

Basingstoke, Southampton and Winchester District Prescribing Committee (DPC)

Recommendations of the meeting of Tuesday 12th February 2019

Supported or limited support e.g. Specialist recommendation

Hydrocortisone granules in capsules for opening (Alkindi) are licensed for replacement therapy of adrenal insufficiency in infants, children and adolescents (from birth to < 18 years old). The Committee endorsed the Chair's decision to support the use of Alkindi granules when recommended by a specialist, with use restricted to younger children unsuitable for treatment with conventional tablets i.e. those requiring doses <5mg. This is in light of the MHRA issuing a safety warning not to use buccal tablets off label due to "risk of insufficient cortisol absorption and life threatening adrenal crisis", see link for details

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/765896/PDF-Dec-2018.pdf. Consider adding to formularies as AMBER.

Progesterone capsules (Utrogestan) - Based on scientific evaluation of the evidence for efficacy, safety and cost effectiveness the Committee supports use of micronised progesterone capsules 100mg (oral) for use as an adjunct to oestrogen therapy in HRT, for the management of menopausal symptoms in women with an intact uterus. Consider adding to formularies as GREEN.

Not supported

Doxylamine/pyridoxine gastro-resistant tablets (Xonvea) -Based on scientific evaluation of the evidence for efficacy, safety and cost-effectiveness the Committee does not support the use of Xonvea for the treatment of nausea and vomiting in pregnancy at this time. This decision will be reviewed following publication of the Scottish Medicines Consortium's recommendations in May 2019.

Other Information and formulary updates

Paraffin-based Emollients -The NPSA highlighted that the topical administration of paraffin based skin-products, for example, emulsifying ointment or 50% liquid paraffin + 50% white soft paraffin (WSP) ointment have a potential fire risk as bandages, dressings and clothing that come in to contact with them are easily ignited with a naked flame or cigarette. The risk is greater when these preparations are applied to large areas of the body and clothing or dressings become soaked with the ointment. Patients should be told to keep away from fire or flames, and not to smoke when using these preparations.

Wound formulary changes- Kliniderm-superabsorbent supported for use as an alternative to Vliwasorb superabsorbent dressing as it has a softer border and is more cost-effective.

Sayana® Press – A Guide for Primary Care -Sayana® Press (Medroxyprogesterone Acetate) is a progesterone only Long Acting Reversible Contraceptive (LARC) injection. It has been designed to allow patients to self-administer the injection subcutaneously at home at intervals of 13 weeks (+/- 1 week) with an annual clinical review, therefore reducing the need for patients to attend regular clinic appointments. This guide includes criteria for use and an assessment form and is available on the Guidance link below.

Dexamethasone injection – The committee supports formulary status as GREEN for use in palliative care.

Ulipristal acetate (Esmya) for symptoms of uterine fibroids - The committee recommends changing formulary status from AMBER to RED for use by specialist only.

Guidance documents are available [Here](#) (hosted by West Hampshire CCG)

Summarised on behalf of the District Prescribing Committee by Andrea White (Southampton City CCG)