



Medicines Matters



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Welcome to Medicines Matters! This bulletin is published regularly for all groups of staff working within the diverse range of services within Coventry & Warwickshire Partnership Trust. The bulletin aims to update staff on matters related to the Trust's Medicines Policy, and to highlight issues of current therapeutic interest. Electronic copies are available on the Trust internet. Underlined words are hyperlinks to relevant documents.

Current Therapeutic Interest

Drugs and Therapeutics Updates

The recent November Drugs and Therapeutics Meeting has seen the reapproval of Medicines Manual Guidance (MMG) documents. This is a summary of the key changes for awareness:

- **MMG 11 - Guidance for Administration of Medicines**
New wording supporting: where doses are spat out (7.4.14), splitting tablets (7.4.4.1) and omitted doses (15.8). Competency tool updated.
- **MMG 32 - Guidance for The Use of Antibiotics**
Updated links. We continue to hear about the [rise of antibiotic resistant infections](#). Make sure to follow good practice antibiotic prescribing to optimise antibiotic efficacy

Reporting Medicines Incidents - Staff are encouraged to [report all medicines incidents and near misses](#). This helps support trust learning, ensuring we can review and update our practices to optimise patient safety. We are encouraged that most incident reports are associated with no or low harm outcomes.

Aripiprazole Long Acting Injection - a new 2 monthly long acting depot injection has been recently launched. We will be working across the Trust to provide education and support around the introduction of this preparation. The new 2 monthly preparation will only be considered for patients already stabilised on the monthly formulation for ≥6months. It is for gluteal administration only. It comes with the confusion that it will be known as Abilify Maintena—whilst the existing monthly depot will be rebranded as Aripiprazole Otsuka.

- **Be aware** there may be a mixture of Abilify Maintena products supplied initially, as the names are rebranded, so **ensure the dose and frequency of the product is checked carefully**

Propranolol in anxiety: poor evidence for efficacy and toxicity in overdose D&T revisited the 2020 [Healthcare Safety Investigation Branch](#) report highlighting the toxicity risks associated with propranolol in overdose. Propranolol is increasingly prescribed by GPs for anxiety, either taken regularly or as-needed, but many practitioners may not be aware of its toxicity in overdose or the lack of evidence for efficacy. Following the death of a young person ingesting an overdose of propranolol tablets a [Prevention of Future Deaths report \(November 2024\)](#) has further highlighted the dangers of propranolol. The coroner concluded that

"My concern is that Propranolol continues to be a drug which is widely prescribed, and often to young people reporting symptoms of anxiety, but that there continues to be an under-appreciation of the level of risk posed by an elevated level of propranolol medication can be."

Please carefully review all propranolol prescribing to ensure it is appropriate and appropriately monitored

Good Practice Points for Local Action

➤ **Monitoring for Adverse Effects.**

Whenever a new medication is introduced or a dose is increased, it is important to be **alert to and monitor for any adverse effects**. This information should also be discussed and shared with patients. Patient information leaflets are provided on dispensing. [MMG35 Providing Information to Patients about Medication](#) supports the process of choosing appropriate information to help facilitate choice and concordance. This includes reference to [Choice and Medication](#), an excellent resource for patient information on medicines for Mental Health and Learning Disabilities.

- Aripiprazole has been linked to impulsive behaviours including gambling disorder and pathological gambling. This has been reported in patients with and without a history of such disorders; the majority were reported to resolve upon dose reduction or treatment discontinuation. Concerns have also been raised with the MHRA about a lack of awareness of this issue, especially when gambling is a recognised common risk factor linked to suicide. Healthcare professionals are advised to counsel patients and their carers about this risk and to be alert for the development of new or increased urges to gamble and other impulse control symptoms, such as excessive eating or spending, or hypersexuality. The prescriber should consider reducing the dose or stopping the drug if these symptoms occur.

- **For awareness:** Currently some medicines (including lorazepam and diazepam) are being monitored by Medicines Management on certain wards. Ensure all medicine deliveries are checked, stored correctly and administrations documented.

➤ **Ordering Nutrition Supplements**

Any inpatient areas requiring standard nutrition supplements (e.g Fortisip, Fortijuice, thickener) are reminded that these should be routinely ordered from NHS Supplies (allowing time for delivery).

Focus - Clozapine - Recently published studies:

Clozapine, relapse, and adverse events: a 10-year electronic cohort study in Canada. Clozapine is the most effective medication for treatment-resistant psychoses, but the balance of benefits and risks is understudied in real-world settings. This study aimed to examine the relative re-hospitalisation rates for mental health relapse and adverse events associated with clozapine and other antipsychotics in adult and child/youth cohorts. The study (n=45,616 adults; 1476 children/youth), concluded that clozapine was associated with a **14% lower relapse rate vs other drugs** (aHR 0.86, 95% CI: 0.83–0.90) but also to a **higher risk of adverse events** (HR 1.34, 95% CI: 1.18–1.54). In children/youth, clozapine was associated with a 38% lower relapse rate compared with other antipsychotic medications (0.62, 95% CI: 0.49–0.78) over the follow-up period. [Source: British Journal of Psychiatry](#)

Mortality associated with clozapine: what is the evidence?

An article published in the [British Journal of Psychiatry](#) suggests the relative risk of fatality with clozapine is overestimated, and overall, it lowers mortality partly by reducing schizophrenia-related suicides. It suggests clozapine should be used earlier and more widely, but with better monitoring and management of toxicity. See our [Trust Guidance](#) for **initiation and monitoring**.

- For further information / comments / queries please contact the Medicines Management Team at Wayside House on 024 76536836
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This audit is undertaken annually to assure and sustain compliance and improvement regarding the safe and secure handling of medicines within the Trust. 36 standards are audited to give assurance of medicines handling in line with our Trust's Medicines Policy (based on National Guidance).

In 2023 76 Trust areas were reviewed and included in the audit during this audit timeframe (some locations have left the Trust this year). The full audit proforma was completed for 66 of these areas who reported holding medications (ordered/ stored/admin/ disposed of by the team/unit/service).

Trust Area	Number of Areas reviewed against the Audit Proforma	Number of Areas completing the full audit proforma, holding medications	Number of Areas completing the audit proforma <i>not</i> holding medications
Mental Health (MH)	33	33	
Community Health and Wellbeing (CHWB)	17	14	3
Learning Disability (LD) and Autism	16	15	1

Observations and Conclusions

This audit gave evidence that Coventry and Warwickshire Partnership Trust areas are working closely to the expected standards for the Safe and Secure Handling of Medicines

It was encouraging that the 2023 re-audit showed similar adherence patterns across a number of standards compared to previous year and with improved adherence in 11/36 standards compared to 2022. 30/36 standards were rated as 'Good Adherence' or 'Standard Met'. Positive Points of note:

- ✓ **Standard Met" (100% compliance) was achieved in 12 standards**
- ✓ **Good Adherence" (85-99% compliance) was achieved in 18 standards**

Two standards struggled to be met but there were accommodating factors to explain the situation or the significance of the result. Simple changes to practice will help to ensure that these standards continue to improve.

- **Standard 22. (The room temperature has stayed $\leq 25^{\circ}\text{C}$ during the last 4 weeks).** Whilst twelve areas were non-compliant to this standard with occasions where temperatures exceeded 25°C there was evidence that the process in the temperature monitoring SOP was followed where applicable in most areas.

Remember to keep air conditioning on, and keep windows shut.

- **Standard 25 (All medicines with shortened expiry dates are clearly marked with the date opened).** There has been a 14% improvement in compliance to this standard during the audit but still needs some improvement. There is supporting guidance in MMG4. The Medicines Management Team will continue to help support clinical areas to improve the standard.

Remember to add the date on "Date opened" stickers.

As in the 2022 report, two standards are noted as a concern and these require focus and support to ensure that governance improves in these areas.

Standard 31

The Trust approved "Fridge Temperature Record Sheet" is used to document daily readings.

Whilst ten areas were non-compliant to this standard with non-Trust approved record sheets being utilized to record fridge temperatures occasions. The fridge temperatures were being recorded in all units therefore ensuring the safety and integrity of the medicines stored within the fridges. The Medicines Management Team will help support clinical areas



[Fridge monitoring Procedure](#)

Standard 36

Trust approved Medicines Waste Bins to only contain pharmaceutical waste.

All areas need to remember to refer to the **waste posters** which describe the functions of the different types of waste bins.

Contact Medicines Management when there are concerns/queries.

Trust Guidance on [Pharmaceutical Waste](#) is available on the CWPT's Medicines Management Webpages.

Clinical staff using these bins need to be aware of their accountability for correct disposal of waste.



The **Medicines Management Team** will continue to work closely with all Trust units giving advice and guidance with regard to the safe and secure handling of medicines as necessary.

Please contact the team if you have any questions/need additional support. We are here to help!

The full report is available on request

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