

May 2017 ♦ Produced by the Prescribing Team

## Prescribing Initiatives 2017/18

Please note that the invitation to participate in this year's prescribing initiatives has been sent by email to the practice clinical email account. The message was sent at the end of April 2017 from Ruth Edwards, and the original deadline for returns was 12<sup>th</sup> May 2017, however if returns could be sent as soon as possible, they will be accepted until 26<sup>th</sup> May.

All future prescribing updates will be sent by email to the clinical inbox.

## Repeat Prescribing Local Enhanced Service

The Repeat Prescribing Local Enhanced Service (RPLES) contract has been renewed for 2017/18. The RPLES funding is included in practice monthly payments and this means there is an expectation that practices continue to work towards delivery of RPLES targets. The RPLES aims to encourage practices to regularly review repeat prescribing in order to improve efficiency and reduce medicines waste. Practices are asked to undertake the following from 1<sup>st</sup> April 2017 to 31<sup>st</sup> March 2018:

Activity	Rationale	Frequency / Target
Installation of the NHSGGC EMIS / Vision electronic preferred list formulary and EMIS synonyms	The electronic formulary helps by indicating preferred list drug choices when prescribing	To be installed and updated quarterly as notified by e-mail
Aim to attain or maintain NHSGGC preferred list benchmark formulary compliance figure	Preferred list drugs are generally the most cost effective choice	Practice formulary compliance to be 77.5% or greater
Level 1 medication review (identifying / taking action on duplicate and obsolete drugs, quantity mismatches, missing or unclear dose directions, and poor compliance)	Optimising repeat prescribing helps to reduce errors and medicines waste	85% of repeat patients to be reviewed between 01/04/2016 and 31/03/2018
Review of patients who have had excess medication supply	Patients receiving more medication than prescribed may be abusing or at risk of harm	<ul style="list-style-type: none"> <li>• 1% (min) of practice population to be reviewed</li> <li>• Review of process and systems to take place</li> </ul>
Monitored Dosage System (MDS) and care home patients	Identification and regular review of patients helps to reduce errors and medicines waste	<ul style="list-style-type: none"> <li>• Maintain register quarterly</li> <li>• Patients to be on 7 / 28 day supply</li> <li>• Process and protocol in place for communicating changes to Community Pharmacy</li> </ul>

Supporting resources and tools are available to access via the MM website on Staffnet. For further information or training please contact: [prescribingteamles@ggc.scot.nhs.uk](mailto:prescribingteamles@ggc.scot.nhs.uk)

## Errors with Levetiracetam 100mg/ml oral solution

There have been reports of up to 10-fold accidental overdose with Keppra® (levetiracetam) oral solution, particularly in children, due to confusion with oral syringes supplied with the product. There is only one entry on clinical prescribing systems **however** there are three different dispensing packs containing different size oral syringes available:

- **150ml bottle with 1ml syringe** for infants from 1 month to less than 6 months.
- **150ml bottle with 3ml syringe** for children 6 months to less than 4 years and below 50 kg bodyweight.
- **300ml bottle with 10ml syringe** suitable for children 4 years and older below 50kg bodyweight, and children, adolescents and adults over 50kg bodyweight.

Levetiracetam 100mg/ml oral solution, 300ml bottle is on the Scottish Drug Tariff and is significantly less expensive than the branded product. The 150ml bottles are not on tariff.

**Prescribers and pharmacists should be aware that the 300ml bottle contains an inappropriate size of oral syringe for children less than 4 years (10ml syringe).**

To avoid confusion and dosing errors the following actions are suggested:

- Prescribers should preferably prescribe the dose in mg, with ml equivalence stated.
- Pharmacists are advised to always check that the prescribed dose of levetiracetam oral solution is appropriate for age and weight in children.
- Pharmacists should be aware to dispense an oral syringe appropriate to deliver the required dose, and remove the inappropriate syringe from the pack.
- The patient and/or caregiver should be given advice on the correct dose and how to measure it using the syringe provided.

- Patients or caregivers should be instructed to use only the appropriate syringe dispensed with the medicine and discard the syringe once the bottle is empty.

Please continue to report suspected adverse drug reactions (ADRs) to the MHRA through the Yellow card Scheme.

## Molludab®

We receive a number of queries about Molludab® – prescribers are advised that this is not prescribable within NHS Scotland. Further information on molluscum contagiosum is available [here](#).

Molludab® is a 5% potassium hydroxide solution used to treat molluscum contagiosum - a self limiting viral skin infection most commonly seen in immuno-compromised patients and pre-school children. It can take between twelve to eighteen months to clear. A Cochrane Review in 2009 did not recommend the use of Molludab® and concluded that it was unconvinced about the evidence to offer recommendations. [The Cochrane Review of Interventions for cutaneous molluscum contagiosum](#) contains a plain language summary. The Molludab® website can be accessed [here](#).

## Buprenorphine

The NHS Greater Glasgow and Clyde Substitute Prescribing Management Group has agreed that the prescribing guidelines will be changed to make generic buprenorphine sublingual tablets the preparation of choice instead of Suboxone®. All new patients will now be started on generic buprenorphine and there is a switch programme for those patients receiving Suboxone®. An information sheet has been sent to pharmacists and prescribers. Also a patient information sheet is available.

This prescribing change will occur in both the specialised Addictions Services and the GP practices operating under the shared care agreement.