

## Important New Evidence Service

In partnership with The Centre for Medicines Optimisation at Keele University



### ScriptSwitch® monthly summary – May 2025

## Monthly news update

**Welcome to the KINES Monthly News Update for May 2025.** Other [KINES Rapid Updates](#) published this month have discussed the following (*ScriptSwitch users, please [login](#) or [register](#) to access [KINES articles online](#)*):

- An open-label, [cluster-randomised trial](#) involving nearly 34,000 people aged  $\geq 40$  years with uncontrolled hypertension in rural China has found that an intervention involving antihypertensive medication titrated by a trained non-physician community health-care provider (to target BP  $<130/80$  mmHg), alongside health coaching on lifestyle changes, reduced the risk of all-cause dementia (the primary outcome) by 15% over a 48-month period compared with usual care (risk ratio [RR] 0.85,  $p = 0.0035$ ). Furthermore, cognitive impairment without dementia (CIND) was reduced by 16% (RR=0.84,  $p < 0.0001$ ). Systolic BP was reduced by 22.0 mm Hg and diastolic BP by 9.3 mm Hg in the intervention group compared to the usual care group. The findings add to the evidence that optimising blood pressure control in people with hypertension may improve health outcomes.
- A [retrospective case series](#) looked at coroners' Prevention of Future Deaths (PFDs) reports to identify where repeat prescribing processes contributed to medicines-related deaths. The investigators looked at all PFDs for a four-year period between January 2019 and December 2023 that reported a medicines-related death and involved repeat prescribing. Thematic analysis of the text of the reports identified key common themes. The authors found 24 reports that related to medication repeat prescribing out of a total of 277 reports due to alcohol, drug or medication-related deaths; the most frequently reported drug class was opioids (76%). One third of the included PFDs described multiple repeat prescriptions (multi-drug toxicity) or medicines taken alongside acute prescriptions or over-the-counter medications. From textual analysis of the reports key themes were errors or discrepancies at the point of a transfer of care; the ability to obtain repeat prescriptions from multiple medication sources; and the absence of robust medication review, with the absence of review being the most commonly linked to patient deaths.

## DHSE/UKHSA/NHS England

- This month, UKHSA reported an [increase of 33% in Clostridioides difficile infections \(CDI\)](#) in the period 2020/21 to 2023/24. Increases are observed in both hospital- and community-onset CDI cases, and across all age groups and sexes. All 7 UKHSA regions have seen an increase in counts and rates between financial year 2020 to 2021 and calendar year 2024 but to differing extents.
- Following advice from the the Joint Committee on Vaccination and Immunisation (JCVI), the NHS is to implement [routine mpox and gonorrhoea vaccination programmes from 1 August 2025](#). Both programmes have similar eligibility criteria and are primarily aimed at gay, bisexual and other men who have sex with men (GBMSM) who meet the eligibility criteria and are at highest risk of exposure to these infections. Full details of eligibility criteria will be made available in in the mpox and gonorrhoea chapters of the [Green Book](#).
- NHS England [reported this month](#) that 900,000 adults at high risk of developing type 2 diabetes have started using the [NHS Healthier You programme](#) since its launch in 2016. Research by Manchester University found that completing the Healthier You Programme reduces someone's chance of developing Type 2 diabetes by 37%, and participants typically achieve an average weight loss of 3.3kg.
- A [new feature in the NHS App](#) enables patients to track their prescriptions more easily and is intended to reduce calls to pharmacies; an estimated 45% of patient calls to pharmacies are about progress on prescriptions. The service is now available from 1,500 high street pharmacies, and the service is expected to be made available to nearly 5,000 more pharmacies over the next 12 months – covering 60% of those in England.

## Other

- The Royal Pharmaceutical Society has published a [Greener Pharmacy Toolkit](#) this month. Guides are available for [hospital pharmacy](#) and [community pharmacy](#) in England. Community pharmacies in Wales are referred to the [Greener Primary Care Wales Framework and Award Scheme](#) from Public Health Wales. The Guides outline three levels (bronze, silver, or gold) of actions to make pharmacies more sustainable across six domains: people, clinical practice, operations and strategies, resource use, ICT and travel. Simplified checklists are also available for [hospital pharmacy](#) and [community pharmacy](#). Hospital pharmacies in England can use the guide and toolkit to collect data contributing to their Trust's Green Plan as set out in the 2021/22 NHS Standard Contract. Some of the suggested actions align with [NHS England's CQUIN](#) indicators and metrics.
- May is Lyme Disease awareness month and the charity Lyme Disease UK ran their annual [Be Tick Aware Campaign](#). Information is available on how to [prevent tick bites](#), how to safely [remove ticks](#), and the importance of early [treatment](#) for people who become unwell, following a bite.

## MHRA

- In this month's [MHRA Safety Roundup](#):
  - infrequent reports of anxiety, low mood, sleep disturbance, poor concentration, and forgetfulness in people with cystic fibrosis treated with [Kaftrio ▼ \(lvacaftor, tezacaftor, elexacaftor\)](#). Healthcare professionals are advised that:
    - individuals with life-limiting conditions such as cystic fibrosis also have an increased background risk of developing poor mental health
    - there is also an indirect risk of psychological side effects from difficulty adjusting to Kaftrio-related improvements to physical health and quality of life
    - advise patients and their caregivers to be alert to the development of psychological side effects usually within the first three months of treatment including anxiety or low mood, sleep disturbance, poor concentration, or forgetfulness. The side effects may occur in people who have no history of these problems
    - Side effects in children may manifest as persistent changes in behaviour e.g. being more disruptive
  - There have also been rare reports of [Intrahepatic cholestasis of pregnancy \(ICP\) in patients treated with azathioprine products](#). The risk applies to azathioprine, mercaptopurine and tioguanine. Healthcare professionals are advised that:
    - Cholestasis of pregnancy associated with thiopurines may occur earlier in pregnancy than non drug-induced cholestasis of pregnancy, and it may not respond to ursodeoxycholic acid
    - withdrawal or dose reduction of the thiopurine drug may improve liver function tests
    - advise patient to report symptoms of cholestasis of pregnancy which include intense itching without a rash, nausea, and loss of appetite; discuss any concerns with clinicians managing the patient's immunosuppressant therapy and a hepatologist, as necessary
    - if cholestasis of pregnancy occurs, consider the risks and benefits of remaining on the product against the risks and benefits of stopping.
    - in patients with ICP, measure serum bile acids to identify pregnancies at particular risk of spontaneous preterm birth ( $\geq 40\mu\text{M}$ ) or stillbirth (non-fasting serum bile acids  $\geq 100\mu\text{M}$ )
- The European Medicines Agency has published measures to minimise risk of suicidal thoughts with [finasteride and dutasteride medicines](#). This is similar to advice published by the MHRA last year about [finasteride](#) but also includes precautionary advice about dutasteride, which works in the same way.
- A message from the [Chief Medical Officer](#) alerts that with the ending of the 2024/25 influenza season:
  - GPs and other prescribers working in primary care should no longer prescribe antiviral medicines (including neuraminidase inhibitors) for the prophylaxis and treatment of influenza on an FP10 prescription form.
  - Community pharmacists should no longer supply antiviral medicines in primary care on presentation of an FP10 prescription form.

## Medicines Update

- **Product discontinuation:**
  - The brand [Nystan® 100,000units/ml oral suspension \(ready mixed\)](#) (Vygoris Ltd) has been discontinued. Zydus Pharmaceuticals UK Ltd has introduced a generic version of Nystatin 100,000units/ml oral suspension, which is available to order from wholesalers.
- **Medicines supply notifications:**
  - [Buprenorphine \(Reletrans®\) 5 micrograms/hour and 15 micrograms/hour transdermal patches](#): are out of stock until early July 2025. Alternative brands of buprenorphine matrix patches (Bunov®, Buteo®, BuTrans®, Rebrikel® and Sevodyne®) remain available and can support increased demand

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- [Lidocaine \(Xylocaine®\) 10 mg/dose spray sugar free](#) is out of stock from mid-May until late June 2025.
  - Lidocaine 50mg/g / Cetrimide 1.5mg/g (Xylonor®) gel sugar free remains available and can support an increase in demand.
  - Lidocaine 5% / Phenylephrine 0.5% nasal spray, and Lidocaine 150mg/g / Cetrimide 1.5mg/g (Xylonor®) oromucosal spray sugar free remain available but cannot support an increase in demand.
- [Tolterodine 2mg and 4mg modified-release capsules](#) are in limited supply until mid-August and mid-September 2025, respectively.
  - Tolterodine 1mg and 2mg immediate release (IR) tablets remain available and can support increased demand.
  - Alternative once-daily antimuscarinics also remain available and can support increased demand.