


Welcome to the **Kent & Medway CCG Medicines Optimisation (MO)** news update.

We understand that the COVID Vaccine Programme is of the highest priority. However, it is important to keep oversight on prescribing and safety updates. We have produced this bulletin to provide up to date prescribing and safety alerts as well as relevant COVID-19 information. Information in this bulletin was accurate at the time of publication (25/02/2021)


Articles in this edition include:

- Drug Monitoring during the COVID-19 Pandemic
- Antiepileptic Drugs In Pregnancy: Updated Advice Following Comprehensive Safety Review
- PHE: Vitamin D and Care Homes Guidance
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- Formulary Update: High Cost Drugs Manual
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Drug Monitoring During the COVID-19 Pandemic



The importance of maintaining safe and high quality standards of prescribing remains a key priority despite the pressures of delivering the COVID vaccination programme and managing the COVID-19 pandemic as a whole. A reminder to all prescribers of the various tools and guidance that can be utilised at this time to support in this work:



- [NICE rapid guidelines](#): NICE has produced numerous guidelines to support with drug monitoring during the COVID-19 pandemic.
- Specialist Pharmacy Service (SPS) [Guidance on the management of drugs requiring monitoring during COVID-19](#)
- Use of Safety tools such as Eclipse and PINCER: There remains an importance, despite a stepping down of this year's medicines optimisation scheme to continue to utilise risk stratification tools to identify patients for monitoring and review.

For all further queries on drug monitoring requirements please contact your local medicines optimisation team.

Antiepileptic Drugs In Pregnancy: Updated Advice Following Comprehensive Safety Review

In January 2021 the MHRA issued a Drug Safety Update including a report of a comprehensive safety review of the risks of major congenital malformations and of adverse neurodevelopmental outcomes for antiepileptic drugs by the Commission on Human Medicines. This review has confirmed that lamotrigine (Lamictal) and levetiracetam (Keppra) are the safer of the medicines reviewed during pregnancy. This review was initiated in the context of the known harms of valproate in pregnancy, which should only be prescribed to women of childbearing potential if there is a pregnancy prevention programme in place.

Clinicians should use the information in this Drug Safety Update when discussing treatment options with women with epilepsy at initiation and at routine recommended annual reviews and with women who are planning to become pregnant. The update includes a reminder of valproate risk and requirements and links to the updated educational materials to support healthcare professionals and female patients on valproate which were circulated by Sanofi in December 2020.

The Drug Safety Update gives a list of actions for prescribers, reminders of advice to give to women with epilepsy and links to safety information leaflets.

It is strongly recommended that prescribers read the full document [\(here\)](#).

PHE: Vitamin D and Care Homes Guidance

The government has provided a free 4-month supply of daily vitamin D supplements for residents in residential and nursing care homes in England to help support their general health, in particular bone and muscle health. Each daily supplement contains 10 micrograms (400 international units (IU)) of vitamin D. This one-off 4-month supply will be delivered directly to Nursing and Residential care homes from January 2021. Public Health England has published guidance to support in the provision of vitamin D supplements in these patients. Local Kent & Medway guidance is being developed and will be sent out to the care homes, GPs, and providers.

Access the full guidance [\(here\)](#)

Pandemic Delivery Service

In a [letter published by NHS England and NHS Improvement](#) (NHSE&I) on the 19th February 2021, it has been confirmed that the Community Pharmacy Home Delivery Service will be commissioned from 19th February 2021 to 31st March 2021 (inclusive) for all clinically extremely vulnerable (CEV) patients living in England.

Further details can be found [here](#)

Long COVID

For some people, COVID-19 can cause symptoms that last weeks or months after the infection has gone. This is sometimes called post-COVID-19 syndrome or "long COVID". Increasing medical evidence and patient testimony is showing that a small but significant minority of people who contract COVID-19 continue to experience the effects of the virus months after initially falling ill. Some estimates suggest that 10% of COVID-19 patients may still be experiencing symptoms more than three weeks after infection.

▪ **NICE Rapid Guideline: Managing the Long-Term Effects of COVID-19**

We recommend all primary care practitioners to read the NICE [NG188] guideline which covers identifying, assessing and managing the long-term effects of COVID-19. This guideline has been developed jointly by NICE, the Scottish Intercollegiate Guidelines Network (SIGN) and the Royal College of General Practitioners (RCGP). Access [\(here\)](#)

NHS Advice Diabetes Helpline

NHS England and NHS Improvement have launched a new helpline in response to disruption to normal diabetes services due to the COVID-19 pandemic and response. The helpline is for adults living with diabetes who use insulin to manage their condition and require advice from a team of clinical advisors. Where routine care has been disrupted, the helpline can provide clinical advice to help them understand how to effectively manage their diabetes.

The advice line is accessible via Diabetes UK's Helpline on 0345 123 2399. It is open Monday to Friday from 9am – 6pm (excluding bank holidays). If the patient needs clinical advice, they will be transferred to a clinical advisor who will assist them.

The helpline should be promoted to patients in areas where there is a local need for this service which is specifically aimed at people who are managing their diabetes with insulin and provides clinical advice on topics such as: Hyperglycaemia, Hypoglycaemia, sick day rules and missed injections.

Please find attached a copy of the NHS Diabetes Advice helpline FAQs and communications materials to help promote the service.

Liraglutide 6mg/ml Injection/Saxenda® - not for Primary Care Prescribing

Liraglutide (Saxenda®) is indicated, as an adjunct to a reduced-calorie diet and increased physical activity for weight management in adult patients with an initial BMI of ≥ 30 , or ≥ 27 to < 30 in the presence of at least one weight-related comorbidity such as dysglycaemia (pre-diabetes or type 2 diabetes mellitus), hypertension, dyslipidaemia or obstructive sleep apnoea. It is restricted to prescribing in secondary care by a specialist multidisciplinary tier 3 weight management service.

Action: Do not prescribe liraglutide for weight management; refer patients to the appropriate tier 3 service.

Formulary Update: High Cost Drugs Manual

Please note; the latest edition of the High Cost Drugs Manual is now available on the Kent and Medway ICP formulary websites for your reference.

The regular Medicines Supply, Shortages and Alerts update is attached as a separate document to accompany this newsletter.

Please send all medicines queries relating to the articles written to: kmccg.wkmedman@nhs.net

Medway and Swale Local ICP Update

Medicines Optimisation Generic Email Account

Please can we remind you to send any queries to our generic email account. Many staff have been redeployed to other roles but our inbox will still be manned Monday to Friday 9am to 5pm. Please allow up to 3 working days for any response (we will always respond quicker if able to do so).

Medwayswale.meds@nhs.net

Useful Contacts

Primary Care Medicines Queries – Medwayswale.mds@nhs.net

Medway Hospital Medicines Queries - medwayft.medsqueries@nhs.net

Patient Complaints – kmccg.complaints@nhs.net

Community Pharmacy Issues - England.southeastcommunitypharmacy@nhs.net

Controlled Drugs – england.southeastcdao@nhs.net