

New submissions:

Estradiol transdermal spray (Lenzetto®)	GREEN	<ul style="list-style-type: none"> Hormone replacement therapy (HRT) for oestrogen deficiency symptoms in postmenopausal women. 2nd/ 3rd line product to more cost-effective oestrogen patches and Oestrogel®. Oral oestrogen 1st line unless contraindicated or risk factors.
Venlafaxine	AMBER 2	<ul style="list-style-type: none"> Indication: narcolepsy with cataplexy in adults Off- label, but established treatment for this indication,. Dose of 37.5mg — 375mg daily. Modified release preparation is requested for this indication. European guideline on the management of narcolepsy in adults and children
Clomipramine	AMBER 2	<ul style="list-style-type: none"> Indication: narcolepsy with cataplexy in adults European guideline on the management of narcolepsy in adults and children
Estradiol and dienogest (Qlaira®)	AMBER 2	<ul style="list-style-type: none"> Oral contraception when other methods (including other combined hormonal contraceptives, oral progesterone only contraceptives and copper intrauterine device) are not tolerated or are unsuitable. Also indicated for the treatment of heavy menstrual bleeding in women without organic pathology who desire oral contraception. Has different missed-pill rules and five different types/colours of pills. Specialist will monitor every 3-6 months until stable. Patients will then be discharged to primary care and require minimum annual monitoring of blood pressure and BMI.
Estradiol and nomegestrol (Zoely®)	GREY	<ul style="list-style-type: none"> Offers no advantage above Qlaira®

News from the APC - updated/new documents:

[Dermatophyte Infection of the Proximal Fingernail or Toenail](#) (updated) - Community Mycology Testing Service restarted on the 1st of August 2022. The service will restart with some changes to the acceptance criteria for testing. [See link for more information.](#)

[Community Acquired Pneumonia](#) (updated) - Amoxicillin dose for moderate severity CAP amended to a range of 500mg to 1000mg three times a day in line with the NUH CAP guidelines (consistent with BNF).

[Whooping cough](#) (updated) - NICE CKS guidance (April 2022). Notifiable disease. Treatment should only be started if the onset of cough is within the last 21 days. Macrolide antibiotic is the first line choice.

[Tuberculosis](#) (updated) - no significant changes.

[Blepharitis](#) (updated)- Eyelid hygiene advice/patient information leaflet added. Antibiotics are not routinely required.

[Influenza](#) (updated) - Adult and children doses for treatment and post-exposure prophylaxis included.

[Oral Candidiasis](#) (updated) - NICE CKS guidance (May 2022). Lifestyle and self-care guidance added.

[Otitis Externa Acute and Chronic](#) (updated) - NICE CKS guidance (February 2022). Lifestyle and self-care guidance added. Acetic acid 2% spray/drops remains first line choice for both acute and chronic otitis externa. Available to buy over the counter for adults and children >12 years.

[Out of Area Prescribing Requests](#) (updated) - routine review with minor updates.

[Home Oxygen Pathway for Cluster Headaches](#) (updated) - Cluster headache is confirmed by neurologist who sends a standard letter to the GP to refer to the Community Home Oxygen Service (HOS-team).

[Naltrexone Information Sheet](#) (updated) - Monitoring section updated - LFTs should be monitored at baseline, 4 weeks, annually and when clinically indicated.

[Alcohol Dependence Guidelines](#) (updated) - MHRA advice on chlordiazepoxide and risk of genotoxicity added.

News from the APC continued - updated/new documents:

[Growth Hormone SCP](#) (updated) - routine review with minor updates.

[Gastroprotection \(with PPI\) for patients on NSAID or antiplatelet](#) (new) - Where an NSAID (or antiplatelet) is indicated, and to reduce the risk of GI adverse effects, the lowest effective dose for the shortest duration of treatment should be used. Patients at risk of GI effects may be prescribed a PPI, but due to long-term risk of PPIs, the risk vs benefit for patients must be considered.

[Aminosalicylates in Inflammatory Bowel Disease in Adults](#) (updated) - Annual monitoring required once stable, although 6-monthly monitoring may be necessary for some patients.

Coming Soon

[Asthma greener inhalers position statement](#) (new) - Developed in response to the Nottinghamshire ICS Green Plan (part of the NHS Net Zero initiative).

[Appropriate prescribing of Salbutamol Inhalers to reduce carbon \(environmental\) impact](#) (new) - For asthmatic patients. Developed in conjunction with NUH and SFHFT respiratory specialists, GPs and specialist pharmacists.

Horizon scanning, formulary amendments and traffic light changes

Horizon scanning

New formulations/other:

- **Fidaxomylin granules for oral suspension (Dificlir®)** – added as an alternative to tablets.
- **Chloral hydrate 500mg/5mL oral solution** – new licensed formulation, removed formulary references to the solution being unlicensed.
- **NovoPen® 6 and NovoPen® Echo Plus** – added as **GREEN** to replace NovoPen® 5 and NovoPen® Echo.
- **Sitagliptin/metformin (Janumet®)** – bioequivalent generic now available.
- **Melatonin (Adaflex®) tablets** - added as **GREY** (no formal assessment)

Formulary Amendments

Dressing retention systems (e.g. Hidrowear®) – clarified as **GREY** (no formal assessment).

Olmotec Plus® (various strengths of olmesartan/hydrochlorothiazide) – clarified as **GREY** (no formal assessment).

Lixisenatide – changed to **GREY**. Treatment initiation packs and 10micrograms/0.2mL solution for injection have been discontinued so this can't be initiated for new patients.

Denosumab (Prolia®) – MHRA safety alert link added - should not be used in patients under 18 years due to risk of serious hypercalcaemia.

Bempedoic acid/ezetimibe (Nustendi®) – reclassified to **AMBER 3** (was amber 2).

Tiotropium (Tiogeva®) – added brand to the formulary as a cost-effective choice.

Hydrofilm® Plus – added as **GREEN**. Included in City and Mid Nottinghamshire wound care formularies.

Miscellaneous

Ferrous sulphate:

Once daily dosing is now preferred by the [British Society of Gastroenterology guidance](#) for the treatment of iron deficiency anaemia in adults.

National shared care protocols:

The new national shared care protocols are currently being reviewed locally.

Please continue to use the existing [local shared care protocols](#) until advised otherwise.

Preferred Prescribing List: Updated version available via the Medicine Optimisation website [here](#).

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

Current work in development– see [APC work programme](#) for further details

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| • Type 2 diabetes guideline (update) | • Antimicrobial guidelines (update) |
| • Anticoagulants for NVAf Guideline (update) | • Stoma formulary (update) |
| • Bariatric surgery – post op monitoring and medication (update) | • Steroid emergency card – patient information and letter (new) |
| • Testosterone for women prescribing information sheet (new) | • Transgender collaborative care protocol and prescribing information sheets (new) |
| • Antidepressants in primary care (update) | • Transgender position statement (update) |
| • Overarching pain guideline (new) | • Midodrine information sheet (update) |

The work of the NAPC is supported and managed by the interface team.

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