Area Prescribing Committee Bulletin November 2024

1 - Link to APC website

2 - Link to APC Joint Formulary

New Formulary Submissions

Vibegron (Obgemsa®) - AMBER 3

Indication:

- Approved in NICE TA guidance with the same place in therapy as mirabegron - if antimuscarinic medicines are not suitable, do not work well enough or have unacceptable side effects.

- Does not affect blood pressure - mirabegron is contraindicated in those with severe hypertension and requires regular blood pressure monitoring.
- Cost effective alternative to mirabegron (£26.68 vs £29 for 30 tablets).
- **Dose:** 75mg daily.
- Tablets can be crushed for those with swallowing difficulties (mirabegron is MR).
- See NottsAPC Overactive bladder guidance or the Formulary for further details.

Latanoprost & netarsudil eye drops (Roclanda®) - AMBER 2

Indication:

- NICE recommended in TA guidance as 2nd/ 3rd line option for glaucoma or ocular hypertension after a prostaglandin analogue alone has not reduced the intraocular pressure (IOP) enough if:

  - a fixed-dose combination treatment containing beta-blockers is unsuitable or

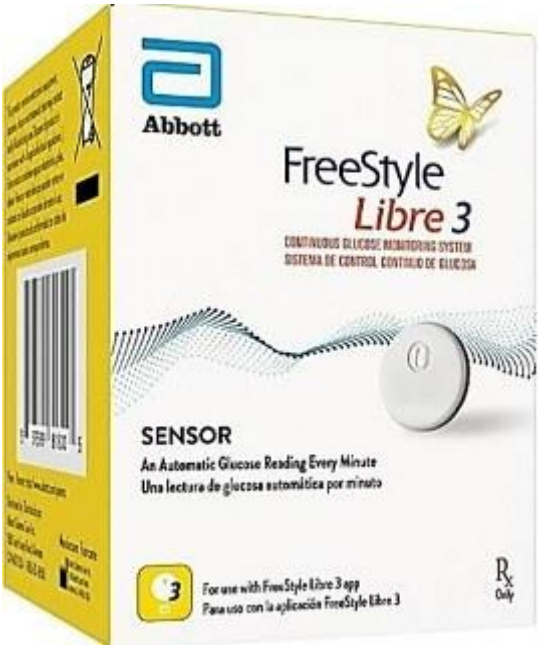
  - a fixed-dose combination treatment has been tried and it has not reduced IOP enough.

- Usage will be guided by Ophthalmology.
- More expensive than other generic combination options (£10 per 2.5ml bottle).
- Conjunctival hyperaemia (red eye) was the most frequently reported adverse reaction in trials - attributed to the netarsudil component. Usually mild and sporadic.
- Once daily treatment option.
- May allow 1 bottle of eye drops vs 2 bottles in some people.

Freestyle Libre 3 - Amber 3

- Only for patients with Type 1 diabetes who are 4 years or older for use as part of a hybrid closed loop (HCL) system only AND where a lower costing Freestyle Libre 2 Plus has been considered first and deemed not appropriate or not compatible with the chosen insulin pump.
- Also, as first line CGM sensor for use as part of HCL in pregnancy and in preconception in line with ICB HCL commissioning policy. Patients initiated on the Freestyle Libre 3 in pregnancy, may continue with the device post-partum.

- Recently included in the Drug Tariff and therefore available for prescribing in Primary Care on an FP10 following the initiation by Secondary Care. Supply via FP10 is more cost-effective to the NHS.
- HCL systems will continue to only be initiated by Secondary Care.
- Companies offer training and links are available for Primary Care prescribers.



News from the APC - updated & new documents

Antimicrobial Guidelines:

Pharyngitis/Sore Throat/Tonsillitis - 5 or 10 days supply of Penicillin V.

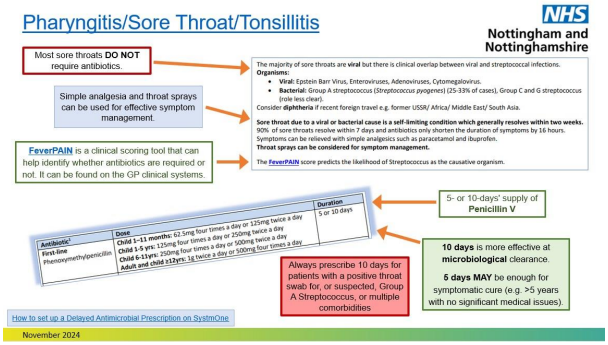
Splenectomised Patients and Those with an Afunctional Spleen

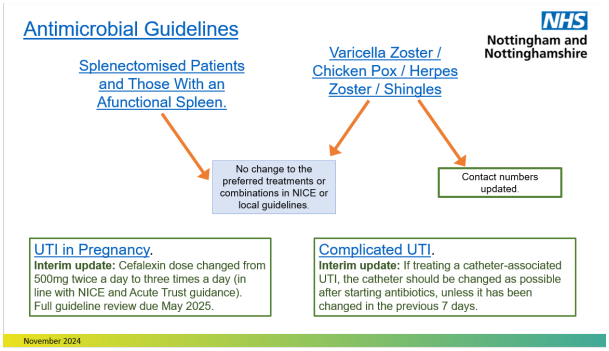
Varicella Zoster/Chicken Pox/Herpes Zoster/Shingles

Interim updates:

UTI in Pregnancy - Cefalexin dose changed to three times a day.

Complicated UTI - when to change catheter.





Other guidelines:

[Hypothyroidism in Pregnancy - Primary Care Guide] (update)

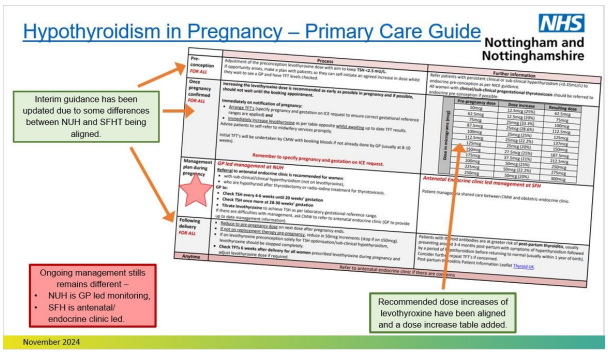
[Benzodiazepines and Z-hypnotics: Guidance on Prescribing and Deprescribing] (update)

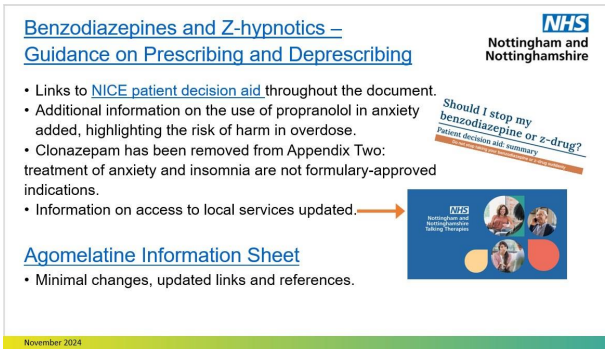
[Agomelatine Prescribing Information Sheet] (update)

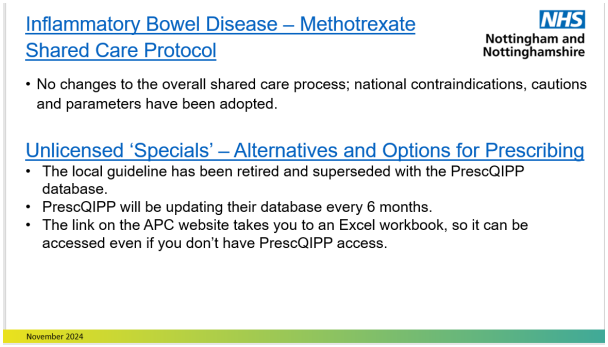
[Inflammatory Bowel Disease - Methotrexate Shared Care Protocol] Update)

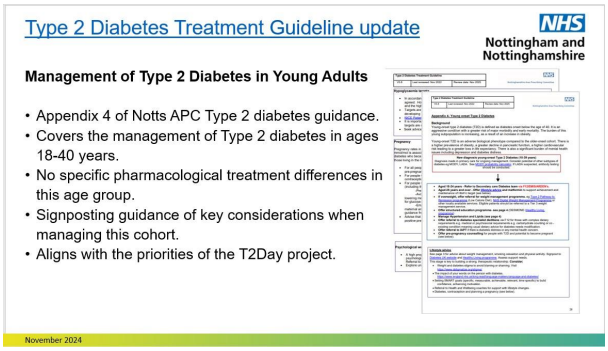
[Diabetes - Type 2 Treatment Algorithm] - addition of a new appendix on the **Management of Type 2 Diabetes in Young Adults**

For further information and a full explanation of changes please see the latest APC update or watch our latest webinar.









Miscellaneous:

Retired Information Sheets:

Unlicensed 'Specials' – Alternatives and Options for Prescribing

- The local guideline has been retired and superseded with the PrescQIPP database.
- PrescQIPP will be updating their database every 6 months.
- The link on the APC website takes you to an Excel workbook, so it can be accessed even if you don't have PrescQIPP access.

For further information and a full explanation of changes, go to the Notts APC website in Publications, under the Webinars section to see the latest APC update or watch our latest webinar.

Horizon scanning, formulary amendments and traffic light changes

- **Torasemide** - reclassified as GREY as supply problems with loop diuretics now resolved.
- **Insulatard Penfill cartridges** and **Novorapid FlexTouch pre-filled pens** - discontinued from March 2025. No new patients to be initiated.
- **Levemir** – all presentations to be discontinued from December 2026. Local guidance is being developed.
- **Macrogol 3350** - added as GREY, not a cost-effective product. Macrogol should be prescribe generically as macrogol compound (not macrogol 3350).

Publications

3 - Link to APC webinars

APC Webinars: You can find our November 2024 APC presentation on the APC website and the recording is available to view on our Notts ICB YouTube channel.

4 - Link to APC podcasts

Our Podcasts:

We've recently published two more episodes. The first one is covering **Benzodiazepines and Z-hypnotics initiation** and deprescribing. **In part one,** our colleague Nirlas Bathia, Dr Helen Sperry and Dr John Barker have a conversation about initiating benzodiazepines and z-hypnotics. And **in part two** they discuss the complex process of deprescribing these medicines.

In our second episode, our colleague Emma Moncrieff, Dr Asifa Akhtar and Dr David Wicks discuss **Covert administration**, what steps are required before deciding it is appropriate to administer medicines in this way and how you document and review this.

Feature of the month: Tirzepatide for overweight and obesity

NICE has not yet published its TA for tirzepatide use in managing overweight and obesity, so **use for this indication alone is not yet approved**.

Due to the large cohort who will be eligible and the wrap around services which will need to be commissioned, NHSE are proposing an extended implementation plan to prioritise cohorts who are at most need.

The below holding statement was added to the formulary to explain the current situation and the ICB's position.

- **Tirzepatide** for managing overweight and obesity is classified **GREY.** NICE are expected to publish TA guidance in January 2025. There will then be an implementation period to manage the adoption of the recommendations made by NICE; **tirzepatide should NOT be prescribed for managing overweight and obesity** until NICE has published and a position is reached by the ICB.

Tirzepatide can be used in Nottinghamshire following **specialist recommendation for Type 2 diabetes** in line with Nottinghamshire Type 2 diabetes guidance and NICE TA 924. It is classified as **AMBER 2** for this indication.

Locally, tirzepatide prescribing is on the rise with **monthly spend now over £100,000 and increasing rapidly**. We are seeing an increase in the number of prescriptions for 4 pens, or

more. Prescribers are reminded that **each pen contains 4 doses.** Also, **5mg weekly is expected to be a sufficient maintenance dose** for the majority of individuals. Dose escalation beyond 5mg should be done only on Specialist advice after a review.

Let us know what you think!

The work of the Nottinghamshire Area Prescribing Committee is supported and managed by the interface team.

We can be contacted via email on nnicb-nn.nottsapc@nhs.net

www.nottsapc.nhs.uk

www.nottinghamshireformulary.nhs.uk