Clopidogrel and PPIs:
Several studies have recently suggested that clopidogrel is less effective in preventing the recurrence of unstable angina, heart attack and stroke in patients who are also taking a PPI.

PPIs reduce the conversion of clopidogrel to its active form by competitively inhibiting the CYP450 isoenzyme 2C19. It is as yet unclear whether the varying affinity for CYP2C19 means that the interaction is a class effect although it is known that all 5 UK licensed PPIs inhibits CYP2C19. One study clearly shows a reduction in the effectiveness with omeprazole but there is not enough data available to make any conclusions to the effectiveness of other individual agents.

On evaluation of the data the Committee for Medicinal Products for human use (CHMP) have recommended that the product info for all clopidogrel containing medicines be amended to discourage concomitant use of PPIs unless deemed necessary. Other medicines that inhibit CYP2C19 include fluoxetine, fluconazole, ciprofloxacin, cimetidine, carbamazepine and chloramphenicol.

The need for PPI therapy in patients on clopidogrel should be reviewed on an individual patient basis, depending on the balance of gastro-intestinal and cardiovascular risk. Concomitant use should be avoided unless considered essential. Alternative options for gastro-protection include H2 antagonists and antacids.

Topical Ketoprofen:
Ketoprofen gels are licensed for the relief of the pain, inflammation, and stiffness associated with non-serious arthritides, sports injuries, sprains, and strains. Healthcare professionals are reminded about the potential for photosensitivity reactions in users of topical ketoprofen, and are asked to report, or encourage the user to report, any such reactions to the MHRA using a Yellow Card. Topical ketoprofen users should avoid direct sunlight, ultraviolet rays, and sunbeds or sunlamps. Ketoprofen should be stopped and medical attention sought if skin reactions develop. Caution should also be exercised for 2 weeks after treatment has been stopped.

European Medicines Agency (EMEA): Safety of insulin glargine:
Following a review of all available information on a possible relationship between insulin analogues, i.e. insulin glargine, and the risk of cancer, the EMEA’s Committee for Medicinal Products for human use (CHMP) concluded that the available data does not provide a cause for concern and that changes to the prescribing advice are therefore not necessary. Concerns over a possible relationship between these medicines and cancer, in particular breast cancer, were raised by four recently published registry studies. The Committee carried out an in-depth review of these studies and their outcomes. Due to methodological limitations the studies were found to be inconclusive and did not allow a relationship between insulin glargine and cancer to be confirmed or excluded. In addition, the Committee noted that the results of the studies were not consistent.

Reporting suspected side-effects to H1N1 swine ‘flu antivirals:
A new system is now in place for reporting suspected side-effects to the H1N1 swine ‘flu antivirals. The MHRA, who are responsible for ensuring that medicines and medical devices in the UK work and are acceptably safe, collect information on suspected side-effects from healthcare professionals and members of the public via their Yellow Card Scheme. However, a separate system has been implemented for reporting suspected side-effects to Tamiflu and Relenza - the Swine Flu ADR Portal. (www.mhra.gov.uk/safetyinformation)
All healthcare professionals have been issued with a letter providing them with information about the new Portal and how to report any suspected side-effects to the anti-virals.

Anti-viral scripts for Tamiflu:
• Ensure you are using the most recent guidance circulated (HPA prescribing guidance: Treatment phase v1.5, 7 July 2009.)
• Ensure NO other items are on the script.
• Oseltamivir liquid is ONLY to be used in children <1yr old. In other situations the capsules can be opened
• Please check your patients know where their nearest antiviral collection point is and ask them to send a ‘flu friend’ to collect their Tamiflu.

Swine ‘flu Vaccination: Adrenaline ‘shock kits’ for anaphylaxis
In preparation for vaccination for swine ‘flu we would like to ask GP practices, Community Nurses and other clinical providers to ensure that adrenaline is available (and in date) in all clinical areas where vaccinations are currently or could potentially be administered. Vaccines are anticipated to arrive towards the end of August and we will circulate more information as it becomes available.

New look Prescribing Team:
To reflect our role within the PCT and in line with our new structure we will from now on be known as the Medicines Management Team. Our contact details remain the same and we all continue to work directly under Stuart Lakin, Head of Medicines Management. If you are unclear or unaware of who your medicines management link pharmacist or technician is please contact our office at Nine Trees: 01709 302631 or alternatively visit the intranet: Prescribing and Medicines Management, where you can access a more detailed structure of our team including contact details for pharmacists linked to specific clinical areas. Remember all our policies / procedures and guidelines can be accessed on the intranet too!

Rotherham does it’s a knockout sponsorship
A big thank you to all our sponsors for the ‘It’s a Knockout’ event…..we surpassed our own expectations and came a very respectable 2nd out of 10!
Rotherham has operated a minor ailment scheme since summer 2005. The original scheme involved a limited number of conditions but has established the methodology behind the scheme. The scheme is due to be re-launched in the very near future re-branded as ‘Pharmacy First’ and will now see the number of conditions treatable under the scheme expanded to 23. Operation of the existing scheme has shown that the costs of the scheme are relatively low and the strict formulary ensures that all supplies are cost effective and evidence based. A significant amount of GP time is taken up dealing with patients suffering from minor ailments and that the management of self-limiting minor ailments may be successfully transferred from general practice to community pharmacy resulting in reduced GP workload.

The re-launched scheme will be available from the 1st October to all patients who are registered with a Rotherham GP and is currently provided by most pharmacies within Rotherham. The scheme is specifically aimed at patients who don’t pay for their prescriptions who would normally consult a GP to get a prescription as they will receive treatment free of charge through the scheme. In accessing the scheme this will reduce consultations for minor ailments from GP surgeries. Patients who pay for their prescriptions may already be purchasing items available under the scheme as the majority of the items are cheaper than paying a prescription charge. These patients are able to be assessed using the same protocols and will be able to purchase the items over the counter. All patients will be able to be referred into the scheme, see flowchart below.

The following conditions will be available to be treated through the scheme when it is fully re-launched and we will post details of when this will be as soon as it is available.

- Cough
- Diarrhoea
- Hayfever
- Athlete’s foot
- Common cold
- Cystitis in women
- Haemorrhoids
- Preconception
- Dermatitis
- Vaginal thrush
- Warts & Verrucas
- Conjunctivitis
- Fever in children
- Constipation
- Head Lice
- Indigestion
- Cold Sores
- Nappy rash
- Scabies
- Acne

For further details please contact Sue Paddock on 01709 302646 or 07920286587

---

**Minor Ailments Management Service Process Flowchart**

- **Patient**
  - **GP Practice**
    - Assess Patient for suitability for MAS
      - YES
        - Offer Patient Referral to Pharmacy
          - NO
            - DO GP Appointment
      - NO
      - Is patient exempt from Rx charges?
        - YES
          - Conduct MAS Consultation in Pharmacy
        - NO
          - Offer advice and recommend OTC/P med sale if appropriate
            - NO
              - OR GP appointment
            - YES
              - Pharmacist provides advice and recommends treatment where appropriate (using MAS formulary)
    - Using GP Surgery Guide
  - GP Surgery Process
  - Pharmacy Process

---