South Yorkshire Integrated Care Board
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Our Ref: DC/NB

10th September 2025

To: Prescribing Clinicians and Pharmacists within the Barnsley locality

Dear Colleague

Re: Summary of Key Points from the Barnsley Area Prescribing Committee Meetings on 9th July and 13th August 2025.

The main outcomes of the meetings were: -

Prescribing Guidelines

Barnsley Asthma Guideline [MINOR UPDATES]
The guideline, which has been uploaded to the new South Yorkshire Medicines Optimisation website, has received minor updates including:

- Minor additions to the 'when to refer' box on page 3.
- Treatment Algorithm 1 – Flexible Regimen (for Adults and Children 12+) – page 4:
  - Fobumix® Easyhaler DPI 160/4.5 added to the guideline as the first line option for Anti-Inflammatory Reliver (AIR) therapy following the license extension earlier this year. Fobumix® Easyhaler 160/4.5 has a 23% lower acquisition cost than Symbicort® Turbohaler 200/6 and remains the first line budesonide/formoterol dry powder inhaler on the Barnsley formulary.
  - Addition of wording to Luforbec® pMDI to note usually prescribed to be administered via a spacer device.

Amber G / Shared Care Guidelines

Barnsley DMARDs Shared Care Guideline for the prescribing of disease modifying antirheumatic drugs (DMARDs) in rheumatology patients **[MINOR UPDATE]**

The DMARDs Shared Care Guideline has undergone a further minor update:

- The following information has been added to the hydroxychloroquine section: It is recommended that the SNOMED code 1104901000000103 for hydroxychloroquine retinopathy screening is added to the patient's record when they have had their retinal screening.

The updated guideline will be uploaded to the South Yorkshire ICB Medicines Optimisation website in due course.

Barnsley Shared Care Guideline for Antipsychotics in Adults [UPDATED]
The guideline has undergone a routine update. The updated guideline includes the addition of a shared care agreement form.

The updated guideline will be uploaded to the South Yorkshire ICB Medicines Optimisation website in due course.

South Yorkshire Metolazone (Xaqua®) for Oedema related to Kidney Disease and Congestive Heart Failure (CHF) Amber-G guideline.
The South Yorkshire Metolazone Amber-G guideline is now available on the SYICB Medicines Optimisation website and this supersedes the previous Barnsley Place Amber-G guideline.

Other

SYICB Medicines Optimisation Website (NEW)
Committee members were informed that a new South Yorkshire Medicines Optimisation website was scheduled to be launched at the beginning of September. The website is now available and a briefing and user guide document, video demo and feedback form can be accessed via the support and feedback section on the home page of the website https://mot.southyorkshire.icb.nhs.uk/.

The South Yorkshire Medicines Optimisation Team will be uploading all medicines optimisation related documents to this central website going forward, for example clinical and prescribing guidelines and amber G/shared care guidelines (including place based guidelines such as those endorsed by the Barnsley Area Prescribing Committee or other local place based prescribing committee or group, and South Yorkshire wide guidelines endorsed by the South Yorkshire Integrated Medicines Optimisation Committee), Area Prescribing Committee minutes and memos and medicines optimisation bulletins and briefings.

The Barnsley section of the SYICB Medicines Optimisation website is prepopulated to search for both Barnsley place and South Yorkshire wide documents.

The links to local guidelines within ScriptSwitch and the Barnsley Area Joint Formulary are also in the process of being updated.

Healthcare professionals (including primary and secondary care clinicians and community pharmacists) are encouraged to report any medicines related interface issues (examples include shared care, prescribing guideline, formulary or discharge related issues), particularly where guidelines are not being complied with, to the following email address: BarnsleyAPCReport@nhs.net.

Barnsley Formulary Updates

The Committee noted the traffic light classifications recently assigned by the South Yorkshire Integrated Medicines Optimisation Committee (IMOC) and the following formulary positions were agreed by the Committee:

Drug	Formulary Indication	Barnsley Formulary status (including traffic light classification)
Horizon Scanning July 2025 IMOC		
Ruxolitinib cream	Treatment of non-segmental vitiligo with facial involvement in adults and adolescents aged ≥12 years	Non-formulary grey
Sumatriptan and naproxen combination	Acute treatment of the headache phase of migraine attacks with or without aura in adults where treatment with a mono-entity product has been insufficient	Non-formulary grey It is more cost-effective to prescribe generic sumatriptan and generic naproxen separately.

Sildenafil (new orodispersible tablet formulation)	Use in adult men with erectile dysfunction	The formulary has been updated to note that sildenafil orodispersible tablet formulation has a significantly higher cost than the standard sildenafil generic tablets.
Horizon Scanning August 2025 IMOC		
Chikungunya vaccine	Active immunisation for the prevention of disease caused by chikungunya virus	Non-formulary grey MHRA update June 2025: IXCHIQ Chikungunya vaccine: temporary suspension in people aged 65 years or older - GOV.UK
Escitalopram (new orodispersible tablet formulation)	Treatment of major depressive episodes, panic disorder with or without agoraphobia, social anxiety disorder (social phobia), generalised anxiety disorder and obsessive-compulsive disorder in adults	The formulary has been updated to note that escitalopram orodispersible tables (and oral drops) have a high cost compared with the standard generic tablets.
Other		
Linzagolix	Indicated in adult women of reproductive age for: • treatment of moderate to severe symptoms of uterine fibroids • symptomatic treatment of endometriosis in women with a history of previous medical or surgical treatment for their endometriosis	Formulary red NICE TA1067 Linzagolix for treating symptoms of endometriosis NICE TA996 Linzagolix for treating moderate to severe symptoms of uterine fibroids
Shared Care Protocol for the Prescribing of Oral Antipsychotics in Adults (updated)		
Asenapine sublingual tablets	Indicated for the treatment of moderate to severe manic episodes associated with bipolar I disorder.	Formulary red (previously non-formulary red)
Cariprazine capsules	Indicated for the treatment of schizophrenia.	Formulary red (previously non-formulary red)
Lurasidone tablets	Indicated for the treatment of schizophrenia.	Formulary red (previously non-formulary red)
Paliperidone prolonged release tablets	Indicated for the treatment of schizophrenia/schizoaffective disorder.	Prescribing is retained by the specialist. Classification to be determined by the SYIMOC.

MHRA Safety Roundup

The June and July 2025 MHRA Drug Safety Roundups can be accessed at the following links:
https://assets.publishing.service.gov.uk/media/685ab4e6e9509f1a908eb13b/June_Safety_Roundup.pdf
https://assets.publishing.service.gov.uk/media/68a83933bceafd8d0d96a0f3/July_Safety_Roundup.pdf

Issues relating to primary care:

Valproate (Belvo, Convulex, Depakote, Dyzantil, Epilim, Epilim Chrono or Chronosphere, Episenta, Epival, and Syonell▼): updated safety and educational materials to support patient discussion on reproductive risks

Updated safety and educational materials are now available to support the implementation of the regulatory measures announced in the November 2023 National Patient Safety Alert and the September 2024 Drug Safety Update. They also include previous updates to product information on the risk of low birth weight in children exposed to valproate during pregnancy.

Key Advice for Healthcare Professionals:

- updated safety and educational materials are now available to support healthcare professionals and patients to implement the existing regulatory requirements
- the updates reflect:
  - precautionary advice on the potential risk of neurodevelopmental disorders in children fathered by men taking valproate around the time of conception
  - a risk of lower weight at birth for the gestational age in children exposed to valproate during pregnancy
- healthcare professionals should review the new materials and integrate them into their clinical practice when referring patients and when prescribing or dispensing valproate

As a reminder

- valproate must not be started in new patients (male or female) younger than 55 years unless two specialists independently consider and document that there is no other effective or tolerated treatment, or there are compelling reasons that the reproductive risks do not apply
- valproate must not be prescribed to any woman or girl able to have children unless the conditions of the Pregnancy Prevention Programme (PPP) are followed
- as a precaution, recommend that male patients use effective contraception (condoms, plus contraception used by the female sexual partner) throughout the valproate treatment period and for 3 months after stopping valproate, to allow for one completed sperm cycle not exposed to valproate. For further information see the September 2024 Drug Safety Update
- report suspected adverse reactions associated with valproate on Yellow Card

Key Advice for Healthcare Professionals to Provide to Patients:

- do not stop taking valproate without advice from a specialist. This is because epilepsy or bipolar disorder may worsen without treatment
- women and girls who are able to have children and who are taking valproate must follow the conditions of the Pregnancy Prevention Programme
- as a precaution it is recommended that male patients taking valproate should use effective contraception (condoms, plus contraception used by the female sexual partner) throughout the valproate treatment period and for 3 months after stopping valproate
- if you are on valproate, please attend any offered appointments to discuss your treatment plan and talk to a healthcare professional if you are concerned. If you wish to discuss family planning, please contact a healthcare professional
- consult the Patient Information Leaflet and Patient guide for men or Patient Guide for women for information about the risks of valproate – also the MHRA information page for information resources

IXCHIQ Chikungunya vaccine: temporary suspension in people aged 65 years or older

The Commission on Human Medicines (CHM) has temporarily restricted use of the IXCHIQ Chikungunya vaccine in people aged 65 years and over following very rare fatal reactions reported globally. This is a precautionary measure while the MHRA conducts a safety review. The IXCHIQ vaccine will be available on the UK market from 18 June 2025.

Key Advice for Healthcare Professionals:

- Chikungunya vaccine (IXCHIQ) is a vaccine to protect against life-threatening Chikungunya virus infection; strict adherence to contraindications and precautions is essential to reduce the risk of very rare but potentially fatal adverse reactions
- following a review of the benefits and risks of the vaccine, CHM has made a recommendation to restrict use of this vaccine in individuals aged 65 years and older, while data is reviewed from global cases
- do not use this vaccine in people aged over 65 years for the period of the suspension the product information for the vaccine will not change during this suspension, but a letter for healthcare professionals will be circulated from the company in addition to this Drug Safety Update, to advise of the restrictions on those aged 65 and above

- XCHIQ vaccine is already contraindicated in all individuals with immunodeficiency or immunosuppression as a result of disease or medical therapy, this includes IgA deficiency
- patients who have received the vaccine should be advised to seek emergency medical attention if they develop signs or symptoms associated with viraemia, including arthralgia, or neurological symptoms including encephalopathy
- all patients who have received the vaccine should receive the manufacturer's patient information leaflet as part of the travel consultation
- further communications will be circulated to inform of the outcome of the review
- report suspected adverse reactions associated with the IXCHIQ vaccine on a Yellow Card

Key Advice for Healthcare Professionals to Provide to Patients:

- the Chikungunya vaccine is given to those who plan to travel abroad to certain regions, where the Chikungunya virus is present. Chikungunya virus is a potentially life-threatening viral infection
- a live attenuated Chikungunya vaccine, IXCHIQ, is coming to the UK market on 18 June 2025, it has not been available on the UK market before this time
- the IXCHIQ vaccine should not be used for people aged 65 years and over until MHRA has completed a full safety review. This is because there have been rare reports of serious side effects in this age group globally
- during your vaccine consultation you will be assessed by a healthcare professional for vaccine suitability, you will not be given this vaccine if you are aged over 65 years old, or if you are immunosuppressed or immunodeficient. Alternative vaccines are available for these groups
- if you have received a Chikungunya vaccine, you should seek urgent medical attention if you start to experience joint pain, fever, stiff neck or confusion

MHRA releases new guidance on GLP-1 medications, including the requirement for women to use effective contraception

The MHRA has released guidance, aimed at the public, on how to safely use GLP-1 medications (including Ozempic and Wegovy). The guidance advises that individuals of childbearing potential using GLP-1 receptor agonists should use effective contraception during treatment and for a specified period after discontinuation, due to limited safety data in pregnancy. Notably, tirzepatide (Mounjaro) may reduce the absorption of oral contraceptives, particularly in overweight or obese individuals. Therefore, it is recommended to use a non-oral contraceptive method, or add a barrier method, for four weeks after initiating tirzepatide and following each dose escalation. The guidance, which also advises on potential side effects of GLP-1s and the importance of sourcing GLP-1s from a legitimate pharmacy, will be continually updated as any new safety issues arise. Healthcare professionals may wish to direct patients to the MHRA guidance as a source of information. For further information on contraception and GLP-1s, healthcare professionals and patients may also wish to consult guidance from The Faculty of Sexual and Reproductive Health (FSRH).

Abrysvo▼ (Pfizer RSV vaccine) and Arexvy▼ (GSK RSV vaccine): be alert to a small risk of Guillain-Barré syndrome following vaccination in older adults

There is a small increase in the risk of Guillain-Barré syndrome following vaccination with Abrysvo (Pfizer respiratory syncytial virus (RSV) vaccine) and Arexvy (GSK RSV vaccine) in adults aged 60 years and older. Healthcare professionals should advise all recipients of Abrysvo and Arexvy that they should be alert to signs and symptoms of Guillain-Barré syndrome and, if they occur, to seek immediate medical attention as it requires urgent treatment in hospital.

There is currently no evidence of an increased risk of Guillain-Barré syndrome in pregnant women following vaccination with Abrysvo, the only RSV vaccine approved for use during pregnancy. The Commission on Human Medicines (CHM) advise that the benefits of vaccination against RSV outweigh the small increased risk of developing Guillain-Barré syndrome in older adults.

Key Advice for Healthcare Professionals:

- there is a small increase in the risk of Guillain-Barré syndrome following vaccination with Abrysvo and Arexvy in adults (aged 60 years and older). Currently, there is no evidence of an increased risk of Guillain-Barré syndrome in pregnant women following vaccination with Abrysvo, the only RSV vaccine approved for use during pregnancy

- be attentive to signs and symptoms of Guillain-Barré syndrome in all recipients of Abrysvo and Arexvy to ensure early and correct diagnosis, initiate adequate supportive care and treatment, and rule out other causes
- early medical care can reduce severity and improve outcomes
- report suspected adverse drug reactions associated with Abrysvo and Arexvy on a Yellow Card

Key Advice for Healthcare Professionals to Provide to Patients:

- the RSV vaccine helps protect against respiratory syncytial virus (RSV), a virus which can make older adults and babies seriously ill. RSV can cause a type of chest infection called bronchiolitis in babies which can cause breathing problems and may need to be treated in hospital. RSV can also cause a serious lung infection (pneumonia) in older adults requiring hospital care in some cases
- the Pfizer RSV vaccine Abrysvo is currently offered in NHS vaccination programmes against RSV to adults aged 75-79 years old and to pregnant women to help protect babies after they are born
- the GSK RSV vaccine Arexvy is not currently available on the NHS but may be available privately for use in individuals aged 60 years and older, or those aged 50– 59 years who are at increased risk of RSV disease; Arexvy should not be given to pregnant individuals
- rare or very rare cases of Guillain-Barré syndrome have been reported in older adults who have received the Abrysvo or Arexvy RSV vaccines respectively. Currently, there is no evidence that the Abrysvo RSV vaccine increases the risk of Guillain-Barré syndrome in pregnant women
- Guillain-Barré syndrome is a serious nerve condition. It usually affects your arms and legs first before you get symptoms in other parts of your body
- you might feel tingling, numbness or pins and needles in your feet and hands first. This is usually followed by muscle weakness and difficulty moving your joints.
- other symptoms can include:
    - tingling, numbness or pins and needles in your feet and hands
    - muscle weakness and difficulty moving your joints
    - sharp, shooting pain (nerve pain), often in your legs or back
    - problems breathing
    - problems with your face, such as drooping face muscles or trouble swallowing or speaking
    - problems with your eyes, such as double vision
- some people's symptoms become so severe that they are not able to move their legs, arms and face (paralysis)
- urgent hospital treatment is required to help prevent the symptoms progressing and improve recovery, however the effects of Guillain-Barré syndrome may sometimes be long-lasting
- seek immediate medical attention if you notice signs of Guillain-Barré syndrome
- report suspected side effects associated with the RSV vaccine on a Yellow Card

Kind Regards

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cc: Medicines Optimisation Team (Barnsley Place)
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