

Cost Effective Prescribing Tips for Adults in the Community

Version 12

1. When initiating long acting antipsychotic Injections make sure the lowest effective dose is used. **Paliperidone long acting injection** initiation usually involves a loading dose of 150mg followed by a 100mg dose the following week before moving to the long-term maintenance dose. The manufacturer's recommended maintenance dose is 75mg, yet the average dose being used in some teams is well over 100mg per dose, meaning the majority of patients are on 150mg, which is equivalent to 75mg risperidone injection every two weeks, a dose rarely used when paliperidone wasn't available. Link to SPC: www.medicines.org.uk/emc/medicine/31329

The annual difference between a 75mg monthly dose and a 100mg dose is approximately £830 per annum. The difference between a 75mg dose and a 150mg dose monthly is approximately £1770 per annum.

2. Consider reducing higher doses of long-acting antipsychotic injections if patients are doing well. A dose of **paliperidone long acting injection** reduced from 100mg to 75mg would save £830 per annum. If compliance is no longer an issue, consider moving to oral medication if the patient is happy to switch.
3. The Trust's preferred brand of the 12 hour **extended methylphenidate preparation** is Xaggitin XL[®] and no longer Concerta XL[®]. New and existing patients should be switched to provide the Trust with a 50% saving. Both products have identical release mechanisms.
4. Many people think they cannot swallow tablets and capsules, but it may be because they have a poor technique. A leaflet to help patients swallow tablets/capsules is available on the website: www.sussexpartnership.nhs.uk/node/1680/attachment
5. Currently the price of a generic **quetiapine** 300mg plain (IR) tablet is 6p and a 300mg XL tablet is £2.83 despite several brands of quetiapine XL being available (Drug Tariff, January 2020), This is **a 50 fold difference in price**. This is every indication that quetiapine XL prices will always remain significantly higher than the immediate release preparations.
 - Therefore when initiating quetiapine:
 - Only use XL tablets for the **initiation/titration** phase.
 - Use immediate release (IR) tablets thereafter, once* or twice daily.
 - Only use XL tablets long-term after trying IR tablets first.
 - Add the letters 'IR' after quetiapine to make sure you do not get XL if prescribing it once a day.

*Best given in the evening, not at bedtime, so that the drowsiness effect peaks soon after bedtime and wears off through the night.

- Add the letters IR after quetiapine to make sure you do not get XL if prescribing it once a day.

If a clinical decision is made to use quetiapine XL long-term, then it is important that the reason for using it is made clear in any communication with the patient's GP.

6. Avoid using liquid and orodispersible medicines unless absolutely essential as they are usually expensive. In particular avoid using non-BNF products (specials). These may be up to 100 times more expensive than the solid dosage form.

For example, indications are that the FP10 price of generic olanzapine orodispersible will remain higher than plain generic tablets. Currently the prices at time of publication are for a single dose:

- Olanzapine plain 10mg tablet 5p
 - Olanzapine orodispersible sugar free 10mg tablet 41p
 - Olanzapine orodispersible 10mg tablet 173p
 - Olanzapine 10mg velotab (Zyprexa brand) 468p
- (Drug Tariff, January 2020).

Please restrict orodispersible use to where it is clinically essential and then prescribe orodispersible sugar free tablets. **Do not prescribe olanzapine orodispersible generically as olanzapine Velotab[®]** as these cost £4.68 per 10mg tablet.

7. Prescribe medicines generically as they are often 90% cheaper. Exceptions are lithium preparations or when the Trust has agreed to use branded generics, e.g. Xaggitin XL[®], instead of generic methylphenidate XL tablets.
8. After initiating a new oral medicine found in the Trust's Formulary, ask the GP to continue prescribing unless; clozapine or the medicine the medicine can be prescribed under shared care, in which case the drug needs to be stabilized before the GP is asked to prescribe. The other situation you may be expected to continue prescribing beyond the first prescription is if the patient is very unstable and they are due to be reviewed within a short time period and a drug or dose adjustment is anticipated. There is guidance on the website on information requested by GPs when asking them to take on prescribing:
www.sussexpartnership.nhs.uk/node/1486/attachment
9. Do not prescribe physical health drugs or feeds (this does not apply to patients on wards and at discharge).
10. There is a big difference in the price of **hypnotic benzodiazepines and 'Z' drugs**. The hypnotic of choice for the elderly is zolpidem, due to it being shorter acting than zopiclone.

In younger adults both are first choice, though zolpidem is less likely to cause hangover effects. Both were the same price at the time of publication.

| Drug and example doses | Quantity | Cost* |
|------------------------|----------|--------|
| Zolpidem 10mg | 14 | £0.96 |
| Zopiclone 7.5mg | 14 | £0.56 |
| Temazepam 20mg | 14 | £0.81 |
| Loprazolam 1mg | 14 | £11.25 |
| Lormetazepam 1mg | 14 | £8.76 |

*Drug Tariff – January 2020

Please share this information with your junior medical staff.