

January 2016 ♦ Produced by the Prescribing Team

## Insulin Shortage MCN Guidance

### Diabetes MCN Guidance for Managing the Shortage of Insulins: Insuman® Basal and Insuman® Comb25 3ml cartridges and pre-filled pens

Sanofi have announced there will be a temporary and short-term supply shortage in the UK of:

- Insuman® Basal pre-filled pens
- Insuman® Basal cartridges
- Insuman® Comb25 (pre-mixed insulin) pre-filled pens.
- Insuman® Comb25 (pre-mixed insulin) cartridges
- *Vials of both products are unaffected.*

#### Switching patients

If it becomes necessary to switch patients: Advice is to switch patients to the Kwikpen disposable injections as an interim measure to avoid confusion with different pen devices and cartridges.

- Patients on **Insuman Basal®** can be switched to **Humulin I® Kwikpen®** at the same dose.
- Patients on **Insuman Comb 25®** can be switched to **Humulin M3® Kwikpen®** at the same doses.

Full details can be found in [Medicines Update](#) on staffnet.

#### Blood Glucose Monitoring

Patients should be advised to check their blood glucose (2-4 times a day for a week) following any change in insulin regimen.

#### High Risk Patients

Should there be a situation where it may not be appropriate to change, i.e. high risk patients (aged under 18 year or 70 years and over, pregnancy, allergies to other insulins etc), prescribers can call Sanofi Medical Information on the Insuman Emergency Line on 0800 281 973 to discuss whether a vulnerable patient supply of Insuman® Basal/Comb25 on an individual basis may be appropriate.

#### Additional Support

Patients may need support with using the new device, although the pen devices are similar. Where prescribers do not feel competent to undertake this, further advice is available from the Diabetes team that the patient is currently under.

#### Communication

Please ensure that any change in insulin brand/device is communicated to the patient, carer and healthcare professionals involved in the care of the patient.

Community pharmacists dispensing Humulin® I & Humulin® M3 Kwikpens are asked to confirm patients are expecting the change in insulin, they have been advised how to use the Kwikpen® and are aware of the requirement for increased monitoring of blood glucose.

## BNF and BNF for Children (BNFC) Errors

BNF publications have re-designed the print and online versions of the BNF. The first issues of the new look BNF 70 and BNFC 2015-16 were published in September 2015. Information on using the new look BNF is available [here](#). Since publication, a number of issues including dose errors have been identified.

The errors have been highlighted in NHSGGC via a [Risk Awareness Notice \(RAN\)](#).

#### In primary care

- There will be alerts on Scriptswitch for the individual drugs affected.
- Community Pharmacists & GP Practices have been provided with a corrections document that can be printed off as required.

## Minor Ailment Service Formulary Review 2015

The Minor Ailment Service (MAS) continues to be provided by community pharmacy contractors across the Health Board area. In line with normal processes, the formulary to which they adhere has been reviewed, updated and approved by the ADTC. Changes are intended to align products with the Preferred List or Total Formulary choices.

The formulary is available for other healthcare professionals to view and access at <http://www.ggcmedicines.org.uk/minor-ailment-service-formulary/>

GP practice staff and health visitors are reminded that MAS is for the treatment of symptomatic

patients who are eligible for the service and are registered with the community pharmacy for MAS. Patients may be triaged to the pharmacy for MAS, but GP practice staff and health visitors should avoid recommending/ requesting products to be prescribed by the community pharmacist as this creates some conflict with the provision of the service and managing patient expectations.

## Discontinuation of Ditropan® 2.5mg/5ml Solution

We have recently been informed that Ditropan® 2.5mg/5ml solution has now been discontinued. However, there are now two licensed strengths of generic oxybutynin available from the main

wholesalers in a **sugar free** formulation. In order to avoid use of any unlicensed “Specials”, prescribers should select the sugar free option from the clinical system. However, these are expensive compared to previous products, with prices ranging from £120 to £168 depending on wholesaler and strength. But, as they are licensed, this would be the preferred option for oxybutynin liquid prescriptions.

These price increases may prompt prescribers to review patients who currently are prescribed oxybutynin solution in line with NHS GG&C advice and consider either alternative therapy or use of the tablets, which remain available.

Further information on the management of urinary incontinence and overactive bladder can be found in [Medicines Update Extra No3](#)

## Polypharmacy GP Peer Learning Session Evaluation 2015- 2016

NHS GGC Polypharmacy LES 2015-2016 required GP practices to submit a polypharmacy case study and attend an external polypharmacy peer review to comply with LES specification. During April and May 2015 HSCP prescribing teams set up and facilitated the external peer review sessions.

A total of 233 out of a potential 242 NHS GGC practices signed up for the LES, 46 of which are 17C practices. GP s completed an evaluation of the session. Please find the results below:

### Attendance & Engagement

	Total
No. of GPs Attended	<b>221</b>
No. of evaluation forms completed	<b>198</b>
No. of GPs who attended previous polypharmacy LES training	<b>84</b>

### Self-Assessment of Knowledge and Skills - Pre and Post Course Comparison (1= low & 5=high)

	Average	
	Pre	Post
Knowledge & Awareness of National Polypharmacy Guidance / 7 steps of polypharmacy review	<b>2.6</b>	<b>4.4</b>
Knowledge & skills in applying a polypharmacy review	<b>3.2</b>	<b>4.13</b>
How confident do you feel in delivering polypharmacy reviews	<b>3.65</b>	<b>4.3</b>

GPs knowledge and skills in applying the 7 steps of polypharmacy review improved as a result of the session as did their confidence in delivering polypharmacy reviews.

GPs perceived the sessions to be worthwhile and relevant.

As a result of the session many GPs felt they would apply a more systematic approach to polypharmacy review by applying the 7 step approach and be more confident in interpreting and discussing numbers needed to treat.