

Prescribing Newsletter

This newsletter is produced by the Medicines Management Team at the PCT, and is sent to all local GPs, Practice Nurses and Community Pharmacists. We would welcome any feedback on the content and usefulness of the newsletter and suggestions for future topics.

Vitamin D update

A recent **Chief Medical Officer (CMO) letter** made the following recommendations on **vitamin D supplementation**:

- For **adults** (pregnant and breastfeeding women, for people aged 65 years and over, and for people who are not exposed to much sun) - routine daily supplementation with **10 mcg** (400iu) of vitamin D
- For **children aged 6 months to 5 years**, daily supplementation in the form of vitamin drops is recommended **to help meet a total requirement of 7–8.5 mcg per day**. Breastfed infants may require supplementation from the **age of one month** if the mother has not taken vitamin D supplements throughout pregnancy.

UKMI have produced a [resource](#) that outlines products available that enable adherence to CMO advice. Note: There are no licensed products containing Vitamin D 10mcg alone. [Healthy Start products](#) are only available through specific DH supply channels. In Brighton and Hove this is accessible via the Midwives, Health Visitors and through the Children's Centre. They are not routinely dispensed through community pharmacies. For pregnant and breastfeeding women outside of the criteria for free supply of these products, health care professionals can advise on the purchase of suitable nutritional supplements listed in the resource.

There are a multitude of **Vitamin D deficiency** prescribing guidelines, dependant on the organisation and specialists preferences, as illustrated in S & SE Vitamin D guideline collation document:

www.nelm.nhs.uk/en/NeLM-Area/Evidence/Guidelines/Vitamin-D-Guideline-Collation-Document/ . This preceded the availability of licensed **Fultium D3[®]** 800iu capsule (£3.60/30) **for the treatment of Vitamin D deficiency**. The SPmC dose in adults and the elderly for severe vitamin D deficiency [serum levels <25 nmol/l (<10 ng/ml)] is: 1-4 capsules (800-3200 IU) daily for up to 12 weeks dependent upon the severity of the disease and the patient's response to treatment. The preparation contains peanut oil.

Gamolenic Acid Prescribing Reminder

The product licences for both Gamolenic acid preparations (Epogam and Efamast) were withdrawn in October 2002 due to lack of efficacy required at that time, for the authorisation of these products as medicines for the treatment of eczema and mastalgia. There was no safety issue associated with the withdrawal of the licences of these products and evening primrose oil is still available in health food shops for those who wish to take it as a dietary supplement.

Despite the license withdrawal, during 2011, 28 practices within Brighton and Hove have prescribed over 800 items at a cost of over £59,800.

The local Breast Pain Clinic will no longer be advising patients to obtain prescriptions from GPs, but instead advising the purchase of these where appropriate.

Action: Prescribers should review those patients currently prescribed gamolenic acid with a view to:

- Stop prescribing them in accordance with local "[Drugs NOT routinely recommended for Prescribing in Primary Care](#)" policy)
- Advise to buy from health food stores if required

National release of practice level prescribing data

Under the terms of the [Open Government Licence](#), prescribing data by GP practice was released for the first time on 14 December 2011, providing information relating to September 2011, with the intention that subsequent month's data will be released monthly thereafter.

The data covers each practice in England and includes all medicine, dressing or appliances prescribed and dispensed each month and information relating to costs. The data does not list each individual prescription nor contain any patient identifiable data. Due to the large size of each monthly dataset (over 500MB, over 4 million rows), specialist data-handling software will be needed to handle the volumes of data contained in the monthly datasets. For further details, please visit: www.ic.nhs.uk/services/transparency/prescribing-by-gp-practice

Withdrawal from benzodiazepines and z-drugs

Prescribers are reminded that benzodiazepines and z-drugs should not be stopped abruptly if they have been used regularly for more than a few weeks.

Many patients prescribed these medications long-term will experience difficulties withdrawing from them. Patients are more likely to experience withdrawal/rebound symptoms if they have been taking them for more than 4 months, in which case withdrawal should be undertaken with care. The withdrawal syndrome can be severe.

Suggested withdrawal schedule for diazepam, from diazepam 40 mg per day or less:

Reduce dose by 2–4 mg every 1–2 weeks until reaching 20 mg per day, then

Reduce dose by 1–2 mg every 1–2 weeks until reaching 10 mg per day, then

Reduce dose by 1 mg every 1–2 weeks until reaching 5 mg per day, then

Reduce dose by 0.5–1 mg every 1–2 weeks until completely stopped.

Estimated total withdrawal time:

From diazepam 40 mg per day: 30–60 weeks.

From diazepam 20 mg per day: 20–40 weeks.

The above withdrawal schedule is taken from [Prodigy](#), where there is further [advice regarding withdrawal of benzodiazepines](#) and [dose conversion to diazepam](#). [Local prescribing advice](#) is also available including a [patient leaflet](#)

Product News

Xenical® (orlistat) manufacturing problems have lead to a stock shortage. Locally, during 2011, there were 3415 items prescribed at a cost of over £108,000 for orlistat

Action: Alternative treatment options are limited so Prescribers should use this opportunity to:

- Prescribe generically since [availability of generic orlistat](#) will lessen the impact of this shortage. However, avoid prescribing the costly Over The Counter orlistat 60mg (Alli®)
- Review patients on orlistat, ensuring continuation of therapy with 5% weight loss (at 12 weeks from baseline) as per [SPmC](#) and continued benefit
- Following NICE guidance on obesity's recommendation of using multicomponent interventions and maximally utilising local services to support behaviour change strategies such as Zest exercise referral; Health Trainers; Health Walks; The Information Prescriptions website gives details of exercise classes, healthy eating support etc. www.ipbh.org.uk.
- Limit new initiations to patients who have not reached their target weight loss or have reached a plateau on dietary, activity and behavioural changes alone.

Generic valsartan products are now available from Actavis UK Ltd and Teva UK Ltd. Drug Tariff prices from April 2012 will be:

	Cost / month		Cost / month
Valsartan 160mg / Hydrochlorothiazide 12.5mg tablets	£4.55 / 28	Valsartan 40mg capsules	£4.08 / 28
Valsartan 160mg capsules	£5.27 / 28	Valsartan 80mg capsules	£4.08 / 28

Drug Tariff generics list has been extended to include Exemestane 25mg tablets (30); Letrozole 2.5mg tablets; Levetiracetam and Olanzapine from January 2012 www.nhsbsa.nhs.uk/3565.aspx

Withdrawal of Teva brand of Levothyroxine

MHRA has suspended the license of levothyroxine 100 microgram tablets manufactured by Teva, following manufacturing difficulties and concerns that the product might not be interchangeable with other available levothyroxine 100 mcg tablets. Only levothyroxine 100 mcg tablets supplied in the Teva and Numark brands are affected. As this medicine is a generic, alternative products are available and most patients are unlikely to notice any change if they are switched from the Teva product to another levothyroxine product.

The following patients may be particularly susceptible to changes in thyroid stimulating hormone (TSH) and may require close monitoring by their doctor: pregnant women, those with heart disease and those under treatment with levothyroxine following treatment for thyroid cancer. For those patients an early appointment with their doctor may be needed.

After dose adjustment of levothyroxine, TSH should be retested after a period of six weeks to confirm blood levels are stabilised within the normal range. www.mhra.gov.uk/NewsCentre/Pressreleases/CON143688