Greenwich Clinical Matters

South East London Integrated Care System

September 2025

MEDICINES OPTIMISATION

SEL Medicines Optimisation Plan (SEL MOP) 2025/26 Launch

With the launch of the SEL MOP 2025-2026, we kindly request that practices sign up to the Medicines Optimisation (MO) Plan Local Incentive Scheme (LIS) using the MS Form LIS Sign-Up by **Friday 17th October.**

Ardens Manager have been commissioned to create the SEL ICB MO Plan 2025/26 dashboard and practices are requested to accept the action task in Ardens Manager for the 'Medicines Optimisation Plan 2025/26 (South East London ICB) Contract Invitation'.

Action:

- Login to Ardens Manager and action the task on the right hand side of your screen to activate your dashboard. Once accepted, you'll be able to navigate to the dashboard to see your live performance data and view indicator progress.
- If you have not already done so, you may also wish to enable patient level data which will allow you to export patient lists.

Self-care and low priority prescribing

Summer ends, Coughs & Colds begin

As we approach winter, we will see a rise in seasonal coughs, colds and sinus issues. These are usually self-limiting and do not require a GP appointment.

Most coughs and colds are viral, therefore tend to clear up on their own.

Community pharmacists can offer clinical advice and recommend treatments where appropriate. GP Practices can electronically refer patients to pharmacies for minor illness consultations, as part of the NHS Pharmacy First service.

Further information can be found on SELnet.

Review of Perindopril Arginine & Doxazosin Modified Release

As part of Know Your Numbers Week, practices were encouraged to support patients in understanding and managing their blood pressure.

- Perindopril Arginine offers **no clinical benefit** over the erbumine salt, which is more cost-effective.
- Doxazosin MR has **no added benefit** over immediate-release

These formulations are **not recommended for routine prescribing** in primary care.

Actions:

- Identify patients on Perindopril Arginine or Doxazosin MR
- Review switching to clinically appropriate alternatives
- Refer to PrescQIPP bulletins for switching guidance Perindopril / Doxazosin
- Ensure appropriate monitoring when switching antihypertensives, in line with CESEL Hypertension Guidelines

Community Pharmacists can also help monitor these patients through the Hypertension Case-Finding Service.

Direct-to-consumer genetic testing (DTC-GT)

A position statement on direct-to-consumer genomic testing has been published where patients presenting with DTC-GT results should receive the same NHS care as those without such results.

DTC-GT results should not influence access to treatments not commissioned by the NHS.

Clinicians should refer to South East Genomics for guidance on appropriate tests for specific indications, eligibility criteria, test request processes, and available technologies.

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Brand specific prescribing of inhalers

Prescribing inhalers by brand is essential to ensure patient safety and effective disease control. Inhalers are not interchangeable, as each device differs in design, dose delivery, and technique.

Recently, there have been hospital admissions where patients were prescribed a generic inhaler and dispensed a device they were unfamiliar with, leading to incorrect use and poor symptom control.

By prescribing by brand, unintentional switching is prevented, ensuring patients consistently receive the device they know how to use, and reduce the risk of errors, exacerbations, and avoidable admissions. This also makes patient education clearer, supports adherence, and improves outcomes across asthma and COPD management. Further information regarding the prescribing of inhalers is listed below:

- CESEL Adult Asthma Guide
- CESEL CYP Asthma Guide
- SEL COPD Guide

OptimiseRx

Optimise Rx supports safer, patient-specific, evidence-based and cost-effective prescribing. Greenwich practices saved £54,698, however £155,930 in potential savings remain.

The Optimise Rx most missed savings for **August** are:

1. Estriol 0.01% cream consider estriol 0.1% cream
2. Gabapentin 600mg tablets to 2 x Gabapentin 300mg capsules
3. Doxazosin 8mg tablets to 2 x Doxazosin 4mg tablets

Cost Efficiency: Clonidine Oral Solution vs Tablets

A recent review highlighted a significant cost difference between clonidine oral solution and tablet formulations.

Drug	Quantity	Price
Clonidine 25 microgram tablets	112 tablets	£5.08
Clonidine 50 micrograms/5ml oral solution (sugar free)	100 ml	£186.16

The NEWT Guidelines advise that clonidine tablets can be safely crushed if necessary. For full guidance, refer to NEWT.

For paediatric prescribing, please consult Clinibee.

Actions:

- Review patients currently prescribed Clonidine oral solution
- Consider switching to tablets where clinically appropriate

For information please refer to SEL specials prescribing cribsheet.

Prescribing for Urinary Incontinence

When initiating treatment for lower urinary tract symptoms such as incontinence, oxybutynin immediate release (IR) tablets should be considered the first-line option over modified release. However, as per NICE NG123: Urinary incontinence and pelvic organ prolapse in women: management , do not offer oxybutynin IR to frail, elderly patients due to the increased risk of adverse effects. For further guidance on appropriate prescribing, please refer to the South East London Urology Adult Primary Care Guidelines.

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Medicines Supply Issues

Serious Shortage Protocols (SSPs)

If the Department of Health and Social Care (DHSC) decide there is a serious shortage of a specific medicine, then an SSP may be issued. The following SSPs have been issued for:

- Cefalexin 250mg/5ml oral suspension sugar free
- Cefalexin 125mg/5ml oral suspension sugar free
- Estradot® (estradiol) 25microgram/24 hrs transdermal patch
- Estradot® (estradiol) 50micrograms/24 hrs transdermal patch
- Estradot® (estradiol) 75micrograms/24 hrs transdermal patch
- Estradot® (estradiol) 100micrograms/24 hrs transdermal patch
- Creon® 25000 capsules
- Creon® 10000 capsules

Medicines Shortages: Medicine Supply Notification (MSN)

The contents of MSNs can be viewed on the Medicines Supply Tool. To access the tool you will be required to register with the SPS. MSNs have been issued for the following:

- Tier 2 MSN for Admelog® (insulin lispro)
- Tier 2 MSN for Repaglinide 500microgram, 1mg and 2mg tablets
- Tier 2 MSN for Desmopressin 10micrograms/dose nasal spray
- Tier 2 MSN for Co-trimoxazole 80mg/400mg/5ml oral suspension
- Tier 2 MSN for Miconazole (Daktarin) 20mg/g oromucosal gel sugar free

Anti-Tuberculosis Medication Supply Issue

As per the National Patient Safety Alert for TB medication, Rifampicin should not be prescribed in primary care until the shortage is resolved, currently anticipated as until at least the end of 2025.

Ardens Manager system has a search template to identify people currently prescribed Rifampicin: ***Services > Alerts > CAS > 'Refer to specialist as supply shortage – rifampicin'***

For patients receiving anti-TB medications in primary care for non-TB indications approved by SEL joint medicines formulary, please contact the relevant specialist for a suitable alternative.

Specialist Pharmacy Service (SPS)

- To access SPS publications, please register or login here.
- For new guidance published in August please see here.
- For Medicines Safety updates see here.

Webinars

South East London Medicines Optimisation Plan (SEL MO Plan) 2025-26 launch webinar outlining the SEL MO Plan 2025-26 with focus on specific areas to all SEL practices. There will be opportunity to attend **either** webinar on:

- Wednesday 8 October 2025, 1pm-2pm (Join here) ***or***
- Thursday 9 October 2025, 1pm-2pm (Join here)

Ardens Manager SEL MO Dashboard webinars

To further understand how practices can access, navigate and utilise the Ardens Manager Platform to support the implementation of the SEL MO Plan, there is an opportunity to attend an **Ardens Manager SEL MO Dashboard webinar** on:

- Tuesday 14 October 2025, 1pm-2pm ***or***
- Tuesday 28 October 2025, 1pm-2pm

PrescQIPP Clinical Masterclass – Making better clinical decisions on **Wednesday 15th October 2025, 1-2pm**. For further information and to register, see here.

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Webinar for people with early stage chronic kidney disease

The London Kidney Network and Kidney Care UK are hosting an online educational webinar on **Tuesday 7th October** for people in London living with early-stage CKD, stages 1-3.

Actions:

- Please share the web page with your patients
- GP practices can use the standard wording in **Attachment 1** for written communication to patients and/or print **Attachment 2** and share with patients at the practice.

Community of Practice for Pharmacy Technicians

The SEL Pharmacy Workforce Programme is launching a new Community of Practice for Pharmacy Technicians on **Tuesday 7th October 2025 from 2pm-5pm at the Innovation Space, 160 Tooley Street**. For further details and registration see here.

Pharmacy First referral pathway webinar

On Thursday 25th September, the SEL Digital Transformation team hosted a Pharmacy First referral pathway webinar to provide practice staff with an update on referring patients to their community pharmacy using the Pharmacy First pathway. The recording of the webinar is now available on SEL.net

MHRA Safety Roundup August 2025

For a summary of the latest safety advice for medicines and medical device users, please see the MHRA Safety Roundup.

MHRA Drug safety update:

- Paracetamol and pregnancy - reminder that taking paracetamol during pregnancy remains safe - Patients should be reassured that there is no evidence that taking paracetamol during pregnancy causes autism in children. Paracetamol is the first-choice pain relief for pregnant women, and also acts as an antipyretic to treat fever.

New and Updated NICE Guidelines

- NICE Technology Appraisal Guidance (TA924) Tirzepatide for treating type 2 diabetes
- NICE Technology Appraisal Guidance (TA1026) Tirzepatide for managing overweight and obesity
- NICE Clinical Guideline (CG185) Bipolar disorder: assessment and management
- NICE Clinical Guideline (CG57) Atopic eczema in under 12s: diagnosis and management

BNF Update

Significant changes

Influenza vaccine – updated guidance for immunisation.
Influenza vaccine (inactivated) – update to ovalbumin content.
Influenza vaccine (live) – update to cautions.
Linzagolix – new indication and dose for endometriosis.
Respiratory syncytial virus (RSV) vaccine (*Abrysvo*® and *Arexvy*®) – be alert to a small risk of Guillain-Barré syndrome following vaccination in older adults [MHRA/CHM advice].
Sodium valproate – update to important safety information.
Valproate – updated safety and educational materials to support patient discussion on reproductive risks (advice in sodium valproate, valproic acid).
Valproic acid – update to important safety information.

Contact Details

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Quality Alert reporting form can be found here

Appendix 1 – NEWSLETTER EXTENSION
SOUTH EAST LONDON INTEGRATED MEDICINES OPTIMISATION (SEL IMOC) UPDATE

New:

- The formulary inclusion of intermittently scanned continuous glucose monitoring (isCGM) devices and real time CGM (rtCGM) devices Freestyle Libre 2 Plus®, Dexcom ONE +®, GlucoRx Aidex® sensors and transmitters for pregnant people and children and young people (CYP) living with type 2 diabetes as **AMBER 1** *(initiation on the advice of a specialist).* See the SEL adult Joint Medicines Formulary (JMF) for more information. This is in line with the pan-London guidance for continuous glucose monitoring in people living with type 2 diabetes which has been adopted for local us.
- The following flash glucose resources have been retired and withdrawn in line with the review underway for SEL guidance on the use of CGM for CYP with type 1 diabetes (See the withdrawal notice for further information):
  - Flash glucose monitoring guidance
  - Flash glucose transfer of prescribing request & patient prescriber agreement
  - Flash glucose 6 – 9 month monitoring review form.
- Formulary inclusion of Trurapi® (biosimilar insulin aspart) for the management of adults with diabetes as **AMBER 1** *(initiation on the advice of a specialist, which includes a suitable specialist in primary care)*. In line with the RAG categorisation for Trurapi®, NovoRapid® *(insulin aspart originator) has also been categorised as* **AMBER 1**. *See the SEL adult JMF for further information.*

Updated:

- The Clinical Effectiveness South East London (CESEL) asthma guides for adults and CYP have been updated to align with the recently published joint NICE/SIGN (Scottish Intercollegiate Guidelines Network)/BTS (British Thoracic Society) asthma guideline (NG245). In line with the updated CESEL asthma guides, the SEL adult JMF and joint paediatric formulary has been updated:
  - Inclusion of Vivaire® (beclometasone dipropionate/formoterol) 100/6 metered dose inhaler (MDI) as **GREEN** *(primary or secondary care initiation)* and Vivaire® 200/6 MDI as **AMBER 1** *(initiation on advice of a specialist) to the SEL adult JMF*
  - Inclusion of montelukast as **GREEN** *(primary or secondary care initiation)* to the SEL adult JMF and paediatric formulary
  - Removal of Atectura® and Enerzair® from the SEL adult JMF.
- The CESEL chronic kidney guide (CKD) has been updated to align with the London Kidney Network CKD optimisation pathways and the inclusion of empagliflozin and dapagliflozin in this setting as per NICE technology appraisal (TA) 942 and 1075.
- Formulary inclusion of Pylera® (bismuth 140 mg/metronidazole 125 mg/tetracycline 125 mg) as **AMBER 1** *(initiation on advice of a specialist)* for the management of refractory cases of H.pylori for a treatment duration up to 14 days (off-label). See the SEL adult JMF and H.Pylori section of the primary care antimicrobial guideline for further information.
- The formulary inclusion of methenamine hippurate as an alternative to prophylactic antibiotics for the management of recurrent urinary tract infection (UTI) in adults and paediatrics has been updated in line with NICE guideline NG112 - urinary tract infection (recurrent): antimicrobial prescribing as follows:
  - **GREEN** *(primary or secondary care initiation)* in non-pregnant women, trans men, and non-binary people with a female urinary system
  - **AMBER 1** *(initiation on advice of a specialist)* during pregnancy, in people with recurrent upper UTI or complicated lower UTI, in men, trans women and non-binary people with a male genitourinary system
  - **AMBER 2** *(specialist initiation) in children and young people (6 years old and over)*

See the SEL adult JMF, joint paediatric formulary and recurrent UTI section of the primary care antimicrobial guideline for information.

- Formulary inclusion and updated RAG categorisation for the following medicines used for the management of cholestatic pruritus:
  - Colestyramine and colesevelam (previously uncategorised, categorised as **GREEN**– initiation in primary or secondary care)
  - Bezafibrate, naltrexone, sertraline, and rifampicin as **AMBER 2** (specialist initiation)

See the SEL adult JMF for more information including place in therapy.

- Recategorisation of intramuscular hydrocortisone from **RED** *(hospital only)* to **AMBER 2** *(specialist initiation)* in children with diagnosed adrenal insufficiency. Intravenous hydrocortisone remains **RED,** see the SEL joint paediatric formulary for information.
- The vitamin D deficiency guideline for children and young people has been amended to reflect the serum hydroxy vitamin D concentration thresholds which define vitamin D deficiency (<25 nmol/L) and insufficiency (25 – 50 nmol/L) in line with guidance from the Royal College of Paediatrics and Child Health.
- The atopic dermatitis pathway has been updated; the main update is the inclusion of nemolizumab for treating moderate to severe atopic dermatitis in people 12 years and over in line with NICE TA1077.
- The following outcomes and monitoring frameworks have been updated:
  - Dermatology pathways – psoriasis, atopic dermatitis and alopecia
  - Inflammatory bowel disease
  - COVID-19 treatments