



Tablet Press



The prescribing newsletter for GPs, nurses and pharmacists
NHS Nene CCG and NHS Corby CCG

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- **BNF and BNFC “apps”**

A fault with the BNF and BNFC “apps” on some Apple IOS devices has been detected whereby a small amount of content may be out of date. If you have this “app” on any Apple IOS device you need to delete the “app” and reinstall it from the App store. Android devices and all online web versions of the BNF are unaffected.

- **Fluenz Tetra ordering controls for GP practices**

There are initial ordering controls for Fluenz Tetra[®] in place for General Practice whereby the allocation will be set at a level of 35% of eligible patients. This is in line with the average uptake level achieved by general practice nationally last season. The purpose of this is to ensure that all practices can access a substantial proportion of what they might need initially, whilst helping to reduce the amount of vaccine which may go unused if there were no controls in place. **35% is not a target in the initial period, or a level that should automatically be ordered up to if you do not expect to use the vaccine.** The national uptake ambition for 2 to 7 year olds remains at 40-65% by the end of the season, as set out in the 2016/17 flu plan and letter. Advice to hold 2 weeks’ worth of stock at any one time still applies. If you are one of these practices and you need to access more vaccine before the controls are increased nationally or removed this year, then you can contact the ImmForm helpdesk to discuss your requirements.

- **Community pharmacy seasonal flu immunisation service**

Community pharmacies will be providing seasonal flu vaccinations to eligible patients, aged 18 years and older once again this year under a NHS England patient group direction (PGD). Community pharmacists who undertake this service are reminded to ensure that a notification of the vaccination is sent to the patient’s GP practice on the same day the vaccine is administered or on the following working day. This can be undertaken via post, hand delivery, fax, secure email or secure electronic data interchange.

- **Interpretation of the evidence for the efficacy and safety of statin therapy**

There is an interesting review article in The Lancet [http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(16\)31357-5/fulltext](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(16)31357-5/fulltext) on the efficacy and safety of statins. The Director of MHRA’s Vigilance and Risk Management of Medicines Division has said: “The benefits of statins are well established and are considered to outweigh the risk of side-effects in the majority of patients. The efficacy and safety of statins has been studied in a number of large trials which show they can lower the level of cholesterol in the blood and reduce cardiovascular disease and can save lives. Trials have also shown that medically significant side effects are rare. Medicine safety and effectiveness is of paramount importance and under constant review. Our priority is to ensure that the benefits of medication outweigh the risks. Any new significant information on the efficacy or safety of statins will be carefully reviewed and action will be taken if required.”

- **Prevenar 13 FP34 claims**

GP practices should check their FP34 claims to ensure that Prevenar 13 is not being claimed when it is given as part of the national vaccination programme as they should be obtaining this stock via ImmForm. FP34 claims should only be submitted for Prevenar 13 for use outside the scheme (e.g. patient in an at-risk group) and the practice purchased the stock.

- **A new Bill will enable the government to limit the cost of unbranded medicines**

Many of you will be aware that certain pharmaceutical suppliers have been exploiting pricing regulations by changing how a drug is categorised in the drug tariff. This has meant that certain medicines that have been available for many years as inexpensive branded products e.g. Stelazine have been discontinued and re-launched as a generic, by the same company, usually at a much higher price than the original brand.

This new Bill will allow the government to take action on excessive price increases on any unbranded medicines, regardless of whether the manufacturer or supplier is taking part in the voluntary price regulation scheme for their branded products, and give a new power requiring those who manufacture, distribute or supply health service medicines and other medical supplies to provide information to the Secretary of State, such as on pricing.

This edition is also available on PathfinderRF via the following link <http://nww.pathfinder-rf.northants.nhs.uk/nene> and on the Nene CCG and Corby CCG websites

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