


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 (30/03/2021)

Articles in this edition include:

- Kent and Medway COVID -19 Vaccination Management of Allergies Policy
- MHRA response to the precautionary Suspensions of the Astra Zeneca COVID-19 Vaccine
- Covid 19 Vaccines and Fertility
- Updated GMC Guidance
- Stoma Accessories Formulary Update
- Antimicrobials (azithromycin and doxycycline) not beneficial in the management of COVID-19
- Pregabalin (Lyrica®): reports of severe respiratory depression
- SSRI/SNRI antidepressant use in pregnancy

Kent and Medway COVID -19 Vaccination Management of Allergies Policy



NHS Kent and Medway CCG have developed a 'Kent and Medway COVID Vaccination - Management of Allergies Policy' to ensure patients requiring expert advice from allergy specialists' prior to having either their first or second dose of the COVID -19 vaccinations are seen appropriately. This has been implemented to comply with recent changes in the [Green Book \(Chapter 14a\)](#) in the safe management of patients with possible allergic reactions to their first dose of their COVID-19 vaccine or those with a history of anaphylactic reactions due to components of the vaccines and other mRNA vaccines.

This policy contains useful pathways and support tools to assist staff in the various vaccination sites across the system on how to triage and manage the appropriate cohort of patients.

Further information:

Please find the most up to date Kent and Medway COVID-19 Vaccination Management of Allergies Policy v12 and the EMIS Instructions for Accessing Advice and Guidance Request from Guys and St Thomas Allergy specialist on COVID-19 Vaccination attached. If you require any other information and/ or clarification on the policy and its content, please contact kmccg.svoc@nhs.net

MHRA response to the precautionary suspensions of the Astra Zeneca COVID-19 Vaccine

In response to the recent concern raised around thrombotic event, the MHRA have issued a [statement](#) providing assurance on the safety of the Astra Zeneca COVID-19 Vaccine. The statement published on the 18th March 2021, advises that it has not been confirmed that the reports of blood clots were caused by the AstraZeneca COVID-19 vaccine and that people should still go and get their COVID-19 vaccine when asked to do so.

The [World Health Organization](#) and the [European Medicines Agency \(EMA\)](#) have also both emphasised that there is currently no evidence linking the vaccine to blood clots and recommend that countries continue using it.

The MHRA have put in place [a proactive strategy](#) to continually monitor safety during widespread use of the vaccine. They also work closely with public health and international partners in reviewing the effectiveness and impact of the vaccines to ensure the benefits continue to outweigh any possible side effects.

COVID-19 Vaccines and Fertility

The British Fertility Society and Association of Reproductive and Clinical Scientists have created a FAQ document in response to questions that patients have been asking about Covid-19 vaccines and fertility. The availability of safe and effective vaccines against Covid-19 offers a way for many patients to protect themselves against this disease, and access fertility treatment safely.

These FAQs were created on 8th February 2021 and are correct at the time of publication. Please be aware that the speed of scientific research in this area is very rapid. Any further updates will be communicated as new information becomes available.

Please access FAQ document [here](#)

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

Every effort has been made to ensure that the information contained in this newsletter is accurate and up to date at the time of publication. Please take note of the publication date and seek further advice if in any doubt about the accuracy of the information

The information contained in this newsletter is the best available from the resources at our disposal at the time. This newsletter is produced on behalf of K&M CCG

For all correspondence please contact the Medicines Optimisation team email: kmccg.wkmedman@nhs.net

Updated GMC Guidance – Good Practice in Prescribing & Managing Medicines and Devices

The GMC have updated their guidance to respond to the increase in remote consultations resulting from the COVID-19 pandemic. The updates include advice on responding to requests for prescribing from patients based overseas. The guidance, which was published on 18th February and comes into effect on 5th April 2021, can be found ([here](#))

Kent and Medway Stoma Accessories Formulary Update

Please note; the Kent and Medway Stoma Accessories Formulary has now been ratified by Clinical Cabinet and is available to use. This is attached with the newsletter.

Antimicrobials (azithromycin and doxycycline) not beneficial in the management of COVID-19

The recent announcement from the National Institute for Health Research (NIHR) supported PRINCIPLE trial and demonstrates the vital importance of robust clinical trials in our response to Covid-19. The lack of beneficial effect in patients aged over 50 who are treated with either azithromycin or doxycycline at home in the early stages of Covid19 suggests that these antibiotics should not be used within primary care for the treatment of Covid-19 unless there is an additional licensed indication. Overuse of antibiotics in the community can contribute to antimicrobial resistance.

Practices should not prescribe Azithromycin or Doxycycline for the management of Covid-19 within primary care:

- Azithromycin should NOT be used in the management of confirmed or suspected Covid-19 infection either within primary care or in hospitalised patients, unless there are additional indications for which its use remains appropriate (see Product Details).
- Doxycycline should NOT be used in the management of confirmed or suspected Covid-19 infection within primary care, unless there are additional indications for which its use remains appropriate (see Product Details).

https://www.cas.mhra.gov.uk/ViewandAcknowledgment/ViewAttachment.aspx?Attachment_id=103760

MHRA Drug Safety Update: Pregabalin (Lyrica®): reports of severe respiratory depression

Pregabalin has been associated with infrequent reports of severe respiratory depression, including some cases without the presence of concomitant opioid medicines. The following patients might be at higher risk of experiencing events and adjustments in dose or dosing regimen may be necessary,

- people with compromised respiratory function,
- with respiratory or neurological disease,
- with renal impairment;
- taking concomitant central nervous system (CNS) depressants; and
- older than 65 years

Advice for practices:

- consider whether adjustments in dose or dosing regimen are necessary for patients at higher risk of respiratory depression outlined above.
- report suspected adverse drug reactions associated with use of Pregabalin on a Yellow Card
- **ensure prescribed (and taken) doses of Pregabalin are not outside the therapeutic dose range up to a maximum of 600mg daily in 2-3 divided doses** (<https://bnf.nice.org.uk/drug/pregabalin.html#indicationsAndDoses>)

Pregabalin clearance is directly proportional to creatinine clearance, and dose reductions in patients with compromised renal function should be individualised – see the posology section of the Summary of Product Characteristics

<https://www.medicines.org.uk/emc/product/7132/smpc>

MHRA Drug Safety Update : SSRI/SNRI antidepressant medicine use in pregnancy

SSRIs and SNRIs are known to increase bleeding risks due to their effect on platelet function. Data from observational studies suggest that the use of SSRI/SNRI antidepressants during the month before delivery may result in a small increased risk of postpartum haemorrhage.

Advice for healthcare professionals:

- continue to consider the benefits and risks for use of antidepressants during pregnancy, and the risks of untreated depression in pregnancy
- healthcare professionals, including midwives, should continue to enquire about the use of antidepressant medicines, particularly in women in the later stages of pregnancy
- consider the findings of the review in the context of individual patient risk factors for bleeding or thrombotic events
- do not stop anticoagulant medication in women at high risk of thrombotic events in reaction to these data but be aware of the risk identified
- report any suspected adverse reactions associated with medicines taken during pregnancy via the Yellow Card scheme

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