The bulletin aims to provide NHS information support for evidence-based practice to Non-Medical Prescribers

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CONTENTS

NICE Evidence Information
Clinical Knowledge Summaries
Medicines & Prescribing Alerts
BNF/BNFC
REPORTS
Journals

NICE EVIDENCE INFORMATION

NICE COMMUNITIES: Medicines and Prescribing
A comprehensive suite of guidance, advice and support for delivering quality, safety and efficiency in the use of medicines.

CLINICAL KNOWLEDGE SUMMARY

These have prescribing information in them relating to specific conditions/diseases and the drugs administered/considered for treatment
http://cks.nice.org.uk/#?char=A

MEDICINES & PRESCRIBING ALERTS

An alerts service to keep you up-to-date with a range of medicines and prescribing-related topics including:
* Evidence summaries: new medicines
* Evidence summaries: unlicensed / off-label medicines

TECHNOLOGY APPRAISALS

Technology appraisals are recommendations on the use of new and existing medicines and treatments within the NHS. These can be:
* Medicines, medical devices (hearing aids or inhalers)
* Diagnostic techniques
* Surgical procedures
* Health promotion activities

Click Icons for the BNF and the latest changes

Click Icons for the BNFC and the latest changes

INFORMATION ON MEDICINES COMPLETE

Nurse Prescribers’ Formulary
Guidance on prescribing BNF
Guidance on prescribing BNFC
Non-medical prescribing

Information and guidance on non-medical prescribing is available on the Department of Health website at www.dh.gov.uk/health/2012/04/prescribing-change.

For information on the mixing of medicines by Independent and Supplementary Prescribers, see Mixing of medicines prior to administration in clinical practice—responding to legislative changes, National Prescribing Centre, May 2010 (available at www.npc.nhs.uk/improving_safety/mixing_meds/resources/mixing_of_medicines.pdf).

For information on the supply and administration of medicines to groups of patients using Patient Group Directions see Guidance on prescribing.

Click icons for the BNFC and the latest changes
The role of the paramedic is evolving and there is great emphasis on managing people at home and reducing rates of conveyance to hospital. This article discusses the role of the paramedic and suggests the benefits that independent non-medical prescribing could have for both the paramedic profession and for the patients paramedics treat during their clinical practice.

**JOURNAL OF SUBSTANCE ABUSE**  
*Views of medical and non-medical prescribers on the prescribing of benzodiazepines to drug misusers within NHS Lanarkshire.* The article demonstrates that, despite benzodiazepine use being highly prevalent among drug users in Scotland, a combination of positive attitudes to prescribing from practitioners and the implementation of local guidelines within NHS Lanarkshire Addictions Services have contributed to a reduction in prescribing benzodiazepine. The article highlights the need for training and support for prescribers which, along with increased compliance with local guidelines, could further enhance the positive attitudes of the prescribers and ultimately further reduce prescribing benzodiazepines.

**COMMUNITY PRACTITIONER**  
*Independent prescribing supporting the delivery of the public health vaccination programme.* This paper details the use of independent prescribing by a practitioner to sign patients specific directions for health care support workers to administer the nasal flu vaccine to children clearly identified in it. This process required the development and implementation of a clinical skills training package for health care support workers to administer the flu vaccination (FluenZTetra) nasal vaccine. Also governance arrangements needed to be in place to support this change in practice in the delivery of the childhood influenza immunisation programme. This enables nurses and health care support workers to practice safely and within acceptable and legal boundaries.

**HEALTH EXPECTATIONS**  
*A patient perspective of pharmacist prescribing: ‘crossing the specialisms—crossing the illnesses’.* As part of a commissioned research project, this qualitative element of a larger case study focused on the views of patients of pharmacist prescribers. There was an overwhelming lack of awareness of pharmacist prescribing. Patients discussed the importance of a multidisciplinary approach to their care and recognized limitations of the current model of prescribing. Patients were positive about pharmacist prescribing and felt that a team approach to their care was the ideal model especially when treating those with more complex conditions.

**NURSE EDUCATION IN PRACTICE**  
*Non-medical prescribing assessment - An evaluation of a nationally agreed multi method approach* The objectives were to explore; (1) which assessment in the practice portfolio was ranked most valuable in terms of achieving safe, effective prescribing practice and, (2) whether a practice based assessment (SDEP) was an acceptable alternative to an Observed Simulated Clinical Examination (OSCE).
Non-medical prescribing where are we now? This review takes a brief look back at the history of nonmedical prescribing, and compares this with the international situation. It also describes the processes required to qualify as a NMP in the UK, potential influences on nonmedical prescribing and the impact of nonmedical prescribing on patient opinions and outcomes and the opinions of doctors and other healthcare professionals.

A Qualitative Case Study Exploring Nurse Engagement With Electronic Health Records and E-Prescribing

There is a national focus on the adoption and use of electronic health records (EHRs) with electronic prescribing (e-Rx) for the goal of providing safe and quality care. Although there is a large body of literature on the benefits of adoption, there is also increasing evidence of the unintentional consequences resulting from use. As little is known about how use of EHR with e-Rx systems affects the roles and responsibilities of nurses, the purpose of this qualitative case study was to describe how nurses adapt to using an EHR with e-Rx system in a rural ambulatory care practice. Six themes emerged from the data. Findings revealed that nurses adjust their routine in response to providers’ preferential behaviour about EHR with e-Rx systems yet retained focus on the patient and care coordination. Although perceived as more efficient, EHR with e-Rx adoption increased workload and introduced safety risks.

Patient satisfaction with the clinical pharmacist and prescribers during hepatitis C virus management.

Patients reported high levels of satisfaction with the clinical pharmacist involved in HCV treatment management at an urban academic medical centre. Clinical pharmacist services were highly valued and recommended by the patients surveyed. The survey was able to identify areas in need of improvement in the clinic. Clinical pharmacists play an important role in the treatment and management of HCV. This survey may serve as

Inter-professional prescribing masterclass for medical students and non-medical prescribing students (nurses and pharmacists): a pilot study

This study aimed to develop, pilot and test the feasibility of a simulated inter-professional prescribing masterclass for non-medical prescribing students, medical students and pharmacist. Pharmacists showed the highest rating in the Trust in Physician score. Post masterclass group discussions suggested that the intervention was viewed as a positive educational experience. Conclusion: An inter-professional prescribing masterclass is feasible and acceptable to students.
Is there a perceived risk of occupational stress among nurses and physiotherapists who are non-medical prescribers? An exploration.

Those intending to implement independent prescribing were identified to have an increased risk of occupational stress. Physiotherapists appeared to have a higher risk due to the recentness of this expansion of scope and differences in implementation. Impact and implications: In order to reduce the potential for occupational stress, practitioners must feel valued within their position. This can be addressed through flattening of the hierarchical structure of the NHS and increasing support for those implementing expansion of scope. Further research surrounding national levels of occupational stress within healthcare would be beneficial.

*Audit of physiotherapy supplementary prescribing practice and polypharmacy in secondary care neurological rehabilitation and pain management clinics*
Impact and implications: The overall rates of polypharmacy in this audit are a third higher when compared to published figures. The de-prescribing rates are higher. It is likely that Pain Management and Neurology, as long term conditions management services tend to have patients with higher levels of hyperpolypharmacy. This requires more detailed investigation within the local health economy.

*Early outcomes of the implementation of physiotherapist independent prescribing in a specialist rehabilitation service for persons with lower limb amputation*

Whilst the number of Physiotherapist IPs annotated on the HCPC register has grown steadily since the right was given, few are currently working in rehabilitation of those who have undergone limb amputation services. It is hoped that this review will act as a basis for the development of others in this specialist Physiotherapy role and the services they work within.

HISTORICAL PERSPECTIVE
Crab eyes on the past

Compared to the days of apothecaries, prescribing in the 21st century could be considered dull. Nowadays everything is ready-made and prepackaged. Apothecaries actually had to make up prescriptions, often with the most extraordinary ingredients.

Calculation skills: Answers
Calculation Skills: Acne Rosacea

**NEWS**

**Investigating new potential cardiovascular disease treatment**

**Adverse effects of slimming drug orlistat were underreported**

A new study comparing the protocols, clinical study reports (CSRs) and published papers on anti-obesity drug orlistat, has revealed a disparity in how adverse events were summarised and reported (Schroll et al, 2016).

**Treatments for managing oral mucositis**

Despite the prevalence of oral mucositis, treatment options are limited and are typically not based on clinical trial evidence. Accurate assessment, monitoring of patients and comprehensive education are essential in the management of oral mucositis.

Therefore, implications for treating oral mucositis for the prescriber are discussed. Comprehensive guidelines are provided by the Multinational Association of Supportive Cancer Care and International Society of Oral Oncology (MASCC/ISOO). Further robust research is required into the prevention and management of oral mucositis.

**Statins and their role in the secondary prevention of coronary heart disease**

In 2014, the National Institute for Health and Care Excellence (NICE) revised its 2008 guidelines for the management of hyperlipidaemia. Changes include measurement of non-fasting high-density lipoprotein (HDL) at baseline and at 3 months, and looking at the percentage of reduction instead of a fixed target, to determine the efficacy of statins. Recommendation also includes commencement of a high-intensity statin, such as atorvastatin 80 mg for secondary prevention.

There is a greater emphasis on the inclusion of patients in decision making with regards to lipid-lowering therapies.
PROFESSIONAL

influences on quality of prescribing in breast cancer patients This article presents a discussion on both positive and negative influences on quality of prescribing in clinical practice. It explores how such influences have an impact on breast cancer patients on adjuvant hormonal therapy.

BEST PRACTICE

Physiological and prescribing tips for managing liver impairment This article gives prescribing and dosage tips for health professionals caring for patients with liver impairment. The Child-Pugh scoring tool, which indicates the level of liver impairment is discussed.

Addressing concordance issues: How motivational interviewing strategies can complement the nurse prescribing consultation It is estimated that over half of medications prescribed for chronic disease management are not taken properly or not taken at all. This article emphasises the need for nurse prescribers to think about patient motivation when addressing more complex concordance issues. It recommends that the nurse prescriber incorporates some fundamental motivation interviewing tools into their repertoire of skills.

NOVEMBER ISSUE 11

NEWS ANALYSIS

Prostate and lung cancer: NICE recommends new treatments and better access

The National Institute for Health and Care Excellence (NICE) has recently issued new recommendations regarding new treatments for people with lung cancer and prostate cancer.

Newly qualified non-medical prescriber, a reflection

Ella Cox reflects on her time as a newly-qualified independent and supplementary prescriber

Opioid-induced constipation: Pathophysiology, treatment and management Opioid-induced constipation (OIC) is the most common side effect of opioid analgesia, which can have a significant effect on the person’s quality of life and lead some to decrease or stop taking their analgesia. Although it is recommended that laxative therapy is commenced at the same time as opioid medication, many laxatives do not target the underlying cause of OIC. As with any patient with constipation, other causes should be identified and, where possible, modified to reduce the risk of OIC. Simple laxatives remain the first-line treatment, but their efficacy should be regularly reviewed. Newer opioid antagonist medication should be considered where simple laxatives are ineffective.

Non-medical prescribing in urinary tract infections in the community setting

This article will discuss and reflect on a prescribing episode in a crisis intervention team; a short-term service which aims to assist in hospital avoidance. It highlights an organisational constraint that can result in a delay in treatment and can be detrimental to the patient.

HISTORICAL PERSPECTIVE

At war with germs

For nearly 130 years, the Pasteur Institute has been at the forefront of the war against disease. The Paris-based research organisation was the first to isolate HIV and has been responsible for breakthrough discoveries that have helped control such diseases as diphtheria, tetanus, tuberculosis, poliomyelitis, influenza, yellow fever and plague.

Research roundup: November 2016 INCLUDES

Winter conception linked to special educational needs

Serious concerns about missing adverse events data

Morning sickness is good news

Maternal vitamin B3 protects against eczema

Watch for potentially inappropriate prescribing

LEGAL AND ETHICAL

Clear handwriting is essential to a nurse prescriber’s duty of care

In this article, Richard Griffith considers the duty of nurse prescribers to write clearly, and highlights the financial and human cost of poor handwriting.

CLINICAL FOCUS

Eczematous conditions in older patients Non-medical prescribers have the potential to support older people in a variety of care settings to ensure they are able to care for their skin, use products that will not exacerbate the condition and treat the eczema accordingly with emollients and topical corticosteroids. This will improve the quality of life and comfort for their patients.

The role of non-medical prescribing in critical care outreach: A case study For many specialist nurses the ability to develop a personal formulary is fairly straightforward, e.g. analgesics and adjuvants for acute pain specialists. Prescribing as part of the critical care outreach (CCO) role poses some difficulties due the range of conditions likely to be encountered among critically ill patients, but experience suggests this may be an area appropriate for practice development. This article will discuss one case example where the ability to prescribe would have been an invaluable addition to the CCO nurse’s toolkit

An overview of the use of compression in lower-limb chronic oedema

This article gives an overview of the use of compression garments when treating lower-limb chronic oedema in patients, and explains the aspects to bear in mind when choosing and prescribing compression hosiery.

NICE JOURNALS AND DATABASES

Within NHS Evidence the journals and databases are accessible with your NHS Athens account. My Journals gives you: access to full text electronic journals and e-books available to NHS staff, free at the point of use; details also of print journals available in your health library. http://www.library.nhs.uk/booksandjournals/journals/default.aspx
Apps for prescribers: how safe and effective are they?
Medical apps are increasingly being used by prescribers to support their day-to-day practice. But with huge numbers of new apps becoming available all the time, and no formal accreditation process in place, how can prescribers assess their safety and usefulness?

Are private online GP consultations safe?
Increasing numbers of patients who find access to their GP difficult are turning to private online consultations for swift and convenient access to healthcare and medicines. However, as this article outlines, many doctors and pharmacists have serious concerns about their safety and utility.

Cancer immunotherapy: should we believe the hype?
Immunotherapy – enhancing the ability of the patient’s own immune system function to fight cancer – regularly captures the headlines. This article outlines the types of immunotherapy available and in development, and discusses whether the hype surrounding it is justified.

Diagnosis and treatment of pelvic inflammatory disease
Pelvic inflammatory disease (PID) can be difficult to diagnose, but delaying treatment increases the risk of both acute and long-term complications. This article provides a guide to the assessment and recommended management of PID.

Improving the management of testosterone deficiency
Report from the UK National Congress of Men’s Health held in London in the summer on the latest research and guidelines on the management of testosterone deficiency in older men.

Guide to treatments used for atopic dermatitis in adults
Atopic dermatitis, or eczema, usually begins in childhood but adults can also be affected due to either persistence of symptoms or late-onset disease. This article provides a guide to the topical and systemic treatments used for atopic dermatitis in adults, including administration, adherence and primary care prescribing data.

Enstilar cutaneous foam for the treatment of psoriasis vulgaris
Enstilar (calcipotriol and betamethasone) is a new cutaneous foam formulation recently launched for the treatment of psoriasis vulgaris (plaque psoriasis) in adults. This article discusses its place in therapy, efficacy and adverse effects.

New guidelines from the European Society of Cardiology
In May, the European Society of Cardiology published updated guidelines on cardiovascular disease prevention and acute and chronic heart failure. This article summarises these two comprehensive documents and discusses how useful they are likely to be to clinicians in the UK.

NOVEMBER 2016
Optimising care for people with motor neurone disease
The prospects for patients with a diagnosis of motor neurone disease are bleak; the disease progresses rapidly, life expectancy is low and there is currently no cure. However, recent initiatives are helping to improve patients’ quality of life through earlier diagnosis and optimising care.

Treatment of polycystic ovarian syndrome in primary care
Polycystic ovarian syndrome (PCOS) is a common and complex syndrome that presents with a wide spectrum of clinical symptoms and is also associated with several other serious conditions. This article reviews the recommended management of PCOS and its associated symptoms in primary care and discusses when referral is necessary.

Sacubitril/valsartan for chronic heart failure: its future potential
Sacubitril/valsartan (Entresto), a combined neprilysin inhibitor/angiotensin II-receptor antagonist for the treatment of chronic heart failure with reduced ejection fraction, was launched in the UK in January. The phase 3 clinical trial PARADIGM-HF established its efficacy in chronic heart failure but what is its future place in therapy, according to the latest guidelines and research?

Recent advances in the management of cystic fibrosis
More effective management programmes and treatments mean that life expectancy for people with cystic fibrosis is improving. This article examines the expanding role of primary care in the management of cystic fibrosis and discusses the availability of new treatments that target the underlying cause of the disease.