Welcome to the 4th Non-medical prescribers’ bulletin. This bulletin aims to provide health information to support non-medical prescribers in evidence based practice and professional development to enable best patient care and decision making.

Contents

- **FOCUS ON** Antibiotics, Respiratory Care, Geriatrics, Endocrinology, Immunology, Women’s Health, Men’s Health, Mental Health, Paediatrics, Ophthalmology/Optometry, Obstetrics/Pregnancy, Cardiovascular System, Nervous System, Pain Management, Rheumatic Diseases, Smoking, Ear, Nose and Throat Medicine, Allergies, General Health, Communicable Diseases

- Professional Concerns, Pharmacy Focus, National Guidance [including NICE & Department of Health]

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*Where a phrase or word is underlined indicates a hyperlink*

**Antibiotics**

**Current State of Antimicrobial Stewardship in Children’s Hospital Emergency Departments**

Antimicrobial stewardship programs (ASPs) effectively optimize antibiotic use for inpatients; however, the extent of emergency department (ED) involvement in ASPs has not been described.

To determine current ED involvement in children’s hospital ASPs and to assess beliefs and preferred methods of implementation for ED-based ASPs. In *Infection Control & Hospital Epidemiology*

**Antimicrobial stewardship: changing risk-related behaviours in the general population** [NICE GUIDELINE 2017]

This guideline includes recommendations on: ensuring antimicrobial stewardship programmes are a local priority providing information for the public about reducing inappropriate antimicrobial demand and use providing information for the public about preventing and reducing the spread of infections improving infection prevention knowledge and behaviour among children and young people advising people on how to use antimicrobial medicines

**Interventions to improve antibiotic prescribing practices for hospital inpatients** Cochrane Review [Feb 2017]

Interventions were successful in safely reducing unnecessary antibiotic use in hospitals, despite the fact that the majority did not use a widely adopted behaviour change technique, which is to audit and provide feedback on performance. Effective communication of the review results could have considerable health service and policy impact.

**Patient information can improve appropriate antibiotic prescribing**

This 2015 study undertook to review a patient information leaflet, which included:

- The diagnosis (for example sinusitis, bronchitis or cold)
- The decision about antibiotics
- The natural timeframe for their illness
- Self-help management techniques
- When to seek help (safety net)
- The need for safe antibiotic prescribing
- The majority of patients and students questioned about the leaflet had favourable reactions to it, thought it would be useful and that the content was understandable In *Nursing in Practice* [2015]
Staying with antibiotics/antivirals

From the WHO [2017] GLOBAL PRIORITY LIST OF ANTIBIOTIC-RESISTANT BACTERIA TO GUIDE RESEARCH, DISCOVERY, AND DEVELOPMENT OF NEW ANTIBIOTICS global priority pathogens list (global PPL) of antibiotic-resistant bacteria to help in prioritizing the research and development (R&D) of new and effective antibiotic treatments.

Antibiotic-resistance crisis and landmark fall in prescriptions For the first time in England, the increase in the use of antibiotics has been reversed, whereby doctors and nurses have prescribed 2.2 million less antibiotics between 2014 to 2015, thus reducing the prescriptions of antibiotics from 40.7 million to 38.5 million (NICE, 2016) in Nurse Prescribing [Jan 2017]

Antimicrobial resistance and the race to find new antibiotics in Prescriber [Jan 2017] with few new antibiotics against Gram-positive bacteria becoming available in recent years, and no new class of antibiotic for Gram-negative infections for more than 40 years, what hope is there on the horizon?

Factors predicting antibiotic prescription and referral to hospital for children with respiratory symptoms: secondary analysis of a randomised controlled study at out-of-hours services in Primary Care Acute respiratory infections and fever among children are highly prevalent in primary care. It is challenging to distinguish between viral and bacterial infections. The aim of the study was to identify predictors for prescribing antibiotics or referral to hospital among children. in BMJ open [2017]

Direct-acting antivirals for hepatitis C: EMA confirms recommendation to screen for hepatitis B The European Medicines Agency (EMA) has confirmed its recommendation to screen all patients for hepatitis B before starting treatment with direct-acting antivirals for hepatitis C; patients infected with both hepatitis B and C viruses must be monitored and managed according to current clinical guidelines. These measures aim to minimise the risk of hepatitis B re-activation with direct-acting antivirals from the European Medicines Agency [December 2016]

ESPAUR 2016: antibiotic and antifungal prescribing in England The English Surveillance Programme for Antimicrobial Utilisation and Resistance (ESPAUR) Key findings from their 2016 report, show some progress especially in primary care in Prescriber [March 2017]

Respiratory Care

Withdrawal of ICS treatment in primary care: A practical guide ICS withdrawal is feasible and is likely to reduce side effects and improve cost-effectiveness of treatment if applied to the right patients. The algorithm described here represents a practical approach to the problem that can be implemented in primary care in Nurse Prescribing [Feb 2017]

GOLD report on the diagnosis and management of COPD The new Global Initiative for Chronic Obstructive Lung Disease (GOLD) report on the prevention, diagnosis and management of COPD advises using inhaled steroids less frequently than in current practice. This article summarises the main recommendations of the report and the implications for GPs. In Prescriber [Feb 2017]

Identifying and treating different phenotypes in chronic obstructive pulmonary disease Prescribers should be able to differentiate between COPD phenotypes using the GOLD ABCD algorithm and recognise the different drug classes which should be used for each category. Prescribers who are competent to prescribe for COPD are expected to be able to identify the individual therapies in each class and carry out a review of patients in order to assess whether they are being treated appropriately In Nurse Prescribing [Mar 2017]

Reslizumab; add-on therapy for severe eosinophilic asthma Reslizumab (Cinqaero) is a new add-on therapy for severe inadequately controlled eosinophilic asthma, which is administered by monthly IV infusion. This article summarises its indications, efficacy and adverse effects. In Prescriber [March 2017]

Systematic meta-review of supported self-management for asthma: a healthcare perspective Evidence from a total of 270 RCTs confirms that supported self-management for asthma can reduce unscheduled care and improve asthma control, can be delivered effectively for diverse demographic and cultural groups, is applicable in a broad range of clinical settings, and does not significantly increase total healthcare costs in BMC Medicine [March 2017]
Geriatrics

Systematic review of the prevalence of medication errors resulting in hospitalization and death of nursing home residents In Journal of the American Geriatrics Society [Feb 2017]

Risk of falls increased by high-risk medicines Almost two-thirds of falls among people aged 65 years and older occur in those who took at least one high-risk medication in the 24 hours before the fall In Journal of the American Geriatrics Society [Feb 2017]

One size does not fit all: The management of hypertension in frail older people Ageing affects individuals in different ways and some people remain robust and strong in their 80s and beyond; others, however, become frail. It is important that medical and nursing staff are educated in their initial training and throughout their careers in age-related changes and how ageing and frailty affect treatment and care In Nurse Prescribing [Mar 2017]

Polypharmacy and older people Polypharmacy in older people can be harmful but under-prescribing can also threaten patients’ safety and wellbeing. It is important to consider the clinical appropriateness of the combination of medicines that the patient is taking in Nurse Prescribing [Mar 2017]

Endocrinology

Platypus Venom Could Be the Future of Diabetes Treatments Researchers have discovered remarkable evolutionary changes to insulin regulation in two of Australia’s most iconic native animal species - the platypus and the echidna - which could lead to new treatments for Type 2 diabetes in people [DEC 2016]

Immunology

Next generation immunology: the quest for a universal vaccine Until recently, vaccine development involved isolating, inactivating and injecting the pathogen or part of the micro-organism. However, newer approaches such as reverse vaccinology are facilitating the synthesis of novel vaccine antigens, and may offer hope for a ‘universal vaccine’ in the future. In Prescriber March 2017

Women’s Health

Contraception cuts: A false economy According to the Department of Health (2013), every £1 invested in contraception saves £11 in averted health outcomes: a low-risk, standard birth costs the NHS about £3000 and an abortion can cost up to £1000. So why stop offering some of the most effective methods of contraception? In Nurse Prescribing [Jan 2017]

Oral hormonal contraceptives in Nurse Prescribing [Jan 2017] Article discussing the mechanisms, correct uses and precautions involved in the safe and effective use of oral contraceptives

Update on non-hormonal treatment options during the menopause in Nurse Prescribing [Feb 2017] This article gives an overview of prescribed alternatives to HRT and discusses lifestyle and diet, alternative and complementary therapies, vaginal problems and patient support, as well as nurse education.

Men’s Health

Listerine reduces Neisseria gonorrhoea in the pharynx of men who have sex with men in Pharyngeal Gonorrhoea: The Willingness of Australian Men Who Have Sex with Men to Change Current Sexual Practices to Reduce Their Risk of Transmission—A Qualitative Study in PLOS OPEN ACCESS [DEC 2016]

Frailty and treatments for benign prostatic hyperplasia Many older men are likely to have lower urinary tract symptoms (LUTS) associated with benign prostatic hyperplasia (BPH). Having LUTS can increase the risk of frailty, drugs used to treat the symptoms can exacerbate the problem. This article examines these risks and how they can be reduced. In Prescriber [Jan 2017]

Mental Health

Nurse prescribing in mental health: does it still make sense? In Nurse Prescribing [Feb 2017]

Management of panic disorder in primary care in Prescriber [Jan 2017]

Dementia and ethnicity in Nurse Prescribing [Mar 2017] This article explores the specific issues of dementia in the UK’s ethnic minority population

Chlorpromazine versus clozapine for schizophrenia There is some very low-quality evidence that favours clozapine over chlorpromazine for improving overall mental state. For other outcomes, including adverse effects, there is no evidence of a difference between these two antipsychotics. However these data are very difficult to draw conclusions from, only four small trials provided data and these were poorly conducted [COCHRANE REVIEW APRIL 2017]
**Community acquired pneumonia in children**

**Main findings**
- Introduction of the pneumococcal conjugate vaccine has significantly reduced rates of community acquired pneumonia (CAP) in the developed world
- Clinical assessment requires careful evaluation of clinical features, severity, and evidence of complications
- Children with mild to moderate symptoms can be managed in the community
- Recommended empirical first line treatment is oral amoxicillin. Intravenous antibiotics are indicated in children who cannot tolerate oral medicines or have septicemia or complications
- Patients should be reviewed 48 hours after starting treatment to monitor response and for evidence of complications

**In the BMJ [Mar 2017]**

**The treatment of URTIs and otitis media in children** This article discusses how to assess whether an antibiotic is appropriate and when referral to secondary care may be necessary. **In Prescriber [March 2017]**

**Pediatrics**

**Impact of the national rotavirus vaccination programme on acute gastroenteritis in England and associated costs averted** Introduction of infant oral rotavirus vaccination in the UK in July 2013 has resulted in decreased hospitalisations and Emergency Department (ED) visits for acute gastrointestinal (AGE) In Vaccine [Jan 2017]

**Managing ADHD in children and young people** This article outlines how to identify and manage children of different ages with attention deficit hyperactivity disorder (ADHD), and how to support parents raising a child with ADHD. **In Nurse Prescribing [Jan 2017]**

**Childhood Immunisation** The childhood immunisation programme is a successful public health intervention in which the independent prescriber has a key role. The independent prescriber can offer additional skills in this area of practice, and provide mentorship for more junior colleagues in enhancing consultation skills, medicines knowledge and vaccination uptake. **In Nurse Prescribing [Feb 2017]**

**Detection and recommended treatment of head lice** This article discusses how to detect head lice, and considers the treatments options available and their efficacy **In Prescriber [2017]**

**Obstetrics**

**Antidepressant use during pregnancy and the risk of major congenital malformations in a cohort of depressed pregnant women: an updated analysis of the Quebec Pregnancy Cohort** *BMJ Open* [2017] The study aimed to determine the association between first-trimester exposure to antidepressants and the risk of major congenital malformations in a cohort of depressed/anxious women
Uterotonic for post-partum haemorrhage  The active management of the third stage of labour has been defined as the interval between the birth of the neonate and expulsion of the placenta, with the use of an oxytocic drug administered immediately after birth, early cord clamping and cutting, and controlled cord traction (Deneux-Tharaux et al. 2013). Synthetic uterotonic drugs are designed to stimulate contraction of the uterus, in order to prevent post-partum haemorrhage (PPH), as uterine atony accounts for 90% of primary PPH in woman globally (Say et al. 2014). Oxytocin, Syntometrine, ergometrine, and misoprostol, remain the front line drug therapies used to prevent and manage this complication. In Nurse Prescribing [Jan 2017]

Prescribing for schizophrenia and psychosis in pregnancy
This article outlines the symptoms that people with schizophrenia might experience and the aims of the antipsychotic treatment prescribed. The different types of antipsychotic medication are described. The effects of schizophrenia and its treatment on fertility and pregnancy, and the use of antipsychotic medication during pregnancy are explained. The different recommendations available to nurse prescribers are also illustrated In Nurse Prescribing [Feb 2017]

Statins during pregnancy: A cohort study using the General Practice Research Database to investigate pregnancy loss. The study is the first to report and analyse data on pregnancy loss following prescribing of statins during early pregnancy, work which was possible because the GPRD includes medical records for women for the period before as well as during pregnancy thus enabling early exposures and losses to be identified. The study found an increased proportion of pregnancies ending in a spontaneous loss compared with pregnancies where statins have not been prescribed. The study replicated the results found in other work that has shown that there is no difference in the proportion of offspring diagnosed with a major congenital malformation compared with offspring of mothers who have not been exposed to statins during pregnancy in Pharmacoepidemiology and drug safety [Feb 2017]

Cardiovascular system
Current management of pulmonary arterial hypertension This article examines the diagnosis of pulmonary arterial hypertension, the efficacy of current treatments, and the role of the GP in management. In Prescriber [March 2017]

Nervous System
Investigations into an emerging treatment for multiple sclerosis recent developments in an emerging treatment for multiple sclerosis (MS). The drug is called ocrelizumab, a monoclonal antibody that suppresses B cells, which form part of the immune system. It has been found to be effective in two related studies, for treating both MS in its primary progressive form, in the relapsing remitting form. In Nurse Prescribing [Feb 2017]

Opicapone: once-daily adjunctive therapy for Parkinson’s disease
Opicapone (Ongentys) is a new once-daily catechol-O-methyl transferase (COMT) inhibitor with a long duration of action allowing once-daily dosing, licensed for adjunctive therapy in adults with Parkinson’s disease and end-of-dose motor fluctuations. This article discusses its indications, efficacy and adverse effects. In Prescriber [Feb 2017]

Pain Management
Recent advances in the management of chronic pain
Current treatments for chronic pain are often ineffective and are associated with some problematic side-effects. This article discusses some new approaches that may offer better treatment options for patients with chronic pain in the future. In Prescriber [Feb 2017]

Rheumatic Diseases
Systematic review of the methodological quality of controlled trials evaluating Chinese herbal medicine in patients with rheumatoid arthritis Studies evaluating CHM often fail to meet expected methodological criteria, and high-quality evidence is lacking. In BMJ Open [Jan 2017]
Smoking and smoking related diseases

Tobacco and alcohol – the last great public health battles? An evidence review published last year found that “alcohol misuse is the biggest risk factor attributable to early mortality, ill-health and disability for those aged 15 to 49 years”. If we are to tackle the societal, personal and economic damage inflicted through the continued use of tobacco and abuse of alcohol, we need to address this financial reality. It will be a brave politician indeed who sets out on that course. **In Prescriber [Feb 2017]**

**Effective ways of supporting patients to stop smoking**
Smoking cessation is the most cost-effective intervention for the prevention and treatment of smoking-related diseases. This article discusses the treatments available to support smokers to stop smoking and their efficacy. **In Prescriber [Feb 2017]**

**Update to evidence-based guide to smoking cessation therapies**
This article summarises evidence, based on high-quality systematic reviews, on smoking cessation interventions that could be offered by health professionals. The evidence presented here suggests that brief advice by a health professional is beneficial in achieving smoking cessation and is intensive behavioural support alone or in combination with pharmacotherapies (nicotine replacement therapies (NRTs), bupropion and varenicline). Pharmacotherapies are also effective individually in promoting smoking cessation; a combination of NRTs (oral or skin patch) can be particularly useful in promoting cessation among highly dependent smokers. Pharmacotherapies in combination with behavioural support delivered in health care settings are more effective than when used alone and delivered in community settings, respectively **Nurse Prescribing [Feb 2017]**

**Licensing procedure for electronic cigarettes and other nicotine-containing products (NCPs) as medicine**
The guidance provides information about the licensing procedure for electronic cigarettes and other NCPs as medicines with reference to specific standards dealing with quality and safety. **[MHRA GUIDANCE]**

Ear, nose & throat medicine

Double-blind placebo-controlled randomized clinical trial of verapamil for chronic rhinosinusitis with nasal polyps
The study assessed verapamil’s efficacy using the Sino-nasal Outcome Test (SNOT-22), which has a maximum score of 110. Ten patients received low-dose verapamil (80 mg 3 times a day) and eight received placebo. The mean change in SNOT-22 score between baseline and week 8 was a decline of 27.3 with verapamil and a 0.4 increase with placebo— The study is, however, too small to confirm efficacy statistically. So, the authors say that verapamil should be assessed further at a higher dose in patients with chronic rhinosinusitis with nasal polyps **in Journal of Allergy and Clinical Immunology [Jan 2017]**

**Allergies**
**RPS/DVLA advise drivers to exercise caution with use of hay fever remedies**. The Royal Pharmaceutical Society and the Driver and Vehicle Standards Agency (DVSA) are warning it’s risky to drive without fully appreciating the effects prescription and over-the-counter remedies can have on the body the ability to drive.

General health

The **NHS Health Check programme** in England prevents up to 8400 heart attacks, strokes or deaths over 5 years. **NHS Health Check comorbidity and management: an observational matched study in primary care** **In British Journal of General Practice [Dec 2016]**

Communicable diseases

National flu immunisation programme plan **Department of Health**
The annual flu letter describes the national flu immunisation programme for 2017 to 2018, and outlines which groups are eligible for flu vaccination. It is supported by the flu plan which sets out a coordinated and evidence-based approach to planning for, and responding to, the demands of flu across England.

**Antibiotic treatment for Clostridium difficile-associated diarrhoea in adults**
**Systematic Review** finding no firm conclusions regarding the efficacy of antibiotic treatment in severe CDI as most studies excluded patients with severe disease. The lack of any ‘no treatment’ control studies does not allow for conclusions regarding treatment in patients with mild CDI beyond withdrawal of the initiating antibiotic. Nonetheless, moderate quality evidence suggests that vancomycin is superior to metronidazole and fidaxomicin is superior to vancomycin. The quality of evidence for telcoplanin is very low **[COCHRANE REVIEW March 2017]**
Professional concerns

CPD Launchpad: Revalidation tool in NURSE PRESCRIBING [FEB 2017] MA Healthcare, the publisher of Nurse Prescribing, has launched a new revalidation resource for nurses and midwives. CPD Launchpad offers a free e-portfolio to help you record your CPD and practice hours, as well as a wide range of content to promote reflection. You can register and use CPD Launchpad straight away, and if you’re a subscriber to Nurse Prescribing you get extra content to help build your personal CPD hours. Register at CPD-launchpad.co.uk.

Non-medical prescribing versus medical prescribing for acute and chronic disease management in primary and secondary care. The findings suggest that non-medical prescribers, practising with varying but high levels of prescribing autonomy, in a range of settings, were as effective as usual care medical prescribers. from the Cochrane Library of Systematic Reviews

Practice makes perfect: A systematic review of the expertise development of pharmacist and nurse independent prescribers in the United Kingdom. This is the first study to synthesise data systematically on expertise development from studies on Independent Prescribers using the model. The model showed the need for stronger foundations in scientific knowledge amongst some IPs, where continuous workplace practice can improve skills and strengthen attitudes. This could facilitate a smoother transfer of learnt theory to practice, in order for IPs to be experts within their fields In Research in Social and Administrative Pharmacy (2017)

Deprescribing: reducing inappropriate polypharmacy Inappropriate prescribing and polypharmacy, particularly in elderly patients, is associated with increased risk of falls, hospital admissions and death. Deprescribing has the potential to reduce these risks and has been advocated in several recent guidelines. But how can this be achieved safely and effectively? In Prescriber [Feb 2017]

Legal implications of deprescribing: a case scenario This article presents an illustrative case scenario that examines the legal implications of deprescribing. In Prescriber [March 2017]

Learning to prescribe through co-working: junior doctors, pharmacists and consultants Co-working with pharmacists and consultants contributes positively to junior doctors’ prescribing practices. However, co-working is complex and is influenced by differing understandings of prescribing practices. These insights assist in informing how co-working can be enacted routinely in hospital settings to promote safe and effective prescribing practices In Medical Education [April 2017]

Pharmacokinetics: optimising safe and effective prescribing This article goes back to basics with an update on pharmacokinetics, examining how underlying processes in the body influence the clinical effects and risk of side-effects of drugs that GPs commonly prescribe. In Prescriber [March 2017]

ADVERSE DRUG REACTIONS

The value of patient reporting to the pharmacovigilance system: a systematic review. In the British Journal of Clinical Pharmacology [2017] Patient reporting adds new information, and perspective about ADRs in a way otherwise unavailable. This can contribute to better decision-making processes in regulatory activities. The present review identified gaps in knowledge that should be addressed to improve our understanding of the full potential and drawbacks of patient reporting

Adverse drug reactions: prescribing’s twilight zone In Prescriber [Jan 2017] Published studies cannot be fully relied upon to provide all the information needed about adverse drug reactions (ADRs), so there is a pressing need to improve ADR reporting by healthcare professionals and patients. For many years, the Yellow Card Scheme has offered an early warning signal for ADRs, but the scheme still needs be more widely used, and to be fully integrated into clinical systems.

CQC continues to take action against websites selling prescription medicines The Care Quality Commission has taken further action to protect people in England who are using websites to obtain prescription medicines - The quality regulator has published inspection reports on four more providers, which detail examples of people being put at risk of harm, with insufficient checks on their identity, poor recording of their medical history and clarification of their symptoms, inappropriate medicines being prescribed, and lack of communication with the patient’s GP. [April 2017]

REPORTS Statistics on drugs misuse England, 2017 This statistical report presents a range of information on drug use by adults and children drawn together from a variety of sources. It focuses on England only where possible although some statistics are only readily available at GB or UK level or for England and Wales combined main changes being planned
UKMi POWER POINT PRESENTATION  New Medicines Prescribing Outlook – Horizon Scanning for Drug Developments 2016/17

Commissioning medicines optimisation services from community pharmacy [2016]

Guidance for commissioners University of Manchester, along with Primary Care Commissioning (PCC)  THIS TOOLKIT is for all commissioners who may wish to commission a medicines optimisation service from community pharmacies. By working through this toolkit you will find guidance, resources and tips to improve the outcomes of services that involve medicines as part of the patient pathway

National community pharmacy audit of hydration messages to prevent acute kidney injury [2017]  AUDIT on more than 14,000 patients who visited community pharmacies across England in 2016. Hydration advice was provided to 94% of patients with urinary tract symptoms/infections. Data on prescriptions for urinary tract infections relevant to the antimicrobial resistance agenda was also collected.

Pharmacogenetics for the prescriber in Medicine [2016]

KEY POINTS:

- Variability in the response to drug treatment, in terms of both efficacy and safety, is the norm rather than the exception, and is related to both environmental and genetic factors
- Genetic variation might influence either the choice of drug to be prescribed and/or the optimal dosage
- A number of drugs are now prescribed on the basis of a genetic test (e.g. trastuzumab for breast cancer), and this number will increase over the coming years
- Genetic variation is an important cause of increased susceptibility to adverse reactions to drugs (e.g. abacavir, carbamazepine)
- Prescribers must be aware of (1) the drugs for which there is evidence that genetic factors determine response, (2) where they can get the relevant test carried out, and (3) how to interpret the result

British Pharmacological Society: supporting safer prescribing Professor David Webb is president of the British Pharmacological Society (BPS) and Christison professor of therapeutics and clinical pharmacology at the University of Edinburgh. He talks to Angela Dowden about his passion for pharmacology and his work guiding the BPS into the future. In Prescriber [Jan 2017]

The effect of pharmacists on ward rounds measured by the STOPP/START tool in a specialized geriatric unit In this study, the improved appropriateness of prescribing, as measured by reduced STOPP/START criteria in the post-intervention group, is encouraging for pharmacist participation on physician-led ward rounds. We also observed that the collaborative, multidisciplinary model of care in the specialized geriatric unit also improved prescribing quality for both groups in comparison with the changes made to prescribing within the acute care wards. In Journal of Clinical Pharmacy and Therapeutics [Dec 2016]

Websites

Specialist Pharmacy Service
The purpose of the service is to improve the use of medicines to help people live longer, fuller lives, bringing together experts to offer impartial advice for pharmacists, GPs & clinicians to use free of charge

National Pharmacy Association Supporting independent community pharmacies and helping you to grow your business.

NHS pharmacy services explained Good to know...NHS Choices web pages explaining everything regarding pharmacy services for the general public

Health literacy ‘talking pill bottles’ Addressing low health literacy with “Talking Pill Bottles”: A pilot study in a community pharmacy setting in results suggest that providing audio-assisted medication instructions in Talking Pill Bottles positively affected blood pressure control and was well accepted by patients with low health literacy. Further research involving newly diagnosed patients is needed to mitigate possible ceiling effects that we observed in an experienced population Journal of the American Pharmacists Association [JAN-FEB 2017]
National Guidance [NICE]

NICE Guidelines NICE guidelines make evidence-based recommendations on a wide range of topics, from preventing and managing specific conditions to planning broader services and interventions to improve the health of communities. They aim to promote integrated care where appropriate.

Quality Standards Quality standards set out the priority areas for quality improvement in health and social care. They cover areas where there is variation in care. Each standard gives you: a set of statements to help you improve quality information on how to measure progress.

Technology appraisals Technology appraisals are recommendations on the use of new and existing medicines and treatments within the NHS. These can be:
- Medicines, medical devices (hearing aids or inhalers)
- Diagnostic techniques
- Surgical procedures
- Health promotion activities

Clinical Knowledge Summaries These have prescribing information within them relating to specific conditions/diseases and the drugs administered/considered for treatment

Medicines and Prescribing A comprehensive suite of guidance, advice and support for delivering quality, safety and efficiency in the use of medicines. Includes information about EVIDENCE SUMMARIES designed to help commissioners and budget holders make the right decision about the introduction of new medicines, provides information into how the best available evidence is summarised for licensed, off-label and unlicensed medicines. Here is where you will find out how evidence is reviewed, focusing on the clinical effectiveness of medicines.

Medicines optimisation: key therapeutic topics [JAN 2017] Topics covered...

British National Formulary Available in digital & print for health and social care professionals.

latest updates BNF link
latest updates BNFC link

NICE BNF & NICE BNFC apps

Want to access the BNF on your mobile or tablet? Download the NICE apps.

Unlike the print BNF, they are updated monthly, making them the easiest way to keep up-to-date. They can be used without an internet connection on your mobile or tablet. They are free for:
- health and social care professionals who work for or are contracted by the NHS in England, Scotland and Wales
- students who are studying on NHS-commissioned courses such as medicine or nursing.

You will need an Athens account to access the apps.
Free download on iTunes NICE BNF NICE BNFC & Google Play NICE BNF NICE BNFC

NICE Bites—THE LATEST NICE BITES

NICE Bites is a monthly prescribing bulletin from the North West Medicines Information Centre which summarises key prescribing points from NICE guidance. Spondyloarthritis in over 16’s: diagnosis and management. Antimicrobial stewardship: changing risk-related behaviours in the general population

Commentaries

Process overview: development of NICE guidelines In Prescriber [Feb 2017] This article provides an overview of the whole process of guideline development from start to finish, including an inside view from a former NICE guideline committee chair.

Proposals on faster NHS access to new medicines In Prescriber [Feb 2017] NICE and NHS England are consulting on changes to the way new treatments are appraised so that patients get access to the most cost-effective treatments much faster.
New Books in the library

Wiley Medical & Nursing Collection

The Wiley Medical & Nursing Collection brings together over 400 premium healthcare journal titles. The library has signed up to a trial until the end of May 2017, with a view to purchase. The content includes the Journal of Advanced Nursing, British Journal of Surgery, and BJOG to name a few. The complete list can be viewed here.

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Resource suggestions

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About any books/journals you feel would be useful to your professional development or within your work. Also any ideas for content within this publication, is there anything that you can think of that would be good to include here?

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We now subscribe to the Adverse Drug Reaction Bulletin

Short but sweet each bulletin provides comprehensive coverage in the field of adverse drug reactions. Each issue contains an invited article on a topic of current interest, dealing with specific conditions from drug-induced lung disorders to drug-induced sexual dysfunction, or types of drugs from lipid-lowering agents to poisons antidotes. This bimonthly journal’s articles are timely, succinct and fully referenced - you will need an NHS Athens account to access the content.

Finally...about the content of the bulletin

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Helen Rotherforth [librarian]

Helen.rotherforth@midyorks.nhs.uk