

July 2023 Bulletin

Our APC website is being refreshed! Please be patient with us while we transfer all our content onto the new site. Once live, any shortcuts should still direct you to the correct website, however the layout may look a little different. Going live in August!

New submissions:

| | | |
|--|----------------------------------|--|
| <p>Tirbanibulin (Klisyri®) for Actinic Keratosis (AK)</p> | <p>AMBER 3</p> | <ul style="list-style-type: none"> • Tirbanibulin is a topical therapy licensed for the field treatment of non-hyperkeratotic, non-hypertrophic AK (Olsen grade 1) of the face or scalp in adults. • A thin layer of ointment should be applied to cover an area no larger than 25cm² once daily for one treatment cycle of 5 consecutive days. • In line with the APC AK guideline. |
| <p>Pancrease HL for Exocrine Enzyme Deficiency</p> | <p>AMBER 2</p> | <ul style="list-style-type: none"> • Third-line choice if Creon® and Nutrizym® are not an option (e.g., allergic reaction/intolerance). • The dosage regimen includes 1-2 capsules with meals and 1 capsule with snacks. The capsules should be swallowed whole with water or the contents mixed with slightly acidic liquid or soft food. |
| <p>Semaglutide (Wegovy®) for weight management</p> | <p>Not yet classified</p> | <ul style="list-style-type: none"> • As per NICE TA875 • Not yet available in the UK and a launch date has not yet been confirmed. Work is ongoing locally to plan for the implementation of NICE TA875. Semaglutide for weight loss will only be available to patients that meet the eligibility criteria outlined by NICE. |

News from the APC - updated/new documents:

The documents below will be available on the new APC website once launched in August:

- Parkinson's Disease Shared care Protocol and Information sheets
 - Testosterone patient information leaflet
 - Management of psoriasis Primary care guideline
 - Nausea and vomiting in pregnancy
 - Rheumatology Shared care protocols:
 - Azathioprine for adults
 - Methotrexate for adults
 - Actinic (solar) Keratosis pathway
 - CKD and SGLT2i's in Primary care clinical pathway
 - Liothyronine patient information leaflet
 - Narcolepsy information sheets
 - GnRH analogues position statement
 - Colistimethate for non CF bronchiectasis
- Antimicrobial Guidelines**

 - Chlamydia
 - Splenectomy

Other

 - APC Annual Report 2022/23

The work of the NAPC is supported and managed by the interface team. They can be contacted via nnicb-nn.nottsapc@nhs.net www.nottsapc.nhs.uk



APC webinars

A pre-recorded APC update is available to view on our [YouTube channel](#)



Our Podcasts

Latest edition - [Asthma Guidance in children and young people](#)

Horizon scanning, formulary amendments and traffic light changes

AMBER 2

- **Prontoderm[®] foam:** On IPC advice for MRSA decolonisation for individuals having difficulties with Octenisan[®] body wash. The foam does not need to be washed off and is more cost effective than Octenisan[®] wash mitts.
- **Lurasidone:** Reclassification from Red to Amber 2 in line with other available second-generation antipsychotics. Monitoring requirements are the same as other Amber 2 antipsychotics.

GREEN

- **Budesonide Easyhaler[®]:** all strengths now available for use as an alternative to Pulmicort Turbohaler[®] and beclometasone inhalers.
- **Acetylcysteine effervescent tablets:** alternative mucolytic to carbocysteine. Offers potential cost savings, particularly when used rather than carbocysteine liquid formulations. Once daily dosing may also be advantageous for some people. Other formulations of acetylcysteine are more expensive and remain classified as Grey.
- **Soprobe[®] (beclometasone) pMDI:** offers a more cost-effective brand to Clenil[®] and is available across the strength range.

OTHER

The continence formulary has been updated. First line products are classified **GREEN** for use after completion of a continence assessment. Second line products are classified as **AMBER 2** and are reserved for use following recommendation by a continence advisor and/or for existing patients. Non-formulary continence products may be used in exceptional circumstances where none of the formulary options are suitable. Non-formulary continence products must be recommended and fitted by a continence advisor and the reason documented in the patient's record.

Feature of the month

SGLT2i's in CKD clinical pathway

The Midlands Kidney Network (MKN) has developed a regional clinical pathway for the use of SGLT-2 inhibitors in chronic kidney disease in Primary care. The pathway also has links to PILS and will be available on the new APC website once launched in August. A webinar discussing the pathway as well as kidney failure risk equation (KFRE) which is now recommended in new NICE guidelines can be found on the MKN Future NHS platform workspace [here](#). Use your FutureNHS platform account details to log on or create an account [here](#) if you are a new user. The MKN are also inviting GPs with special interest in renal disease and medicines to join the network. For further information please email catherine.byrne@nuh.nhs.uk

Diabetes Medications Supply Problems

◇ **GLP-1 receptor agonists used in the management of type 2 diabetes:**

There are very limited, intermittent supplies of all glucagon-like peptide-1 receptor agonists (GLP-1s) licensed in the management of Type 2 Diabetes Mellitus (T2DM), with supply not expected to return to normal until at least mid-2024.

The supply issues have been caused by an increase in demand for these products for both licensed and off-label indications and as a result, the following actions are advised:

- GLP-1s should only be prescribed for their licensed indication.
- Avoid initiating people with type 2 diabetes on a GLP-1 for the duration of the GLP1 national shortage.
- Review the need for prescribing a GLP-1 agent and stop treatment if no longer required due to not achieving desired clinical effect as per [NICE CG28](#).

Further information, including a helpful flow chart, can be found here: [Selecting Alternative Glucose Lowering Therapy for People with T2DM when GLP-1-RAs are unavailable](#)

Further information on the supply and advice on alternatives is available [here](#)

◇ **Insulin degludec (Tresiba[®]):**

There is a current disruption to the supply of Tresiba[®] Flextouch 100units/3ml PENS, expected to last until January 2024. During this time NO NEW patients should be initiated on Tresiba[®] FlexTouch[®] 100units/ml pens. If Tresiba is considered the most suitable insulin, patients should be initiated on Tresiba[®] Penfill[®] 3mL cartridges and NovoPen[®]. For existing patients, advice about switching to alternatives can be found [here](#)