



Recent Chapter reviews and changes

Thank you to everyone who commented on the latest reviews of chapters of the Joint Formulary. All your comments are appreciated. We would not be able to produce the Joint Formulary without input from both Primary and Secondary care.

Thank you as well to those clinicians, both primary and secondary care, who gave time to help us in the working groups, looking at the comments received.

Below are some of the changes that have been made for Chapter 6, Endocrine System and Chapter 4, Central Nervous System (part 2 only). Part one of Chapter 4 is currently under review.

Remember that the Joint Formulary website gives you access to the updated chapters in PDF format. This can be accessed via Plymouth HealthNET or using www.pajf.plymouth.nhs.uk

Chapter 6 Endocrine System

- ◆ We were asked to add some disposal advice for hypodermic equipment from patients' homes. We have added a contact number for Plymouth City Council Street Action Line who provide this service. They offer delivery, collection and disposal of sharps boxes free of charge to domestic properties.
- ◆ Pioglitazone's is now licensed for use with insulin, so we have changed the advice on the 'Managing Blood Glucose Control in Adults with Type 2 Diabetes' algorithm.
- ◆ An algorithm has been included to show the recommendations from the Plymouth Diabetes Centre for patients performing blood glucose testing – when to test & what to do with the readings.
- ◆ **Hydrocortisone 100mg/1ml** (sodium phosphate) ampoules (green, first line), **Betamethasone 4mg/1ml** ampoules & **500 microgram** tablets, **methylprednisolone 100mg** tablets, **ethinylestradiol 2 microgram** tablets (all red, hospital only) and **progesterone gel** (yellow, specialist initiated) have all been added to the formulary.
- ◆ We have added the advice that patients requiring either Adcal[®] D3 or Calcichew[®] D3 forte should be offered the one the patient likes best to achieve best concordance.

Chapter 4 (part 2) Central Nervous System

- ◆ **Cinnarizine** (blue, second line) has been added. This is used by ENT clinicians for post-operative labyrinthectomy patients.
- ◆ ENT clinicians are seeing many patients with balance disorders exacerbated, in part, by the use of labyrinthine sedatives. We have added the advice to the formulary that these drugs, when used for acute vertigo, should only be given for a maximum of two weeks.
- ◆ We have added a note to highlight that tramadol increases CNS serotonin levels and may increase serotonergic effect when given with antidepressants.
- ◆ **Stalevo[®]** (yellow, specialist initiated) has been added to the formulary. This may give improved concordance for patients needing entacapone with levodopa / dopa decarboxylase inhibitor.
- ◆ **Naltrexone** (yellow) has been changed from hospital initiated to specialist initiated. Naltrexone is for initiation by a specialist in the field of substance misuse (see the formulary for further information).

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