Summary of Lothian Joint Formulary Amendments

The purpose of this summary is to detail the main changes to the LJF sections and provide additional information on the reasons for some of the changes. The website chapters should be referred to for full details. The month indicates when Formulary Committee approved the changes.

July 2020

Chapter 2 Cardiovascular System - Adults

2.5.5.1 Angiotensin-converting enzyme inhibitors

- The target dose of 10mg for ramipril in the treatment of symptomatic heart failure and prophylaxis of cardiovascular events, if tolerated, may be taken in two divided doses, instead of a single daily dose.

2.8.2 Oral anticoagulants

- The prescribing notes have been updated, including a new note to explain that in the context of treatment of NVAF with DOACs 'Valvular AF' relates to patients with an artificial mechanical heart valve or significant mitral stenosis, all other patients would be considered to have non-valvular AF. The information on the use of DOACs in renal impairment has also been clarified.

Chapter 3 Respiratory System - Adults

3.1.5 Peak flow meters, inhaler devices and nebulisers

- The prescribing notes have been updated, with AeroChamber Plus® amended to AeroChamber Plus Flow-Vu®.

Prepared July 2020 AG

Chapter 4 Central Nervous System - Adults

4.7 Analgesics

- This chapter has been reconfigured to follow a less prescriptive approach to non-cancer pain. There has been a shift away from the WHO pain ladder towards a more patient specific approach which emphasises non-pharmacological options to be used alone or in combination with pain medication.
- A non-pharmacological approach to pain is emphasised with links to exercise and movement videos, audio tracks and external support websites.
- The NSAID option has been amended to specify ibuprofen or naproxen. This excludes diclofenac which is associated with higher cardiovascular risks as per MHRA guidance.
- Prescribing notes have been updated to reflect current practice around the use of strong opioids in pain management. Strong opioid 'breakthrough pain' analgesia is no longer recommended in chronic pain due to risk of tolerance, dependence and dose escalation.

4.7.3 Neuropathic pain

- New prescribing notes have been added to reflect the reclassification of gabapentinoids as controlled drugs.
- New prescribing notes have been added to support the review and cost effective prescribing of lidocaine patches.

Chapter 5 Infections - Adults

5.0 (c) Urinary tract – Recurrent UTI

- Additional steps have been added to the first choice which remains advising simple measures; these include methenamine tablets 1g twice daily. This is in line with updated RefHelp guidance.

5.0 (d) Genital system – Bacterial epididymo-orchitis

- The first choice is now ofloxacin or doxycycline or trimethoprim. Ofloxacin replaces ciprofloxacin in line with updated Genito-urinary medicine specialist guidelines and RefHelp guidance.

5.0 (d) Genital system – Acute prostatitis

- Ciprofloxacin (previously second choice) has replaced trimethoprim as first choice in line with updated Genito-urinary medicine specialist guidelines and RefHelp guidance. Trimethoprim is now second choice.

5.0 (e) Wound and skin - Mastitis

- The recommendations for the treatment of mastitis have been updated, now specifying for mastitis / breast abscess associated with lactation [1st choice flucloxacillin, and erythromycin for penicillin allergy] and mastitis / breast abscess not associated with lactation [1st choice co-amoxiclav; flucloxacillin + metronidazole for frail elderly, and clarithromycin + metronidazole for penicillin allergy].

Chapter 10 Musculoskeletal and Joint Diseases – Adults

10 Musculoskeletal webtable

- tofacitinib (Xeljanz®) 11mg prolonged release tablets, for the treatment of rheumatoid arthritis, are now routinely available in line with local guidance. Included on the Additional List for Specialist Use only.

Chapter 11 Eye – Adults

11.1 Administration of drugs to the eye

- The prescribing notes have been updated, including a new prescribing note that a preservative-free formulation may be prescribed, if available, for all formulary products if clinically necessary as an alternative option.

11.2 Control of microbial contamination

- The prescribing notes have been updated, including information about the use of single dose units.

11.3 Anti–infective eye preparations

- This section was previously called Antibacterial eye preparations.
- Fusidic acid eye drops have been added as a third choice for the treatment of bacterial conjunctivitis, to be used ONLY if swab for culture and sensitivities identifies that isolate is susceptible AND chloramphenicol is contraindicated.
- The recommendations for herpes infections have been moved into this section. Ganciclovir eye gel has replaced aciclovir eye ointment (discontinued) for herpes simplex corneal infection and ophthalmic zoster.
- The prescribing notes have been updated, based on NICE guidance and local antimicrobial recommendations.

11.4 Corticosteroids and anti–inflammatory preparations

- Corticosteroids have been arranged by potency, and preferred choices.

11.4.2 Other anti–inflammatory preparations

- Otrivine Antistin® eye drops have been removed as an option for the treatment of allergic conjunctivitis.
- olopatadine 0.1% eye drops have been added as first choice for the treatment of seasonal allergic conjunctivitis.

11.6 Treatment of glaucoma (b) beta-blockers

- Timolol maleate (Timoptol® LA) ophthalmic gel-forming solution has been removed as it was rarely used.

Chapter 13 Skin – Adults

13.3 (c) chronic urticaria

- Note added on supply disruption with ranitidine with link to LJF news article, November 2019. (Cimetidine or ranitidine may be added to an antihistamine at night for resistant cases of sleep disturbance from itching.)

13.5.2 Preparations for psoriasis

- The dose recommendation for salicylic acid and coal tar (Sebco®) scalp ointment has been amended.

Chapter 15 Anaesthesia – Adults

15.1.4.2 Peri–operative analgesics

- The prescribing notes have been updated to state that morphine is the preferred opioid for intravenous analgesia with fentanyl or oxycodone second line.
- The prescribing notes have been updated to state that post-operative patients may be discharged on short term potent opioids, but these should not be routinely continued beyond this period. If opioids are continued post discharge then a clear plan for reduction should be given to the patient and GP.
- The maximum daily dose of intravenous paracetamol in adults has been updated to reflect at-risk patient groups.

Chapter 1 Gastro-intestinal system - Child

1.3 Gastroprotection

- Note added on supply disruption with ranitidine with link to LJF news article, November 2019.

Chapter 3 Respiratory system - Child

3 Paediatric Respiratory System

- The general notes have been updated, including addition of links to the BTS and SIGN guidelines for the management of asthma.

3.1.5 Peak flow meters, inhaler devices and nebulisers

- The prescribing notes for spacer devices have been updated, including amending AeroChamber Plus® to AeroChamber Plus Flow-Vu®.

3.2 (a) Inhaled corticosteroids

- The first choice MDI has been changed back to Clenil Modulite® as the colour range and the dose counter are considered more suitable for children. The prescribing notes have been updated.

Chapter 4 Central Nervous system - Child

4.1.1 Hypnotics

- Information on melatonin has been updated, including the addition of melatonin 3mg tablets. New prescribing notes have been added for melatonin and for chloral hydrate, both medicines must only be initiated on specialist advice.

Chapter 13 Skin - Child

13.3 (c) oral antihistamines

- Note added on supply disruption with ranitidine with link to LJF news article, November 2019. (Cimetidine or ranitidine may be added to an antihistamine at night for resistant cases of sleep disturbance from itching.)

13.5.2 Preparations for psoriasis

- The dose recommendation for salicylic acid and coal tar (Sebco®) scalp ointment has been amended.

Minor Ailments Formulary – Gastro-intestinal

- Note added on supply disruption with ranitidine with link to LJF news article, November 2019.

Prepared July 2020 AG