

Changes to the arrangements for distribution of BNF in England

The National Institute for Health and Clinical Excellence (NICE) distributes the BNF to NHS organisations in England. Copies of the BNF will be addressed to individual healthcare professionals who are eligible to receive it.

Any individuals who work for the NHS in England and think they are entitled to receive a copy of the BNF but have not received one, should contact the DH Publications order line. Tel: 0300 123 1002.

Electronic access to the BNF and BNFC

BNF and BNFC are available free in the UK and developing countries from the publishers at <http://bnf.org> and <http://bnfc.org>.

Both the BNF and BNFC are also available online at www.evidence.nhs.uk and access is free to all UK residents.

Alternatively, copies may be obtained through any bookseller or direct from Macmillan Distribution by telephone: +44 (0) 1256 302 699 or by email: direct@macmillan.co.uk.

For all bulk orders of more than 20 copies please email the publisher at: pharmpress@rpharms.com or telephone +44 (0) 20 7572 2266.

Print copies of the BNF can also be purchased via a 1 or 2 year subscription; please email php@macmillansolutions.com or telephone: +44 (0) 203 318 3141.

Pharmaid

Numerous requests have been received from developing countries for BNFs. The Pharmaid scheme of the Commonwealth Pharmacists Association will dispatch old BNFs to Commonwealth countries. BNFs will be collected from certain community pharmacies in November. For further details check the health press or contact:

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Feedback

We welcome feedback from you. If you have any comments or suggestions please let us know at editor@bnf.org. The contact email for manufacturers or pharmaceutical companies wishing to contact the BNF is manufacturerinfo@bnf.org.

Dear BNF user

Welcome to BNF 62. Some of the appendices in the BNF have been renumbered, although their content remains unchanged; please see appendices for details. We have highlighted below some of the key changes you will find in this new edition.

Updated prescribing information

Controlled Drug symbols

Preparations of Controlled Drugs in Schedules 2, 3, 4 (Part I), and 4 (Part II) of the Misuse of Drugs Regulations 2001 (and subsequent amendments) are now identified throughout the BNF using symbols to indicate the Schedule to which they belong. A key to the new symbols can be found in the Controlled Drugs and Drug Dependence section in General Guidance (p. 8).

Rebound acid hypersecretion with proton pump inhibitors

The safety of proton pump inhibitors came under scrutiny when the results of a trial suggested that discontinuation of this therapy may cause or aggravate the acid-related symptoms they are used to treat (Reimer C et al. Proton Pump Inhibitor Therapy Induces Acid-Related Symptoms in Healthy Volunteers after Withdrawal of Therapy. *Gastroenterology* 2009; 137: 80-87). BNF 62 (section 1.3.5, p. 55) states that rebound acid hypersecretion and protracted dyspepsia may occur after stopping prolonged treatment with a proton pump inhibitor. Healthcare professionals are reminded to prescribe proton pump inhibitors for appropriate indications at the lowest effective dose for the shortest period, and that the need for long-term treatment should be reviewed periodically.

Management of haemorrhage in patients taking warfarin

Guidance for the reversal of the anticoagulant effects of warfarin has been updated in section 2.8.2 (p. 147), to take into account the recommendations of the British Committee for Standards in Haematology: *Guidelines on Oral Anticoagulation with Warfarin – fourth edition* (2011). Advice is given on the management of patients with a raised INR and either major, minor, or no bleeding.

Antipsychotics

For BNF 62, section 4.2.1 (p. 218) has been fully updated. The prescribing notes have been expanded to describe the role of first-generation and second-generation (or 'atypical') antipsychotics in the management of schizophrenia. Guidance is provided on the choice of antipsychotic drug, monitoring requirements, and the side-effects associated with specific antipsychotic drugs.

Antiepileptic medication and breast-feeding

Guidance on the use of antiepileptic medication and breast-feeding has been reviewed and updated in section 4.8.1 (p. 284). Women taking antiepileptic monotherapy should generally be encouraged to breast-feed. Infants should be monitored for sedation, feeding difficulties, adequate weight gain, developmental milestones, and adverse effects associated with antiepileptic therapy. If suspected adverse effects develop in infants, plasma-drug concentrations should be measured and it may be necessary to introduce formula feeds.

Treatment of high-severity community-acquired pneumonia

Concerns were raised that the British Thoracic Society recommendations for high-severity community-acquired pneumonia may lead to over-prescribing of broad-spectrum antibacterials with consequences such as antibacterial resistance and *Clostridium difficile* infection (Dryden M et al. Antibiotics for Community-Acquired Pneumonia. *J Antimicrob Chemotherapy* 2009; 64: 1123–25). BNF 62 (Table 1, section 5.1, p. 330) recommends benzylpenicillin with *either* clarithromycin *or* doxycycline for the treatment of most patients with high-severity community-acquired pneumonia; the more broad-spectrum combinations such as co-amoxiclav + clarithromycin are reserved for patients with life-threatening infection or co-morbidities, for those living in long-term residential or nursing homes, or if Gram-negative infection is suspected.

Pioglitazone and bladder cancer

The European Medicines Agency has advised that there is a small increased risk of bladder cancer associated with pioglitazone use; however, in patients who respond adequately to treatment, the benefits of pioglitazone continue to outweigh the risks. BNF 62 (section 6.1.2.3, p. 439) has been updated to reflect the European Medicines Agency's advice on assessment of patients for risk factors of bladder cancer before initiation of treatment with pioglitazone and when to review patients already receiving treatment. Patients receiving treatment with pioglitazone should be advised to report any haematuria, dysuria, or urinary urgency during treatment.

Starting and switching combined oral contraceptives

Guidance on the initiation of combined oral contraceptives and on switching to and from combined oral contraceptives, has been updated in section 7.3.1 (p. 506) to take into account the recommendations of the Medicines and Healthcare products Regulatory Agency (MHRA) and the Faculty of Sexual and Reproductive Health (May 2011). A combined oral contraceptive (except *Qlaira*[®], see below) can now be initiated on day 1–5 of the cycle without the need for additional contraceptive precautions. If the woman is

switching from another hormonal method of contraception to a combined oral contraceptive and the previous method has been used correctly, or pregnancy can reasonably be excluded, the new brand may be started immediately (without the need for additional contraception). The advice on the initiation of, and switching to and from, *Qlaira*[®] remains unchanged because of limited clinical experience with this brand.

New safety information

Noradrenaline/Norepinephrine base

Manufacturers are now required to express the strength of all noradrenaline preparations as noradrenaline base. While this is being implemented, for a period of time preparations on the UK market may be described as *either* noradrenaline base *or* noradrenaline acid tartrate. Doses in BNF 62 are expressed as noradrenaline base (section 2.7.2, p. 139).

Learning with the BNF

BNF e-learning modules for pharmacists

BNF Update is an e-learning programme developed in collaboration with the Centre for Pharmacy Postgraduate Education (CPPE); there are two modules: one for pharmacists working in the community and other primary care settings, and another aimed at hospital pharmacists. New modules are released every 6 months to complement the publication of each new edition of the BNF and can be accessed free of charge by pharmacists and pre-registration pharmacists in England at <http://www.cppe.ac.uk>.

BNF and BNFC e-newsletter

The BNF & BNFC free e-newsletter is issued several times a year. To register for regular updates, case studies, and tips on using these publications effectively, please sign up at <http://bnf.org/newsletter>. To visit the e-newsletter archive, go to <http://bnf.org/bnf/extra/current/450066.htm>.

Distribution of BNFs

The UK health departments distribute BNFs to all NHS doctors, dental surgeons, pharmacists, non-medical prescribers (both independent and supplementary prescribers), and community pharmacies.

In Scotland, contact by email: nss.psd-bnf@nhs.net.

In Wales, contact the Business Services Centre. Tel: 01495 332 000.

In Northern Ireland, contact by email: ni.bnf@hscni.net.