The bulletin aims to provide NHS information support for evidence-based practice to Non-Medical Prescribers. We make every effort to ensure that information in this publication is accurate and up to date at the time of publishing, we do not accept any responsibility for errors or omissions. Nor do we accept any responsibility for loss or damage resulting from making use of this information. Links to third party websites are provided for the convenience of users and we in no way endorse contents, views or information held on such sites.

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GUIDANCE

NICE Clinical guideline [CG140]

Palliative care for adults: strong opioids for pain relief
This guideline covers safe and effective prescribing of strong opioids for pain relief in adults with advanced and progressive disease. It aims to clarify the clinical pathway for prescribing and help to improve pain management and patient safety. Care during the last 2 to 3 days of life is covered by care of dying adults in the last days of life.

CLINICAL KNOWLEDGE SUMMARIES

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

Significant changes

- Biological medicines: new guidance Biosimilar medicines

- Coeliac disease: new guidance on management, section 1.5

- Short bowel syndrome: new guidance on management, section 1.5

- Naloxegol for treating opioid-induced constipation [NICE guidance], section 1.6.6

- Anal fissures: updated guidance on management, section 1.7.4

- Canagliflozin: signal of increased risk of lower extremity amputations observed in a trial in high cardiovascular risk patients [MHRA/CHM advice], section 6.1.2.3

- Canagliflozin, dapagliflozin and empagliflozin as monotherapy for treating type 2 diabetes [NICE guidance], section 6.1.2.3

- Oral progestogen-only contraceptives: updated guidance on starting routine, section 7.3.2.1

- BCR-ABL tyrosine kinase inhibitors (bosutinib, imatinib, dasatinib, nilotinib and ponatinib): risk of hepatitis B reactivation [MHRA/CHM advice], section 8.1.5
Ciclosporin for treating dry eye disease that has not improved despite treatment with artificial tears [NICE guParaffin-based skin emollients on dressings or clothing: fire risk [MHRA/CHM], section 13.2.1

New preparations
https://www.evidence.nhs.uk/formulary/bnf/current/general-information-and-changes/changes

New preparations included since the publication of the print edition of BNF 72 (September 2016–March 2017):
Ikervis® [ciclosporin]
Moventig® [naloxegol]
Revestive® [teduglutide]
Vimizim® [elosulfase alfa]

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Significant changes made since the publication of the print edition of BNF for Children 2016–2017:

New preparations included since the publication of the print edition of BNF for Children 2016–2017:
Revestive® [teduglutide] Vimizim® [elosulfase alfa]

BNF for children

Biological medicines: new guidance
Biosimilar medicines: new guidance

Coeliac disease: new guidance on management, section 1.5

Irritable bowel syndrome: updated guidance on management, section 1.5

Short bowel syndrome: new guidance on management, section 1.5

Oral progestogen-only contraceptives: updated guidance on starting routine, section 7.3.2.1

Imatinib: risk of hepatitis B virus reactivation [MHRA/CHM advice], section 8.1.5

Paraffin-based skin emollients on dressings or clothing: fire risk [MHRA/CHM], section 13.2.1

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Significant changes made since the publication of the print edition of BNF for Children 2016–2017:

News Update
Charity pilot scheme encourages thousands to take HIV self-test
Pain profiling could improve quality of life in older people
Roche calls for reform of Cancer Drugs Fund as NICE takes control
New vitamin D guidelines issued
Three-drug combinations could counter antibiotic resistance
Supervised self-monitoring can help control type 2 diabetes

Research roundup: August 2016
- Children born to women who take paracetamol during pregnancy are more likely to develop autism spectrum symptoms and show poor attention
- Oral antibiotics are routinely prescribed for acne for longer than the National Institute for Health and Care Excellence recommends, which increases the risk of resistance. People with acne also seem to experience delays accessing specialist care
- Zinc acetate lozenges could reduce the duration of the common cold by more than a third

Prescribing intermittent self-catherisation: An update
Each year, around one million urinary catheters are inserted in NHS hospitals (Nazarko, 2010). This article outlines indications for intermittent catheterisation and provides guidance for its use.

Assessment & prescribing decisions in contraception
Describes the contraceptive methods available for women across the age groups, and supports prescribers in safely assessing and reviewing women...
who require contraception; advising women on the choices available; advising on the emergency contraception available; and determining whether or not Fraser guidelines must be applied for girls younger than 16 years of age.

‘No action today means no cure tomorrow’: The threat of antimicrobial resistance

Antimicrobial resistance is a major concern for British health professionals, and there is growing evidence of multi-resistant pathogens. Poor prescribing practices, partly driven by patient demand and poor patient adherence to prescribed regimens are two causes of growing antimicrobial resistance. Improved infection prevention and control practices will not only reduce healthcare-acquired infections, but also reduce the necessity for antimicrobials.

Prescribing safely: Top 10 tips for non-medical prescribers

Non-medical prescribers should know these 10 ways to prescribe more safely. Personal vigilance and care is required when prescribing to avoid errors resulting from poor prescribing decisions, which may be related to the wrong drug, dose, route, frequency and/or quantity being prescribed. Errors can also occur because of other reasons, including poor patient communication, lack of monitoring, and poor interface communication. Systems for reviewing and monitoring will help to reduce errors, and the non-medical prescriber must work with other prescribers to ensure these systems are in place. These tips are not exhaustive, but, if practised, will go a long way to improving patient safety.

September 2016

New treatments for stroke linked to dementia: UK Research trial

It has recently been established that an £850 000 grant will be provided by the British Heart Foundation (BHF) to researchers at the Universities of Edinburgh, Nottingham and other collaborators, to begin trialling new treatments for lacunar stroke, which commonly affects 35 000 people in the UK each year (Pedder et al, 2014; Stroke Association, 2015.

Research roundup: September 2016

Antidepressants during pregnancy linked to epilepsy

Taking antidepressants during pregnancy or immediately before conception seems to increase the risk of epilepsy among offspring, according to a study that included all 734 237 singletons born alive between 1997 and 2008 in Denmark.

A topical issue

Some prescription and over-the-counter topical formulations, as well as certain cosmetics, may cause contact allergy, according to a new study of patch testing performed across 12 European countries. In particular, the study suggested that allergies to topical corticosteroids might be underrecognised.

Prescription drug abuse common

Abuse of prescription drugs is common, according to a study of 5572 people in Great Britain, aged 12–49 years. People with a history of ‘serious’ psychiatric ‘distress’, a sexually transmitted disease, attention deficit hyperactivity disorder (ADHD) or infection with human immunodeficiency virus (HIV) were among those most likely to abuse prescription drugs.

- Brain surgery: Not rocket science
- Do advanced paramedics have a role as independent prescribers?

Calculation skills: Basic pharmacokinetic principles

The topic of this month’s calculation skills for nurses is pharmacokinetics. Knowing the pharmacokinetic profile of a drug helps to understand how it is absorbed into the body, distributed to its site of action, and ultimately eliminated from the body. Understanding the basic pharmacokinetic principles helps health professionals to provide advice to patients.
Evidence-based immunisation for children:

**Clinical Focus**

**Pharmacology and prescribing of paracetamol: an update**

This article will examine the uses and mechanisms of a widely-used and useful analgesic—paracetamol. Consideration will also be given to how it may be encountered in clinical practice and points necessary for its safe use. Also known as acetaminophen or APAP, paracetamol is one of the best-known analgesics. It was first synthesised in 1873 and is the pharmacologically-active metabolic product of the older, more toxic, prototypical analgesics, phenacetin and acetylsalicylic acid. It has been widely-used for over 70 years and has a good safety record when the recommended dosing instructions are adhered to. In addition to being used on prescription, it is a component in a huge number of over-the-counter preparations including medications for colds, menstrual pain, migraine headaches and many more.

**Post-transplant non-adherence of immunosuppression in a transplant outpatient group**

Patients who have received transplanted organs need to take lifelong immunosuppressive therapy to maintain their grafts. Non-adherence to this medication in renal transplant patients is associated with an increased risk of graft failure and a return to dialysis, as well as the need for another organ transplant. The purpose of this study was to identify the prevalence of non-adherence to immunosuppressive therapy in a group of post-renal transplant outpatients. A group of 500 post-transplant outpatients were enrolled. The Basel Assessment of Adherence to Immunosuppressive Medications Scale (BAASIS) was used to assess the prevalence of non-adherence in patients who were at least 1 year post transplant. Patients identified as non-adherent by the BAASIS questionnaire were asked to complete the Identifying Medication Adherence Barriers (IMAB) questionnaire to investigate further the reasons for non-adherence.

**Paediatric food allergies...**

Best practice in prescribing for paediatric food allergy

Children presenting with food allergy pose particular challenges to practitioners. Allergy often affects children throughout their lives and prescribing is a long-term strategy to be used as part of their management. Child-focused triadic consultation is integral to establishing appropriate

**Nurse prescribing: 10 years on**

It's been a decade since independent nurse prescribing was given the seal of approval. In this short professional article, journalist Kathy Oxtoby gathers insight from various health professionals about how nurses came to achieve this status and takes a look at the impact it has had, and continues to have, on patient care.
Prescriber is the leading UK journal for healthcare professionals focussing on prescribing and medicines management. The journal features articles on all areas of therapeutics and prescribing policy and is fully peer reviewed.

The content is relevant and of interest to all prescribers and prescribing policy makers including GPs, pharmacists, nurses and hospital specialists.

Access to all content is free to healthcare professionals following registration for NHS Athens

https://openathens.nice.org.uk/
http://www.prescriber.co.uk/

**Articles August—September**

Assessment and management of viral croup in children

Brivaracetam in the management of epilepsy with focal seizures

Controversy surrounds NHS delays over commissioning PrEP

Ensuring NICE’s strategy is fit for the future

Management of obstructive sleep apnoea syndrome

Pitfalls of prescribing suitably for athletes

Refer-to-Pharmacy: benefits and early outcomes

Anticipatory prescribing for end of life care

Use of direct oral anticoagulants in thromboembolic disease

Diagnosis, assessment and management of headache

Improving the efficiency of out-of-hours prescribing

Management of type 1 and type 2 diabetes requiring insulin

Safinamide: add-on therapy for Parkinson’s disease

Statins: the battle for hearts and minds

The hidden problem of herb-drug interactions

The treatment challenges of restless legs syndrome

Useful links

http://www.nurseprescriberforum.co.uk/ Forum produced by nurse prescribers for nurse prescribers, discussing portfolios, courses and jobs etc

http://www.rpharms.com/professional-development-and-education/pharmacist-prescribing-group.asp Discussion group within the RPC website, focuses primarily on pharmacist prescribers

https://twitter.com/@PrescribersUK Twitter account belonging to the association of prescribers UK

https://www.facebook.com/Association-for-Prescribers-1488816731383242/ Facebook pages of the association of prescribers in the UK—‘Helping prescribers reach their full potential’

http://www.anp.org.uk ‘Association for Prescribers’ formally known as The Association for Nurse Prescribing
SPECIAL FOCUS

FEATURING THE BJCM
AVAILABLE WITH AN NHS ATHENS ACCOUNT

Urinary catheterisation in the community: Exploring challenges and solutions
Treating skin conditions in the community: know your emollients
Meeting the special medicinal needs of patients
Social prescribing: Leg Clubs - a collaborative example
District nurses’ role in managing medication dysphagia
No action today means no cure tomorrow: the threat of antimicrobial resistance
Covert administration of medicines: a contentious issue
Advances in infusion sets and insulin pumps in diabetes care

Understanding the Code: use of medicines
Identifying and managing malnutrition in the community
Managing chronic oedema and venous disease with made-to-order garments

NICE LINKS

BNF
Non-medical prescribing
Nurses, Pharmacists, Optometrists
Nurse Prescribers’ Formulary for Community Practitioners
Medicinal Preparations
Appliances & Reagents (inc Wound Management Products)
Details of NPF preparations

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