

Medicines

Optimisation news headlines

April 2016

Pregabalin Update

It has emerged from our meetings with GP practices that there is some confusion around the current status of pregabalin following the legal proceedings that took place last year. A patent remains in place for Lyrica until July 2017 for the treatment of neuropathic pain. To protect the patent for this indication, any prescriptions for pregabalin in the treatment of neuropathic pain should be written as the brand name of Lyrica. Lyrica is not licensed for any other type of pain. Lyrica is also licensed for the treatment of epilepsy and generalised anxiety disorder, but the patent for these indications has expired. Where treatment is for one of these conditions, either generic pregabalin or Lyrica or a lower cost branded generic, (such as Alzain) may be prescribed. Prescriptions for the generic will be costed at the Drug Tariff rate which is the same as the Lyrica price.

Adrenaline auto-injectors

There are currently three different types of adrenaline auto-injector available in the UK We have steered away from recommending one particular brand due to recent difficulties with continuity of supply and the need for the patient to be fully trained in the particular injection technique required for each device. However, the table below lists some of the things to consider when choosing the one that would be most appropriate for an individual patient.

Brand	Strengths available	Licensed criteria (on body weight)	List Price	Storage	Shelf life	Injection technique
EpiPen	150microgram (0.3ml) 300microgram (0.3ml)	7.5 to 25kg Over 25kg	£26.45 £26.45	Room temp, below 25 ⁰ C	18 months	Swing and jab. Hold 10 secs
Jext	150microgram (0.15ml) 300microgram (0.3ml)	15 to 30kg Over 30kg	£23.99 £23.99	Below 25 ⁰ C, do not freeze	18 months	Place and press. Hold 10 secs
Emerade	150microgram (0.15ml) 300microgram (0.3ml) 500microgram (0.5ml)	15 to 30kg Over 30kg Over 30kg	£26.94 £26.94 £28.74	Do not freeze	30 months	Place and press. Hold 5 secs

[Resuscitation Council](#) guidance advocates the following intramuscular doses of adrenaline for treatment of anaphylaxis:

Adults - 500microgram

Children over 12 years - 500microgram

(or 300microgram if small or prepubertal)

6 years to 12 years – 300microgram

Less than 6 years – 150microgram

The dose may be repeated after 5 to 15 minutes if needed.



The anterolateral aspect of the mid-thigh has been accepted as the site of injection to provide the best balance between safety and efficacy. Needle length varies between the devices but this may not be an indication of suitability for different patients. The ability of the drug to reach the muscle is also dependent on the firing mechanism and an [MHRA review](#) concluded that even Emerade with the longest exposed needle length of 23 mm could not ensure an intramuscular injection in all patients. The same review advises that people who have been prescribed an adrenaline auto-injector for anaphylaxis should carry two with them at all times for emergency, on-the-spot use.

Safety Alert - Mycophenolate and pregnancy

New recommendations have been published regarding the use of mycophenolate in men.

Mycophenolate is a powerful teratogen. The Summary of Product Characteristics ([SPC](#)) for the CellCept[®] brand states that both 'spontaneous abortion (at a rate of 45-49%) and congenital malformations (estimated rate of 23-27%) have been reported following mycophenolate mofetil exposure during pregnancy'. Previously it was required that women of childbearing potential should use two reliable forms of contraception simultaneously before starting therapy, during therapy and for six weeks after stopping. There is now an additional requirement that sexually active men who are undergoing treatment with mycophenolate should use condoms due to risks associated with the transfer of seminal fluid.

The updated patient information leaflet for CellCept[®] that will be found in the tablet pack contains the following wording for male patients:

'You must always use condoms during treatment and for 90 days after you stop taking CellCept[®]. If you are planning to have a child, your doctor will talk to you about the risks and the alternative treatments you can take to prevent rejection of your transplant organ.'

Roche have also produced some more detailed [information leaflets](#) regarding CellCept[®] for distribution and discussion with patients.

We have been informed that patients who have mycophenolate prescribed through UHS will automatically be contacted by their consultant. However there is some primary care prescribing of this agent across the CCG that could have originated from other units and these patients should be contacted directly in order for the new information to be discussed with them. Your Medicines Management Pharmacist or Technician will be happy to help identify the affected patients. Although the published information relates directly to CellCept[®] it is also applicable to other brands and generic forms of mycophenolate.

Venlafaxine MR

In support of the Medicines Optimisation Incentive Scheme for 2016-17 and the work that is being undertaken to utilise the Vensir brand of venlafaxine, the comparative prices for some of the more commonly prescribed brands are shown below.

Comparative price for 28 doses	75mg MR	150mg MR	225mg MR
Vensir capsule	£2.60	£3.90	n/a
Venablue capsule	£6.95	£9.95	n/a
Venaxx XL capsule	£10.40	£17.40	n/a
venlafaxine MR tablet (as generic)	£10.45	£17.45	£31.36
Venallic tablet	£10.45	£17.45	£31.36
venlafaxine MR capsule (as generic)	£20.61	£34.36	n/a
Efexor capsule	£20.61	£34.36	£47.11

Catherine McLean
Interface Pharmacist, Medicines Management
catherine.mclean2@nhs.net
023 8062 7466

Dr Emma Harris
Clinical Director, Medicines Management
emma.harris25@nhs.net

Quality services, better health

