

## Prescribing Clinical Network

Surrey (East Surrey CCG, Guildford & Waverley CCG, North West Surrey CCG, Surrey Downs CCG & Surrey Heath), Crawley CCG and Horsham & Mid-Sussex CCG

### Application for established medicines without PCN entry including colour classification

#### Cycloplegic and Mydriatic Eye Drops – Price increase for Atropine 1% Eye drops

**Purpose of this paper:**

- Recent price increase of the Atropine 1% eye drops, 10ml bottle requires change of formulation to Atropine 1% unit dose vials
- There is no entry in the Surrey PAD, therefore this paper describes use, place in therapy and proposed traffic light classification

Does diagnosis require Specialist?      Yes

Medicine details					
<b>Name, (brand name) and manufacturer if branded product</b>	<ol style="list-style-type: none"> <li>1. Atropine 1% eye drops with preservative, Martindale Pharma</li> <li>2. Atropine 1% eye drops without preservative (Minims®), Bausch and Lomb</li> <li>3. Cyclopentolate 0.5% eye drops with preservative, Intrapharm Laboratories Limited</li> <li>4. Cyclopentolate 0.5% eye drops without preservative (Minims®), Bausch and Lomb</li> <li>5. Cyclopentolate 1% eye drops with preservative, Intrapharm Laboratories Limited</li> <li>6. Cyclopentolate 1% eye drops without preservative (Minims®), Bausch and Lomb</li> </ol>				
<b>Licensed indication</b>	<p>Cycloplegic and Mydriatic Eye Drops Atropine eye drops for anterior uveitis, licensed in adults, unlicensed in children but described in the BNFC Other indications, such as atropine blurring is an adverse effect very occasionally used in children with amblyopia who resist patching (Unlicensed).</p>				
<b>Formulation</b>	<p>With preservative, 10ml bottles Preservative free, Unit dose vials (Minims®)</p>				
<b>Usual dosage</b>	<p>As per SPC</p>				
<b>Traffic Light Status</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%; text-align: center; padding: 2px;">Current status</th> <th style="width: 50%; text-align: center; padding: 2px;">Proposed status</th> </tr> </thead> <tbody> <tr> <td style="padding: 2px;">Currently no entry in the Surrey PAD</td> <td style="padding: 2px;"> <p><b>RED for short term indications including anterior uveitis, and for long term indications not described in the BNF or BNFC should remain RED on the traffic light classification.</b></p> <p>Decision regarding use in hypersalivation to be made at PCN</p> <p><b>BLUE for the reduction of painful ciliary spasm in blind eyes.</b></p> <p><b>For those, initiation and monitoring of efficacy and will be by Ophthalmologists.</b></p> </td> </tr> </tbody> </table>	Current status	Proposed status	Currently no entry in the Surrey PAD	<p><b>RED for short term indications including anterior uveitis, and for long term indications not described in the BNF or BNFC should remain RED on the traffic light classification.</b></p> <p>Decision regarding use in hypersalivation to be made at PCN</p> <p><b>BLUE for the reduction of painful ciliary spasm in blind eyes.</b></p> <p><b>For those, initiation and monitoring of efficacy and will be by Ophthalmologists.</b></p>
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*Please use PCN decision making criteria to inform reasons for change*



20160526\_colour classification guideline

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	<p>before discharge to GPs. A minimum of 2 months to be provided by the specialists.</p> <p><u>Preferred choice:</u> Cyclopentolate 0.5% and 1.0%</p> <p><u>Second choice</u> - only to be used when cyclopentolate is not suitable: Atropine 1% Eye drops (Minims®) – For patients currently prescribed the 5ml bottle switch patients to the Minims®, except for patients with manual dexterity problems who cannot use Minims®</p> <p><u>Third choice:</u> Atropine 1% Eye drops (5ml bottle) – For patients with dexterity problems who cannot use the Minims®</p>
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**Costs**

Drug	Pack size	Cost	Brand
Cyclopentolate 0.5% eye drops	5ml	£8.08	Mydrilate
Cyclopentolate 0.5% eye drops preservative free	20 x 0.5ml unit dose	£11.41	Minims® Bausch and Lomb
Cyclopentolate 1% eye drops	5ml	£8.08	Mydrilate
Cyclopentolate 1% eye drops dose preservative free	20 x 0.5ml unit	£11.41	Minims® Bausch and Lomb
<b>Atropine 1% eye drops with preservative</b>	<b>5ml</b>	<b>£130.93</b>	<b>Martindale</b>
Atropine 1% eye drops preservative free	20 x 0.5ml unit dose	£15.10	Minims® Bausch and Lomb

**Key Considerations**

**Cost implications to the local health economy**

From Presqipp® data BNF drill down, the PCN health economy (Surrey Heath, Guildford and Waverley, North West Surrey, Surrey Downs, East Surrey, Crawley, Horsham and Mid-Sussex the costs are as follows

	BNF Drill Down year to date April - May 18/19	Projected costs April-May 19/20 if the Martindale brand used	Projected costs April-May 19/20 if the preservative Minims ® used
Expenditure in atropine 1% eye drops	£16K	£45K	£8K

The use of Atropine eye drops is expected to be greater in secondary care, and change in formulation can also be implemented in secondary care.

#### Impact to current prescriber or medication initiator

Cyclopentolate should be the preferred cyclopegic eye drops, with atropine eye drops reserved for those patients who have a specific need for the longer acting medicine.  
Whenever atropine eye drops are required, the Minims® should be used, unless the patient has dexterity problems such that they cannot use the Minims®

#### Impact to proposed prescriber or medication initiator

Specialists to be made aware of the price differences between the formulations and the place in therapy  
No change for prescribing of cyclopentolate  
Switch patients from the atropine eye drop bottle to the Minims® wherever the patient can use the Minims® - This will not have a clinical impact

#### Impact to patients

No change for patients on cyclopentolate  
For patients requiring atropine eye drops, as long as patients have the manual dexterity to use Minims®, this should have minimal impact on the patient:  
Patients may benefit from not having a preservative in the eye drops  
The packaging for Minims® is larger and may occupy more storage space – neither atropine Minims® or dropper bottle require refrigeration

#### Additional comments

Switching advice can be made using Optimise Rx

#### Identified lead for development of necessary documents e.g. shared care agreement

**Name:**

**Designation:**

**Organisation:**

**Estimated date of preparation:**

#### References:

1. Atropine Eye Drops BP 1.0% w/v Vistatropine Eye Drops 1.0% w/v - Summary of Product Characteristics (SmPC) - (eMC), <https://www.medicines.org.uk/emc/product/3297/smpcSPC>
2. Minims Atropine Sulphate 1%, Eye drops solution - Summary of Product Characteristics (SmPC) - (eMC) <https://www.medicines.org.uk/emc/product/3738/smpcSPC>
3. Mydrilate 1.0% Eye Drops - Summary of Product Characteristics (SmPC) - (eMC), <https://www.medicines.org.uk/emc/product/1724/smpc>
4. Minims Cyclopentolate Hydrochloride 1%, Eye drops solution - Summary of Product Characteristics (SmPC) - (eMC), <https://www.medicines.org.uk/emc/product/4258/smpc>

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5. Ophthalmology Pharmacy Group
6. Dr. Dan Lindfield, Consultant Ophthalmologist RSCH
7. Drug tariff, accessed on-line August 2018
8. BNF and BNFC, accessed on-line August 2018

**Prepared by:**

Carina Joanes. MSc, MRPharmS , Lead Commissioning Pharmacist, Surrey Downs (Hosted team) Supporting Guildford and Waverley CCG, and Surrey Heath CCG

Declaration of Interest:

None

Date: 31/07/2018

**Reviewed by:**

Mr Daniel Lindfield, Consultant Ophthalmologist & Glaucoma Lead, Royal Surrey County Hospital

Declaration of Interest:

None

Date: August 2018

**VERSION CONTROL SHEET**

Version	Date	Author	Status	Comment
<i>v.1</i>	<i>31.07.2018</i>	<i>CJoanes</i>	<i>Draft</i>	<i>Out for consultation</i>
<i>v.2</i>	<i>23.08.2018</i>	<i>CJoanes</i>	<i>Final Draft</i>	<i>Added to PCN agenda</i>

**GREEN - Non-Specialist Drugs**

GPs (or non-medical prescribers in primary care) are able to take full responsibility for initiation and continuation of prescribing

**BLUE - Specialist Input WITHOUT Formal Shared Care Agreement**

Prescribing initiated and stabilised by specialist but has potential to transfer to primary care WITHOUT a formal shared care agreement

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**AMBER - Specialist Initiation WITH Shared Care Guidelines**

Prescribing initiated and stabilised by specialist but has potential to transfer to primary care under a formal shared care agreement

**RED - Specialist ONLY drugs**

Treatment initiated and continued by specialist clinicians

**BLACK – NOT recommended**

Not recommended for use in any health setting across Surrey and NW Sussex health economy

**Replies to Consultation:**

Changes after consultation:

Treatment of anterior uveitis changed to RED

Blue indication clarified as treatment of ciliary spasm in blind eyes

Eye drop bottle volume changed to 10mls

Entry for hypersalivation to be agreed at PCN