



December 2009

METFORMIN SACHETS: It has recently been highlighted that metformin sachets are a more cost effective option for patients with swallowing difficulties than metformin oral solution. Metformin sachets should therefore be prescribed in preference to liquid where possible.

Formulation	£ per 500mg
Metformin sachets	0.11
Metformin 500mg/5ml soln	3.10
Metformin 500mg tabs	0.04

CLOPIDOGREL AND PPIs – POSTSCRIPT EXTRA: [Postscript Extra number 16](#) is now available on the formulary website. This provides a summary of the background to the new MHRA advice that proton pump inhibitors (PPIs) and clopidogrel should not be used concomitantly unless necessary. The bulletin also provides guidance on how to manage particular patient groups prescribed both a PPI and clopidogrel.

ORDERING STOCK FOR POLICE SURGEON WORK: The CD team have been reviewing GP10A stock orders for large quantities of diazepam and dihydrocodeine. Several practitioners have stated that this is for use in their work as police surgeons. At a recent meeting John McCoach, the service co-ordinator, confirmed that it is Strathclyde Police policy that these drugs must not be provided from NHS stock. All stocks should be ordered privately and an invoice for the costs presented to police for payment. Please remember the same is true for any other non-NHS services such as providing medical cover for sporting events, concerts etc.

HOLIDAY ADDICTIONS SERVICES: There are more “take-home” methadone doses than usual during Christmas and New Year. Most

community pharmacies (not those in Health Centres) will be open on the Saturdays (26th of December and 2nd January). Please remind patients of



the importance of safe storage of methadone and the risks of overdose with alcohol. It should be kept out of reach and out of sight, locked away if possible. Controlled drug prescriptions for instalment dispensing must state the amount to be supplied per instalment and the interval between instalments. Directions for take home instalments must be unambiguous. The wording approved by the Home Office for supervised consumption is included on the stamps recently supplied:

“Instalments due on the days when pharmacy is closed should be dispensed on the day immediately prior to closure. Supervised consumption of daily dose on specified days: the remainder of supply to take home. If an instalment prescription covers more than one day and is not collected on the specified day, the total amount prescribed less the amount prescribed for the day(s) missed may be supplied.”

For more information on addictions services, please contact Carole Hunter, Jennifer Kelly or MaryClare Madden on 0141 276 6600.

SELF-MONITORING OF BLOOD GLUCOSE FOR NON-INSULIN TREATED TYPE 2 DIABETES: NHS Quality improvement Scotland (NHSQIS) prepared an [evidence note](#) summarising recent evidence on the safety and clinical and cost-effectiveness of patient self-monitoring of blood glucose for non-insulin dependent type-2 diabetes mellitus. The evidence suggests that “self-monitoring may lack significant benefit, with little or no effect on glycaemic control and is unlikely to be clinically or cost-effective in addition to usual care”. The Scottish Health Technologies Group (SHTG) has asked that the findings from this evidence note be applied to practice and that patients with type-2 diabetes not on insulin should be reviewed to identify whether they can stop self-monitoring as “it is not in the interest of the patient or NHS Scotland to undertake unnecessary monitoring”.

INDICATOR FEEDBACK FROM 2008/09

This is the first in a series of reports of the results of the Rational Prescribing Scheme (RPS) indicators for last year.

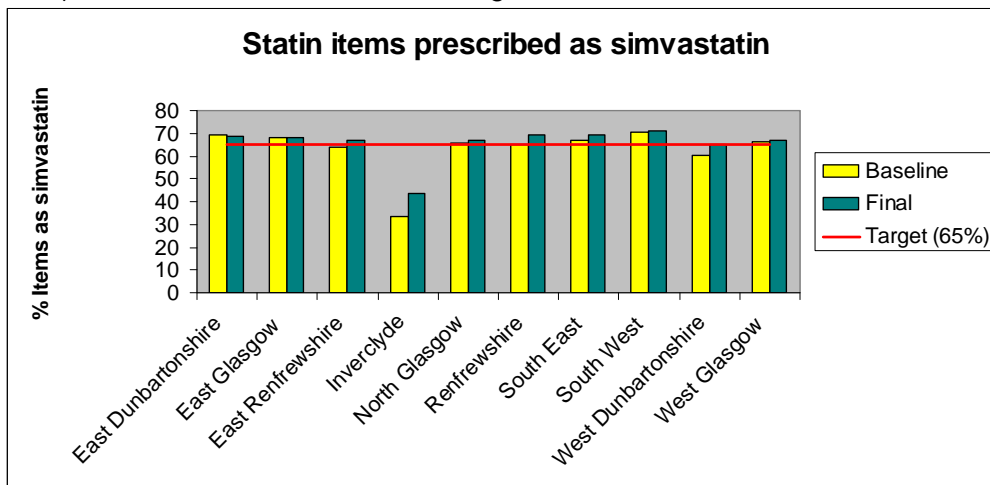
STATINS:

Simvastatin is the preferred statin for first line use in both primary and secondary prevention of coronary heart disease and stroke both in the local cholesterol guidelines and in the national SIGN guideline number 97.

One of the RPS indicators for last year was:

Simvastatin should account for at least 65% of all statins prescribed (or an absolute increase of 10% from baseline).

The following chart illustrates the change in prescribing rate between the RPS baseline (October to December 2007) and the final measurement using data from October to December 2008:



This indicator saved NHSGG&C approximately **£942K** during 2008/09.

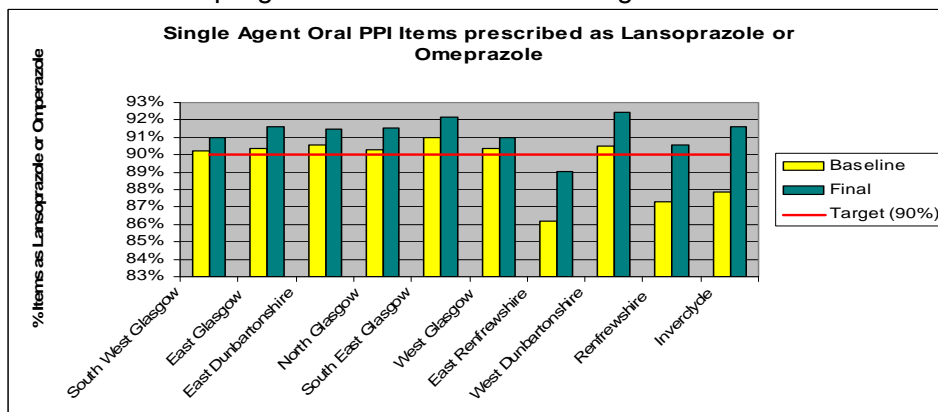
PPIs:

Lansoprazole and omeprazole are the proton pump inhibitors on the preferred list of the formulary. They are the two most cost-effective PPIs.

One of the RPIs for 2008/09 was:

Lansoprazole and omeprazole (excluding Fastabs and MUPS) should account for at least 90% of all single agent oral PPIs.

The following chart illustrates progress for this indicator during 2008/09:



This indicator saved NHSGG&C approximately **£441K** during 2008/09.