

NHS Borders Prescribing Bulletin

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December 2023

Right Decisions for Health Care – a new way to access clinical guidelines – and more

Right Decisions for Health and Care (RDHC) is a new “once for Scotland” app and webpage, developed in each health board with support from the Scottish Government. It is the new home for NHS Borders clinical guidelines. There is a transition period ongoing during which guidelines on the intranet are being updated and carried over to the new platform. At present RDHC includes over 180 resources, called toolkits.

You can see a demo of the app at <https://vimeo.com/795575038>

RDHC is available now and can be accessed in 3 ways:

1. Download the app. Look in Appstore/Google Play under “Right Decisions for Health & Care.” Once you’ve opened the app search for “NHS Borders Clinical Guidelines.” You can save this, and any other toolkits you need, in “my toolkits”.
2. Website URL <https://rightdecisions.scot.nhs.uk/>
3. In an emergency situation, a group of emergency guidelines on RDHC can be accessed by scanning the QR code found on resuscitation trolleys within BGH.

For more information contact suzy.cuthbert@borders.scot.nhs.uk in the Library or diane.laing@borders.scot.nhs.uk in Clinical Governance.

Computer says no! - pharmacists – please check you are claiming payment correctly for your serial prescriptions

The number of serial prescriptions being issued to patients is increasing. Effective use of serial prescribing can help to improve practice resilience by reducing GP practice and pharmacy staff workload and enhance patient outcomes and the overall care experience for people, families and staff. Health Care Improvement Scotland have produced a useful [toolkit](#). to help in setting up and implementing serial prescribing.

However, when it comes to claiming for payment, a recent review of dispensing data by one pharmacy highlighted a problem. Their computer system issues one bag label for acute prescriptions regardless of the number of items on the prescription. However, for serial prescriptions, one bag label per item is produced (e.g. 4 items produces 4 bag labels). If the pharmacist uses and scans only one bag label, the claim will be for 1 item and not 4. **Pharmacists – please check that you are using the correct procedures to make sure you are being paid for all items.**

Thanks to Grant Allison, pharmacist, for investigating and highlighting this issue.

A date for your diary: Thursday 11 January 2024 from 18:30 to 20:00

All pharmacy team members are welcome to a training session on Medicines: Care and Review focussing on serial prescribing. Further details will be sent by email to the pharmacy team.

Co-prescribing of cationic drugs and tetracyclines

It is well established that oral tetracyclines bind with the metallic cations of aluminium, calcium, magnesium, and iron to form compounds (chelates), which are much less soluble and therefore less readily absorbed by the gut.

These interactions can be of clinical importance e.g. where patients require tetracycline antibiotic therapy and are also taking iron supplements or antacids.

Serum tetracycline concentrations can be reduced by 50-100% with normal antacid doses and these reductions are large enough to mean that many organisms will not be exposed to minimum inhibitory concentrations (MIC) of the antibacterial. Reductions in serum tetracycline concentrations caused by iron are also so large that tetracycline concentrations might fall below the MIC. Failure to achieve MIC concentrations risks the possibility of treatment failure.

A recent audit in BGH inpatients found at least 1-2 episodes per week where doxycycline was co-prescribed with these medicines. This is likely to be a significant underestimate as not all wards were included. Where co-prescription occurred, at least 70% of patients were prescribed these medicines within 2 hours of each other, with consequent risk of reduced doxycycline absorption and infection treatment failure.

Antacids, iron salts and tetracyclines are commonly used in primary and secondary care and patients should be given advice on how they can get maximal benefit from these medicines. This includes use of over-the-counter medicines. If concurrent use is necessary, it is recommended that administration of tetracyclines and antacids should be separated by 2 to 3 hours or more. Tetracyclines should be taken at least 2 to 3 hours after iron.

References

1. Stockleys Drug Interactions [online]. <https://www.medicinescomplete.com> (accessed 4/12/23)
2. British National Formulary [online] <https://bnf.nice.org.uk/> (accessed 4/12/23)
3. B. Macrae, Audit of co-prescribing of cationic drugs and doxycycline. Personal communication.

Your thoughts please....

In the New Year, the editorial team will be reviewing whether to continue to produce the Prescribing Bulletin. How would you like to receive medicine information in the future? Please click on the link below and tell us what you think.

<https://forms.office.com/e/rbg42E9q3E>

Compost corner – our green issues



Greenhouse gases and why they matter

There are many “greenhouse gases” including Carbon Dioxide, Methane and Nitrous Oxide. There will always need to be some greenhouse gases to regulate the earth's temperature but as we have increased the rate of release of these gases into the earth's atmosphere, we have seen the earth's average temperature rise.

It is now widely accepted that this has led to a faster melting of polar ice caps and extreme weather across the world. We also have seen a change in our local weather patterns. In time we expect to see warmer wetter winters with hotter drier summers in Scotland.

Between 1991 – 2019, the hottest summer's day at Borders General Hospital was 29.7C. It is forecast that within the next 50 years, this could be between 32.1C and 36.2C.



Some quick one liners

Recent Drug Safety Updates can be found at: <https://www.gov.uk/government/publications/drug-safety-update-monthly-newsletter>

Naloxone Emergency Supply Service

Community pharmacies can now provide a naloxone emergency supply service. By holding a supply of naloxone, the community pharmacy network will support increased access so that it can be used to reverse the effects of an opioid overdose. Further details can be found in the NHS circular [PCA\(P\)\(2023\)\(34\)](#).

Free vitamin supplements

A reminder that:

- [Healthy Start Vitamins](#) containing vitamins C, vitamin D and folic acid are free for all pregnant women in Scotland.
- [Vitamin D Supplements](#) are available for all breastfeeding women and children under 3 years.

The vitamins are available through different channels including contacting NHS Borders Public Health – Health Improvement email : Health.Improvement@borders.scot.nhs.uk or Tel: 01835 825970 and NHS Borders Dental Reception at Kelso, Galashiels, Coldstream and Hawick.

Millions NOT allergic to penicillin

When properly assessed, over 90% of people who think they are allergic to penicillin find they are NOT. Up to four million people in the UK may have their allergy status recorded incorrectly, putting them at increased risk of harm. The Royal Pharmaceutical Society have produced a [checklist](#) to help HCPs determine if a patient is allergic to penicillin (or not!).

Our quarterly quote

"You can tell a lot about a person by the way they handle three things: a rainy day, lost luggage, and tangled Christmas tree lights."

Maya Angelou

Best wishes for a Merry Christmas from the Prescribing Bulletin editorial team!

East Region Formulary update – website and mobile app launched

Over the last 2 years, colleagues from NHS Borders, Fife and Lothian have been working together to produce the East Region Formulary.

The core content of all the adult formulary has now been agreed by the East Region Formulary Committee and all boards have started to use the new website and mobile app.

To support new users, 2 short (less than 4 minutes) videos have been produced to demonstrate some of the functionality of the website and mobile app. These can be accessed on the [User guides and videos](#) page of the website.

Health & Social Care Partnership (H&SCP) Interface Pharmacy Team News

The H&SCP pharmacy team of pharmacists and pharmacy technicians, work to provide safe, effective, and cost-efficient use of medicines to patients receiving social care support.

It is estimated that approximately 4.5% of hospital admissions are preventable⁽¹⁾. The team focus is to avoid medication issues and reduce the risk of harm to patients from their medicines and the resultant admissions to acute services. Additionally, the team is working to avoid unnecessary carer visits which should reduce the burden on health and social care, freeing up resource for those awaiting a care package which should, in turn, reduce bed pressure within secondary care.

Pharmacy Technicians within the team assess the level of support a patient will require to manage their medicines safely at home and deal with simple medication changes. The pharmacists are completing Realistic Medicine/Polypharmacy reviews to address individual patient needs supporting value-based medicine.

Medicine reviews are carried out in line with the NHS Scotland Prescription for Excellence and Realistic Prescribing strategies. A clinic letter will be sent to the GP practice when the team have reviewed a patient. This may advise medicine changes and/or GP recommendations.

Queries or feedback is welcome at: pharmacy.referrals@borders.scot.nhs.uk

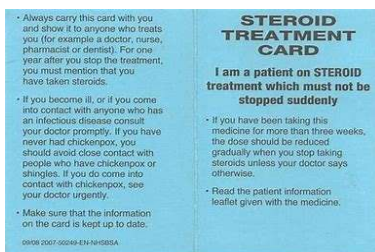
Please note the team is solely working with patients, living in the community, who have carers aiding the administration of their medicines.

1. [Interventions On High Risk Prescribing Can Cut Hospital Admissions : News : University of Dundee](#)

Patient Information Leaflets



A reminder that the Medicine Sick Day Rules card is a useful tool to support conversations between healthcare professionals and patients about their medicines and dehydration. The card helps to raise awareness of potential harms if patients continue to take certain widely prescribed medicines whilst suffering from a dehydrating illness. Please make sure patients are given a card when dispensing ACE inhibitors, ARBs, diuretics, metformin and NSAIDs. Further details and electronic copies can be found [here](#)



Also, a reminder to issue a steroid warning card for all patients for whom you prescribe or dispense steroids which are expected to continue beyond three weeks. Patients who stop steroids abruptly may experience severe fatigue; weakness; body aches; joint pain; nausea; loss of appetite; light-headedness; irritability or mood swings.

Please contact kate.warner@nhs.scotland for a supply.

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