12 : [Suspected cancer: recognition and referral](#)  
NG131: [Prostate cancer: diagnosis and management](#)  
NG151 : [Colorectal cancer](#)  
NG191 : [COVID-19 rapid guideline: managing COVID-19](#)

NG81 : [Glaucoma: diagnosis and management](#)

### NICE Guidance—new

NG211 : [Rehabilitation after traumatic injury](#)  
NG210 : [Pelvic floor dysfunction: prevention and non-surgical management](#)

## UK product launches

**Sotrovimab** (Xevudy®▼) is indicated for the treatment of symptomatic adults and adolescents (aged 12 years and over and weighing at least 40 kg) with acute covid-19 infection who do not require oxygen supplementation and who are at increased risk of progressing to severe Covid infection.

**cenobamate** (Ontozry®▼) film coated tablets are indicated for the adjunctive treatment of focal-onset seizures with or without secondary generalisation in adult patients with epilepsy who have not been adequately controlled despite treatment with at least 2 anti-epileptic medicinal products.

**molnupiravir** (Lagevrio®▼) is indicated for treatment of mild to moderate coronavirus disease 2019 (COVID-19) in adults with a positive SARS-COV-2 diagnostic test and who have at least one risk factor for developing severe illness. To be supplied via COVID-19 Medicines Deployment Units (CMDU).

### Looking for something?

Our documents, reports, and other useful publications are all published on our website [www.rdtc.nhs.uk](http://www.rdtc.nhs.uk)

Drafts may be available on request

### We need YOU!

We're always on the lookout for reviewers to comment on our draft publications. If you'd be interested [email us](#) and we'll add you to our reviewers list.

### Specialise in a particular area?

We can tailor what we send you for review so that you only receive documents relevant to you

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