

MEDICINES OPTIMISATION

Greenwich Pharmacy First Plus Scheme

The Greenwich Medicines Optimisation Team and Community Pharmacies are pleased to announce the extension of the local minor ailment scheme. Practices can continue to create an EMIS Local Services referral for the **common 26 selected minor ailments** from **November 2025 to March 2026**, where socially vulnerable patients will receive professional health care advice, and where clinically appropriate over the counter medicines and vitamin D supplements **free of charge** from participating pharmacies.

- For more information on the 26 minor ailments and patient criteria covered under the scheme, click [here](#);
- For a current list of Greenwich community pharmacies participating to provide the scheme, click [here](#);
- For more information on all Pharmacy First Services available in Greenwich, click [here](#);
- Pharmacy contractors who have not signed up to provide the scheme yet, can do so via an [agreement Form](#)

Self-care - Indigestion & heartburn

Treatments to help ease symptoms of indigestion and heartburn are available for purchase over the counter. Patients can be signposted to [Indigestion](#) and [Heartburn and acid reflux](#) for information on measures to treat and ease symptoms.

Indigestion and heartburn are suitable for referral to community pharmacy via EMIS Local Services as part of the Pharmacy First: Minor Illness service.

Stopping over-medication of people with a Learning disability and autistic people (STOMP) clinic referrals

The STOMP clinic offers a structured pathway, focussing on improving quality of life and reducing health inequalities in people with learning disabilities. Patients can be referred to the STOMP clinic in primary care and for further details, please contact the STOMP Team - Stomp@selondonics.nhs.uk
Please see **Attachment 1** (STOMP referral form), **Attachment 2** (STOMP clinic poster), **Attachment 3** (STOMP easy-read leaflet) and **Attachment 4** (STOMP team referral process).

Management of flu outbreaks with antivirals

Please see **Attachment 5** - Procedure for the management of localised community outbreaks of influenza (all year round) with antiviral medicines and **Attachment 6** - King's College Hospital Service Specification for the management of localised community outbreaks of influenza (all year round) with antiviral medicines.

Community Pharmacy Advance Contraception service

The contraception in community pharmacy [service specification](#) has now been published. The 3 main updates to the service are:

- Addition of oral emergency contraception to the service;
- Ability of pharmacy technicians to provide the service;
- Addition of drospirenone

Referrals for blood pressure monitoring

Ambulatory blood pressure monitoring referrals via local services was decommissioned in April 2025. The referral process has now been standardised where practices should use Accumail for BP & ABPM Referrals using the built-in referral template. Please see this [video](#) as a guide on how to do the referral.

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Inappropriate Requests Letter available on DXS

The Primary, Community and Secondary Care Interface Forum have developed the **Inappropriate Requests Letter** to support GPs in addressing inappropriate requests from secondary care. GPs are encouraged to use this letter, available on DXS, under **Community Services > Guidance**.

This letter is designed for GPs to send, **via email**, to the requesting consultant and does **not** replace Quality Alerts.

Consultant Connect for Fast Specialist Advice

Please see the **Attachment 7** for information on Consultant Connect – a service providing instant access to specialist advice via app or phone.

Modified-release methylphenidate – Not to switch Equasym XL Capsules

A Medicine Supply Notification was released in September 2022 outlining the risks when switching between different brands of modified-release methylphenidate.

SPS have produced guidance for [Prescribing and switching between modified-release methylphenidate](#) which specifically highlights that any patient on **Equasym XL capsules** should not be switched to another brand, as there is no other bioequivalent brand available.

For further information please see SEL memo [here](#).

OptimiseRx

Optimise Rx in EMIS Web supports safer, patient-specific, evidence-based and cost-effective prescribing. Greenwich practices saved £65,721, but £128,344 potential savings remain. Practices are encouraged to provide reasons when rejecting messages to help identify barriers to implementation.

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

1. Estriol 0.01% cream – consider estriol 0.1% cream
2. Doxazosin 8mg tablets – consider 2 x doxazosin 4mg tablets
3. Buprenorphine 10microgram/hour seven-day patches – consider Bunov®, Reletrans® or Sevodyne® 10microgram/hour seven-day patch
4. Venlafaxine 150mg modified-release capsules – consider venlafaxine 150mg modified-release tablets
5. Haloperidol 500microgram tablets – consider swapping to haloperidol 5mg/5ml sugar-free oral solution

Rybelsus (semaglutide) tablets – updated SEL information

Rybelsus tablets (3mg, 7mg and 14mg) are being replaced with a new formulation with increased bioavailability, which will contain a lower dose of semaglutide (1.5mg, 4mg and 9mg).

Initial formulation (oval tablet)		New formulation (round tablet)
3 mg (starting dose)	=	1.5 mg (starting dose)
7 mg (maintenance dose)	=	4 mg (maintenance dose)
14 mg (maintenance dose)	=	9 mg (maintenance dose)

Actions:

- Identify patients prescribed Rybelsus and switch from the original Rybelsus formulation to the new Rybelsus formulation as per the table above
- Patients should be informed of the change and counselled
- Please see SEL memo [here](#) for full information.

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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:

- [Estradot® \(estradiol\) 25microgram/24 hrs transdermal patch](#) – 03 April 2025 to 05 December 2025
- [Estradot® \(estradiol\) 50micrograms/24 hrs transdermal patch](#) – 19 December 2024 to 05 December 2025
- [Estradot® \(estradiol\) 75microgram/24 hrs transdermal patch](#) – 19 December 2024 to 05 December 2025
- [Estradot® \(estradiol\) 100micrograms/24 hrs transdermal patch](#) – 19 December 2024 to 05 December 2025
- [Creon® 25000 capsules](#) – 24 May 2024 to 16 January 2026
- [Creon® 10000 capsules](#) – 24 May 2024 to 16 January 2026

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 Ibandronic acid 150mg tablets
- Tier 2 MSN for Propranolol 80mg and 160mg M/R capsules
- Tier 3 MSN for Antimicrobial Agents Used in Tuberculosis (TB) Treatment

Specialist Pharmacy Service (SPS)

- To access SPS publications, please register or login [here](#).
- For new guidance published in October please see [here](#).
- For Medicines Safety updates see [here](#).

PrescQIPP

Bulletins

Bulletin 370: Chronic Pain – This resource supports the review of pain pathways appropriate primary care management.

Bulletin 372: Emollients – This update supports decision making and optimising treatment in line with safety alerts highlighting the danger of fire and the risk of severe and fatal burns.

Bulletin 375: Inhaler carbon footprint – These resources support the review and improvement of inhaler carbon footprint.

Look-Alike Sound-Alike medicines (LASA)

Drugs with similar names can often be mis-selected during prescribing, dispensing and administration.

A recent safety event involving quetiapine being dispensed instead of the quinine prescribed, highlighted how mis-selection of different forms of the same drug can cause harm to patients.

For more information, please see the PrescQIPP [Look-Alike Sound-Alike prescribing errors](#) bulletin.

Harm from incorrect recording of a penicillin allergy as a penicillamine allergy

A recent National Patient Safety alert (NatPSA) highlighted reports of healthcare staff recording a patient's penicillin allergy as a penicillamine allergy in electronic prescribing systems. This look-alike sound-alike error risks a patient with a known penicillin allergy being administered a penicillin based antibiotic and having a potentially fatal anaphylactic reaction.

Actions:

- Review the [NatPSA alert](#)
- Identify any patients with documented penicillamine allergy and undertake a review to ensure they are truly penicillamine allergy or penicillin allergy/intolerance

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MHRA Safety Roundup October 2025

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

Isotretinoin – updates to prescribing guidance and survey of services

The Commission on Human Medicines (CHM) has endorsed changes to isotretinoin prescribing guidance. In addition, CHM is seeking further information from dermatology services who prescribe isotretinoin to inform any future changes to current risk minimisation measures.

New and Updated NICE Guidelines

- [NICE guideline \[NG255\] Suspected sepsis in pregnant or recently pregnant people: recognition, diagnosis and early management](#)
- [NICE guideline \[NG254\] Suspected sepsis in under 16s: recognition, diagnosis and early management](#)
- [NICE guideline \[NG253\] Suspected sepsis in people aged 16 or over: recognition, assessment and early management](#)
- [NICE Guideline \[NG235\] Intrapartum care](#) – updated

BNF Update

Significant changes

[Antibacterials, use for prophylaxis](#) – updated guidance for *Haemophilus influenzae* type b infection

[Azithromycin](#) – new indication and dose for prevention of secondary case of *Haemophilus influenzae* type b disease.

[Bee venom extract](#) – name change to [bee venom extracts](#).

[Ciprofloxacin](#) – new indication and dose for prevention of secondary case of *Haemophilus influenzae* type b disease.

[COVID-19 vaccine](#) – monograph updated with current guidance.

[COVID-19 vaccines](#) – updated guidance for immunisation.

[Diphtheria vaccine](#) – updated guidance for immunisation.

[Guselkumab](#) – new indications and doses for Crohn's disease and ulcerative colitis.

[Haemophilus influenzae type b conjugate vaccine](#) – updated guidance for immunisation.

[Hepatitis B vaccine](#) – updated guidance for immunisation.

[Immunisation schedule](#) – updated guidance.

[Liraglutide](#) – monograph updated to incorporate new preparations.

[Measles, Mumps and Rubella vaccine](#) – updated guidance for immunisation.

[Meningococcal vaccines](#) – updated guidance for immunisation.

[Paracetamol](#) – reminder that taking paracetamol during pregnancy remains safe.

[Pertussis vaccine](#) – updated guidance for immunisation.

[Pneumococcal vaccine](#) – updated guidance for immunisation.

[Poliomyelitis vaccine](#) – updated guidance for immunisation.

[Tetanus vaccine](#) – updated guidance for immunisation.

[Vaccination, general principles](#) – updated guidance for vaccines and asplenia, splenic dysfunction, or complement disorders.

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:

- Formulary inclusion of drospirenone (Slynd®) as a progestogen only contraceptive as **GREEN** (*primary or secondary care initiation*). See [formulary recommendation 162](#) and the [South East London Joint Medicines Formulary](#) for more information.
- A [Wet Age-related Macular Degeneration \(wAMD\) treatment pathway](#) has been adapted from NHS England's national treatment pathway to support local clinicians. An associated [outcomes and monitoring framework](#) for wAMD has also been developed. The [SEL adult JMF](#) has been updated with the following treatments as **RED** (*hospital only*) for wAMD:
 - Biosimilar ranibizumab and aflibercept 2mg for the management of wAMD where best-corrected visual acuity is better than 6/12
 - Aflibercept 2mg biosimilar in line with the existing approved indications for the originator product (Eylea®)
 - Aflibercept 8mg as a preferred second line treatment option for the management of wAMD
- [Primary care guidance for managing medicines with teratogenic potential that require pregnancy prevention programme \(PPP\)](#) has been developed as a signposting document to support clinical decision making when prescribing teratogenic medicines in primary care.
- A [breast cancer primary prevention pathway](#) has been developed to support the use of risk-reducing endocrine treatments for the primary prevention of breast cancer in women at high or moderate risk in line with [NICE guidance - CG164](#). The [SEL adult JMF](#) has been updated to include tamoxifen, anastrozole and raloxifene as **AMBER 2** (*specialist initiation*) for the primary prevention of breast cancer in this setting.
- A [pharmacological treatment pathway for the management of Postural Orthostatic Tachycardia Syndrome \(POTS\) in adults](#) has been developed to support the management of POTs across primary and secondary care. The [SEL adult JMF](#) has been updated to include the following treatments as **AMBER 1** (*initiation in primary care on the recommendation of a specialist*) and **AMBER 3** (shared care):
 - [Sodium chloride modified release tablets](#) (**AMBER 1**)
 - [Fludrocortisone tablets](#) (**AMBER 1**)
 - [Propranolol tablets](#) (**AMBER 1**)
 - [Pyridostigmine](#) (**AMBER 3**) - associated formulary recommendation – [recommendation 163](#)The associated [transfer of prescribing responsibility guidance](#) for ivabradine and midodrine in this setting has been updated to include the use of pyridostigmine in this setting. The formulary recommendation for [ivabradine](#) and [midodrine](#) have also been updated to align with the POTS treatment pathway.
- In line with the discontinuation of FreeStyle Libre® 3 and availability of FreeStyle Libre® 3 plus, template letters for [adults](#) and [children and young people](#) are now available to support primary care with the changeover.
- Formulary inclusion of cyclizine and prochlorperazine (off-label) as first line options and ondansetron and metoclopramide (off-label) as second line options for the treatment of nausea and vomiting in pregnancy as **GREEN** (*primary or secondary care initiation*). These treatments have also been approved as **AMBER 1** (*initiation in primary care on the recommendation of a specialist*) for the pre-emptive treatment of severe hyperemesis gravidarum. See the [SEL adult JMF](#) for more information.

Updated:

- The time limit on the recommendation for Xonvea® (doxylamine succinate 10mg/pyridoxine hydrochloride 10mg) for the treatment of nausea and vomiting in pregnancy has been removed. Xonvea® has been recategorised from **AMBER 2** (*specialist initiation*) to **GREEN** (*primary or secondary care initiation*) in this setting and can now be considered as a first line treatment option. Xonvea® has also been approved as **AMBER 1** (*initiation in primary care on the recommendation of a specialist*) for the pre-emptive treatment of severe hyperemesis gravidarum. See the updated [formulary recommendation](#) and [SEL adult JMF](#) for further information.
- The [primary care migraine treatment pathway](#) and [headache diary](#) have been updated. Main updates include the following:
 - Addition of [rimegepant](#) for the acute treatment of migraine in line with [NICE Technology Appraisal \(TA\) 919](#) and recategorisation from interim **RED** (*hospital only*) to **GREEN** (*primary or secondary care initiation*)
 - Recategorisation of [topiramate](#) from **AMBER 1** (*initiation on advice of a specialist*) to **AMBER 2** (*specialist initiation*) for the prevention of migraine
- The [Inflammatory Bowel Disease pathways](#) has been updated. Main updates include the inclusion of [mirikizumab](#) and [guselkumab](#) for the management of Crohn's disease (CD) and [guselkumab](#) for the management of ulcerative colitis in line with NICE TA guidance. In addition to, dose escalated infliximab (Remsima®) for the management of CD. The associated [outcomes and monitoring framework](#) has also been updated.
- The biologic combinations for dual advanced therapy for the management of refractory CD have been updated to include risankizumab and an anti-TNF as well as ustekinumab and upadacitinib or vedolizumab. The [criteria for use](#) of dual advanced therapy in CD has been updated.
- The [co-morbid insomnia pathway](#) has been updated. Main updates include the place in therapy for daridorexant as well as trazodone and agomelatine for chronic insomnia associated with nightmare disorder in post-traumatic stress disorder. The associated formulary recommendations – [142](#) and [143](#) have also been updated.
- The [narcolepsy and idiopathic hypersomnia shared care guideline](#) has been updated. Main updates include noting clomipramine as licensed for narcolepsy with cataplexy (previously off-label). The associated formulary recommendations – [046](#), [047](#) and [088](#) have also been updated.