

Our Ref: DC/NB

11th December 2025

To: Prescribing Clinicians and Pharmacists within the Barnsley locality

Dear Colleague

Re: Summary of Key Points from the Barnsley Area Prescribing Committee Meeting on 12th November 2025.

The main outcomes of the meeting were: -

Barnsley Prescribing Guidelines

Anticoagulation for Stroke Prevention in Non-Valvular Atrial Fibrillation: Joint primary and secondary care guidance

The Committee agreed to adopt the 'Sheffield Anticoagulation for Stroke Prevention in Non-Valvular Atrial Fibrillation: Joint primary and secondary care guidance', noting that this will replace the existing Barnsley guideline.

The Sheffield guideline (version 3.3 October 2025, review date July 2026) is available on the [SY ICB Medicines Optimisation](#) website (link is to a pre-populated search to aid location of the guideline). The monitoring information within this guideline has recently been updated following updates to the [NICE CKS](#) and [SPS guidance](#) on the frequency of monitoring for patients over 75 years or those with frailty.

South Yorkshire Integrated Medicines Optimisation Committee (IMOC) approved Prescribing Guidelines

SY ICB Position Statement Choice of Direct Oral Anticoagulant (DOAC) for prevention of stroke and systemic embolism in adults with non-valvular AF (NVAF) [New]

The South Yorkshire position statement replaces the previous Barnsley DOAC position statement and is available on the [SY ICB Medicines Optimisation](#) website (link is to a pre-populated search to aid location of the guideline). **Apixaban tablets (generic) and rivaroxaban tablets (generic) remain the first line DOACs for NVAF in all care settings.** The position statement supports the DOAC workstream which forms part of the Barnsley Medicines Optimisation Scheme 2025-26 and wider SY QIPP plans.

SY ICB Position Statement – Prescribing of Beclometasone/Formoterol Combination pMDIs [New]

To make the best use of NHS resources, SY ICB recommends **Proxor® pMDI as the beclomethasone/formoterol pMDI cost-effective product of choice for all new patients**, where there is a clinical need to prescribe this combination inhaler. The position statement is available on the [SY ICB Medicines Optimisation](#) website.

Proxor® is now the lowest branded generic beclomethasone/formoterol combination pMDI available at a cost of £9.90 per inhaler. It has a 29% lower acquisition cost than Luforbec® (£13.98) and a 66% lower acquisition cost than Fostair® pMDI (£29.32). Proxor® contains the same excipients and has the same dose counter as Fostair® pMDI.

Proxor® has replaced Luforbec® on the Barnsley formulary as the beclomethasone/formoterol pMDI of choice for new patients. Luforbec® pMDI is reserved for existing patients only.

ScriptSwitch has also been updated.

Clinical Guidelines for Primary Care to Support the Use of Tirzepatide for Weight Management [NEW], updated position statement and traffic light classification change (priority cohort one criteria)

The SY IMOC approved a clinical guideline for the use of tirzepatide for weight management along with a proposal to change the traffic light status of tirzepatide from red to green for a specific cohort of patients only: namely patients who meet the priority cohort one* criteria in the [NHSE Interim commissioning guidance: implementation of the NICE TA1026 and the NICE funding variation for tirzepatide \(Mounjaro\(R\)\) for the management of obesity](#) when tirzepatide is prescribed in line with the local clinical guideline and the forthcoming locally commissioned service.

The tirzepatide position statement, which has been updated to reflect the above, was also approved by the Committee. The clinical guideline and updated position statement will be made available on the South Yorkshire MO website in due course. The traffic light classification on the South Yorkshire traffic light drug list and within the Barnsley formulary will be changed from red to green for priority cohort one patients when these resources are accessible on the website. The current red classification for weight management will remain for patients who meet the NHS eligibility criteria but who do not meet the priority cohort one criteria.

* Priority cohort one criteria:

BMI ≥ 40

AND four out of the following five comorbidities:

- Atherosclerotic CVD
- Type 2 diabetes
- Dyslipidaemia
- Hypertension
- Obstructive sleep apnoea (severe enough to be eligible for CPAP)

SY Actinic Keratosis Prescribing Guideline [New]

This new SY guideline, which has been developed in collaboration with primary and secondary care colleagues across South Yorkshire, is intended to support primary care clinicians in the management of patients with Actinic Keratosis. The guideline includes sections on recognition, management (pharmacological and non-pharmacological), a treatment pathway, patient information and when to consider referral to specialist care. The guidance was approved subject to minor amendments and will be available via the SY MO website in due course. The Barnsley Formulary will be updated in line with the guideline (the changes are summarised on page 4).

SY ICB Polypharmacy SMR resources [New]:

The SY IMOC has endorsed polypharmacy patient resources which have been created by the Health Innovation Network. The documents are considered useful tools to help support shared decision-making conversations with patients around polypharmacy and deprescribing during an SMR:

- [Me + My Medicines The Charter](#)

- [How to safely stop taking your medicines](#)
- [Reviewing your medicines patient information \(SMR Invitation letter\)](#)

The documents are available in easy read format and different languages.

SY ICB Valproate Guidance in Primary Care [Updated]:

The guideline has received a minor update to incorporate updated MHRA educational materials, links to MHRA infographics and advice on exclusion from the Pregnancy Prevention Programme for patients with intellectual disability (refer to the guideline for further details).

The updated guideline is available on the [SY ICB Medicines Optimisation](#) website (link is to a pre-populated search to aid location of the guideline).

Barnsley Amber-G / Shared Care Guidelines

Oral and Rectal Mesalazine Preparations for Ulcerative Colitis and Crohn's disease Amber-G guideline [Updated]

This Amber-G guideline has been updated to include mesalazine rectal preparations as previously agreed by the Committee. The monitoring information has also been updated to remove the requirement for a urine dipstick, in line with the updated [SPS monitoring](#) information.

The updated Amber-G guideline will be available on the SY ICB Medicines Optimisation website in due course.

Other

Accessing Prescribing Guidelines / Medicines Optimisation Resources

South Yorkshire wide and Barnsley place (together with Doncaster, Rotherham and Sheffield place) prescribing guidelines, shared care and amber G guidelines can be accessed via the central South Yorkshire ICB Medicines Optimisation website:

<https://mot.southyorkshire.icb.nhs.uk/> (home page)

or

<https://mot.southyorkshire.icb.nhs.uk/search?locations=barnsley%2Csouth-yorkshire> (Barnsley section which is pre-populated to search for Barnsley place or South Yorkshire wide prescribing and clinical guidelines and other medicines optimisation related information).

Guidelines can be located using the search function with the additional option of adding a corresponding category filter (e.g. shared care) if preferred.

When searching for documents, there is now also an option to scroll through the entire document catalogue. The list of documents provided can still be filtered by category (e.g. shared care) if required.

Guidelines and other prescribing information can also be accessed via the Barnsley Joint Formulary: <http://www.barnsleyformulary.nhs.uk/>

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	Indication	Barnsley Formulary status (including traffic light classification)
Horizon Scanning November 2025 IMOC		
Levodopa (<i>new inhaled formulation</i>)	Intermittent treatment of episodic motor fluctuations (OFF episodes) in adults with Parkinson's disease treated with a levodopa/dopa-decarboxylase inhibitor.	Non-formulary grey
IMOC November 2025 – Actinic Keratosis. The new SY ICB 'Managing actinic (solar) keratosis guideline' will be available in due course.		
Fluorouracil 5% cream (generic)	Actinic Keratosis	Formulary green (previously formulary amber)
Fluorouracil 0.5% & salicylic acid 10% cutaneous solution (Actikerall®)	Actinic Keratosis	Formulary green (previously formulary amber)
Diclofenac 3% gel (Solaraze®)	Actinic Keratosis	Formulary green (previously formulary amber-G)
Imiquimod 5% cream (Aldara®)	Actinic Keratosis	Formulary green (previously formulary amber)
Fluorouracil 4% cream (Tolak®)	Actinic Keratosis	Formulary green. Second line to fluorouracil 5% cream if the 5% cream is out of stock or as an alternative to the 5% cream for small single lesions as this product is available as 20g pack size.
Imiquimod 5% cream (Bascellex®)	Actinic Keratosis	Formulary green
Imiquimod 3.75% cream (Zyclara®)	Actinic Keratosis	Formulary green
Tirbanibulin 1% ointment (Klisyri®)	Actinic Keratosis	Formulary green (previously non-formulary provisional amber)
IMOC November 2025 - Other		
Proxor® pMDI (beclomethasone / formoterol cost-effective product of choice)	Asthma / COPD. Proxor® 100/6 MDI is licensed for use in both asthma and COPD. Proxor® 200/6 MDI is licensed for use in asthma only. When indicated for asthma, Proxor® 100/6 is licensed for both fixed dose treatment (maintenance treatment) and Maintenance and Reliever Therapy (MART). Proxor® 200/6 is only licensed for fixed dose treatment.	Formulary green. Proxor® MDI is the beclomethasone/formoterol combination pMDI of choice in primary care for new patients in line with the SYICB position statement. Luforbec® 100/6 and 200/6 MDI should be reserved for use in existing patients only. SY ICB Position Statement
NICE TAs – October 2025		
Mirabegron	Overactive bladder	Formulary green in line with NICE TA290

		NICE TA1100 is terminated (mirabegron is non-formulary for this indication): TA1100: Mirabegron for treating neurogenic detrusor overactivity in people 3 to 17 years (terminated appraisal)
Clascoterone	Acne vulgaris in people 12 years and over	Non-formulary grey. NICE TA1105 is terminated: TA1105: Clascoterone for treating acne vulgaris in people 12 years and over (terminated appraisal)
IMOC Sub-Group TLDL Green Drugs		
Ibandronic acid 150mg	Osteoporosis	Formulary green (previously formulary grey)
Ofloxacin	Only as per NICE Guidance	Formulary green (previously formulary grey)

MHRA Safety Roundup

The October 2025 MHRA Drug Safety Roundup can be accessed at the following link:
https://assets.publishing.service.gov.uk/media/6900b49c84b816d72cb9aa67/MHRA_Safety_Roundup_-_October_2025.pdf

There were no issues relating to primary care this month.

Kind Regards



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cc: Medicines Optimisation Team (Barnsley Place)
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Area Prescribing Committee Members (Secretary to the APC to circulate)
Local Medical Committee (Secretary to the LMC to circulate)
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