

Nottinghamshire Area Prescribing Committee Antimicrobial Guideline March 2019 Update



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The Antimicrobial guidelines for primary care have been refreshed. The guideline can now be found on the APC website as a separate page using the drop down selection for the "Guidelines/formularies" tab.

Several updates have also been made

Summary of the main updates

CLARITHROMYCIN

The <u>FDA issued an alert</u> around potential increased risk of deaths in patients with heart disease with clarithromycin. Additional information has been added regarding the alerts and a hyperlink added to each Clarithromycin entry to this information. Alternative agents have been added where appropriate.

The sections affected are: otitis externa, dental abscess, acute exacerbation of COPD, CAP, lower UTI, impetigo, cellulitis, leg ulcers, boils, wound infection, MRSA.

QUINOLONES

<u>MHRA published an alert</u> on quinolones in November 2018, with advice on prescribing in high-risk patients, due to a small increased risk of aortic aneurysm and dissection with systemic and inhaled fluoroquinolones. The MHRA warning was considered during the updated and incorporated in the relevant sections.

NICE and PHE UPDATES

<u>NICE and PHE have published in December 18 a Summary of antimicrobial prescribing guidance</u> - managing common infections. Following this several sections of our local guideline were updated: Eye, Dental, GI, Genital, Skin and UTI. This guideline had been further updated in <u>February 2019</u> and the amendments have also been considered.

UTI

Fosfomycin is an alternative alongside pivmecillinam for lower UTI where nitrofurantoin is not appropriate. NICE also published updated <u>algorithms for</u> <u>diagnosing UTIs</u> which advise to not perform urine dipsticks to diagnose UTI in men and women over 65 years of age.

CHLAMYDIA AND GONORRHOEA

Chlamydia and gonorrhoea have been updated based on updated <u>BASH</u> guidelines.

COPD ACUTE EXACERBATION

<u>NG114 COPD</u> (acute exacerbation): antimicrobial prescribing, December 2018 was included in the update. These changes were minor.

MENINGITIS

Benzypenicillin STAT dose added as an alternative to cefotaxime as per <u>PHE/NICE guidance</u>.

BLEPHARITIS and LYME DISEASE

New sections added.

C DIFFICILE

IDSA and NUH now recommend vancomycin orally first line for C difficile disease due to poorer response rates with metronidazole, which is only kept as an option if difficult to source vancomycin.

IMPETIGO

Guideline amended to state Polyfax is no longer available, a caution was added regarding the use of fusidic acid and doxycycline was added as an another option for oral treatment.

ERYTHROMYCIN SYRUP

A supply problem was highlighted in primary care therefore the option to replace with clarithromycin syrup in case of further supply problems was highlighted.

ACNE

This section was reviewed with advice from NUH dermatology regarding choices for topical and oral therapy.

ANTIMICROBIAL SHORT VERSION

The APC agreed in January 2019 that a short version of the guideline is not required anymore considering the format changes completed on the website. The guidelines should not be printed. Instead use the online version for reference to ensure the most up to date information is seen.

The work of the NAPC is supported and managed by the interface team below. They can be contacted via <u>maccq</u>.nottsapc@nhs.net if you would like to make a submission or have any queries.

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