

Library Current Awareness Bulletin: Pharmacy – April 2020

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Articles can be accessed from the links provided. An OpenAthens account may be required to access some of the articles. [Register for OpenAthens](#) – use your Airedale email address when registering.



Alerts

Alerts and Recalls for Drugs and Medical Devices (GOV.UK)

[View the March and April Alerts](#)

[Letters and drug alerts sent to healthcare professionals in February 2020](#)

Guidance

[NICE Guidance and Advice List – March and April Updates](#)

The National Institute for Health and Care Excellence

News

[BBC News articles on the pharmaceutical industry](#)

[Articles published by BBC News on the pharmaceutical industry are collected here.]

[Coronavirus \(COVID-19\) updates](#)

National Pharmacy Association

April 2020

[To help members find answers to common questions on operating in the COVID-19 Pandemic, the NPA has put together FAQs which will be updated daily. This webpage also has links to NPA webinars on key topics related to the coronavirus outbreak and business continuity guidance.]

[Latest updates on COVID-19 \(coronavirus\)](#)

General Pharmaceutical Council

April 2020

[This webpage contains the latest statements and information from the GPhC in relation to the COVID-19 pandemic.]

[COVID-19 Vaccine and Antiviral Drug Development](#)

Dr Penny Ward. Faculty of Pharmaceutical Medicine Blog

April 2020

[This article considers the advantages and disadvantages of potential vaccine strategies, regulatory considerations for vaccine development, and therapeutic approaches.]

[The ethics of conducting clinical trials in the search for treatments and vaccines against COVID-19](#)

Dr Susan Tansey FFPM. Faculty of Pharmaceutical Medicine Blog

April 2020

[This article aims to address some of the ethical issues and dilemmas that may arise when planning and conducting clinical trials in the COVID-19 emergency.]

[Ibuprofen; no evidence preventing use during COVID-19](#)

Royal Pharmaceutical Society

April 2020

[The updated position from the National Health Services (NHS), Medicines & Healthcare Products Regulatory Agency (MHRA) and National Institute for Health and Care Excellence (NICE) confirms that patients can take ibuprofen when self-medicating for symptoms of COVID-19, such as fever and headache.]

[Covid-19: ibuprofen can be used for symptoms, says UK agency, but reasons for change in advice are unclear](#)

BMJ

April 2020

[UK medicines agencies have changed their advice on ibuprofen to say that the drug can be used to treat patients with symptoms of COVID-19, although the evidence that prompted the revision has not been made public. A review by the Commission on Human Medicines' expert working group on COVID-19 concluded that there is currently insufficient evidence to establish a link between use of ibuprofen, or other non-steroidal anti-inflammatory drugs and contracting or worsening of COVID-19.]

[Updated advice on vitamin D intake during COVID-19 pandemic](#)

National Pharmacy Association

April 2020

[Public Health England and The Scottish Government have re-issued advice for taking vitamin D during the current coronavirus (COVID-19) pandemic. This is because the Government is advising people to 'Stay at home', therefore, many people will not be going outdoors in order for their body to create vitamin D from direct sunlight exposure.]

[NHS strikes deal on first in a new generation of cancer busting drugs](#)

NHS England

April 2020

[The new drug, larotrectinib, will initially be used for children, young people and some adults, and targets tumours according to their genetic make-up, rather than where they originated from in the body.]

Community Pharmacy

[A service evaluation and stakeholder perspectives of an innovative digital minor illness referral service from NHS 111 to community pharmacy](#)

Nazar, H. et al

PloS one, vol. 15(3)

March 2020

[A pilot Digital Minor Illness Service (DMIRS) was commenced in the North East of England in December 2017 to feasibility test the NHS 111 referral to community pharmacy for patients presenting with minor conditions. Routine service activity data was evaluated during Jan–Dec 2018 to investigate the demographics of patients included in the service, the presenting conditions, and how those referrals were managed by community pharmacies. Semi-structured interviews with NHS 111 call handlers, project team members, community pharmacists and patients were undertaken to investigate the design, management, implementation and delivery of the service.]

[An investigation into the number and nature of the urgent care consultations managed and referred by community pharmacists in south-east England](#)

Dodds, L. et al

Primary Health Care Research and Development

March 2020

[This study aimed to provide a snapshot of the number and nature of urgent care requests presented to a sample of community pharmacies in three counties in southern England, to determine how requests are managed, whether management is appropriate, as assessed by a group of experts, and whether customers receiving the care are satisfied with pharmacists' interventions.]

[Impact of a pilot NHS-funded sore throat test and treat service in community pharmacies on provision and quality of patient care](#)

Mantzourani, E. et al

BMJ Open Quality, vol. 9(1)

Feb 2020

[An NHS-funded sore throat test and treat (STTT) service was introduced in selected pharmacies in two local health boards in Wales, as an extension to the national pharmacy common ailment scheme. The aim of this study was to evaluate the impact of STTT on provision and quality of patient care, namely antibiotic use, patient safety and general practitioner (GP) consultation rates.]

[‘New Medicine Service’: supporting adherence in people starting a new medication for long-term condition: 26-week follow-up of a pragmatic randomised controlled trial](#)

Elliott, R.A. et al

BMJ Quality & Safety, vol. 29(4) pp. 286-295

April 2020

[The aim of this study was to examine the effectiveness and cost-effectiveness of the community pharmacy New Medicine Service (NMS) at 26 weeks. This was a pragmatic patient-level parallel randomised controlled trial in 46 English community pharmacies. 504 participants aged 14 years or over, identified in the pharmacy when presenting a prescription for a new medicine for predefined long-term conditions, were randomised to receive NMS (n=251) or normal practice (n=253). Adherence was assessed through patient self-report at 26-week follow-up.]

Hospital Pharmacy

[Advancing pharmacy practice through an innovative ambulatory care transitions program at an academic medical center](#)

Cavanaugh, J. et al

Pharmacy, vol. 8(1)

March 2020

[A post-acute follow-up programme, coordinated by an ambulatory care clinical pharmacist at the Internal Medicine Clinic at the University of North Carolina, has been in place since March 2012. An evaluation revealed that this led to improved clinical, organizational, and financial outcomes.]

[Drugs supply and pharmaceutical care management practices at a designated hospital during the COVID-19 epidemic](#)

Ying, W. et al

Research in Social & Administrative Pharmacy (RSAP)

April 2020

[This article gives details of the various practices used by pharmacists at The Third Hospital of Jilin University (THJU) in Jilin province, China in response to the COVID-19 pandemic. The practices include staff management and the support provided for maintaining physical and mental health, drug supply management, management of off-label drug use, and pharmaceutical care procedures.]

[Effects of a remote antimicrobial stewardship program on antimicrobial use in a regional hospital system](#)

Knight, J. et al

Pharmacy, vol. 8(1)

March 2020

[The purpose of this quality improvement study was to describe the implementation of a pharmacist-led remote antimicrobial stewardship programme (ASP) at McLeod Health (a seven-hospital system) in the USA and assess the effect on antimicrobial use. Antimicrobial use in days of therapy per 1000 patient days was compared between the six months before and after remote ASP implementation. Changes in system-wide, facility-specific, and target antimicrobial use were evaluated. Pharmacist interventions, acceptance rates, and number of times infectious disease (ID) physician assistance was sought were also tracked.]

[Exploring an extended role for pharmacy assistants on inpatient wards in UK hospitals: using mixed methods to develop the role of medicines assistants](#)

Rathbone, A.P. et al

European Journal of Hospital Pharmacy: Science and Practice, vol. 27(2) pp. 78-83

March 2020

[This project explored the deployment of pharmacy assistants to inpatient wards in a new role as 'medicines assistants' (MAs). Ward-based MAs were introduced to six wards across two UK hospitals to support medicines administration. Each 30-bed ward delivered acute inpatient services with MAs supporting typical nursing medication administration rounds to 15 patients. Data were collected using activity diaries, observations, clinical audit and semi-structured interviews with pharmacy assistants, pharmacy technicians, clinical pharmacists, nurses, ward managers and pharmacy managers.]

[Hospital pharmacists' pharmaceutical care for hospitalized patients with COVID-19: Recommendations and guidance from clinical experience](#)

Research in Social & Administrative Pharmacy (RSAP)

April 2020

[The aim of this article is to discuss hospital pharmacists' role in providing pharmaceutical care for hospitalised patients with COVID-19 to promote patient care and management during the pandemic. It includes details of a pharmaceutical care framework of COVID-19 hospitalised patients for hospital pharmacists and it provides a summary of evidence available on 25th March 2020 from Chinese, American and WHO authorities.]

[Inappropriate use of antibiotics effective against gram positive microorganisms despite restrictive antibiotic policies in ICUs: a prospective observational study](#)

Ozger, H.S. et al

BMC Infectious Diseases, vol. 20(1)

April 2020

[This observational study, conducted prospectively between 1st October 2018 and 1st October 2019 in the medical and surgical ICUs of Gazi University Faculty of Medicine Hospital, Turkey, evaluates gram-positive anti-bacterial utilisations in intensive care units (ICUs) with various evaluation criteria, to determine the frequency of inappropriate usage and the intervention targets required to ensure optimum use. The total bed capacity was 55. Patients older than 18 years and who were prescribed gram-positive spectrum antibiotics (vancomycin, teicoplanin, linezolid, and daptomycin) were included. During the study period, 200 treatments were evaluated in 169 patients.]

[Pharmacist-physician collaboration to improve the accuracy of medication information in electronic medical discharge summaries: Effectiveness and sustainability](#)

Elliott, R.A. et al

Pharmacy, vol. 8(1)
March 2020

[This study evaluated the effectiveness and sustainability of an intervention in which ward-based hospital pharmacists reviewed, contributed and verified medication information in electronic discharge summaries (EDSs) in collaboration with physicians. Retrospective audits of randomly selected EDSs were conducted on seven wards at a major public teaching hospital in Melbourne, Australia before and after implementation of the intervention and repeated two years later on four wards where the intervention was incorporated into usual pharmacist care. EDSs for 265 patients (prescribed a median of nine discharge medications) were assessed across three time points (2014, 2015, and 2017).]

[Pharmacists' role in antimicrobial stewardship and relationship with antibiotic consumption in hospitals: An observational multicentre study](#)

Ourghanlian, C. et al

Journal of Global Antimicrobial Resistance, vol. 20 pp. 131-134
March 2020

[Hospital pharmacists involved in the French antibiotic consumption surveillance network (ATB-Raisin) were invited to participate in a retrospective observational multicentre study. Collected data were: the previous year's (2016) antibiotic consumption expressed in daily defined dose per 1000 patient-days; antimicrobial stewardship (AMS) measures, including pharmacist-specific actions; and use of a computerised prescription order entry (CPOE) system. Associations between antibiotic consumption and AMS measures were assessed by linear regression, after adjustment for hospital activities.]

[Providing pharmacy services at cabin hospitals at the coronavirus epicenter in China](#)

Meng, L. et al

International Journal of Clinical Pharmacy
April 2020

[In this commentary, the authors describe pharmacy services at cabin hospitals in Wuhan, China. 16 cabin hospitals were built to admit patients with confirmed coronavirus infection. Each cabin hospital has pharmacists to provide services and pharmaceutical care to patients. Pharmacists also provide assistance to cabin hospitals through remote internet platforms across China.]

[Screening tools used by clinical pharmacists to identify elderly patients at risk of drug-related problems on hospital admission: a systematic review](#)

Brady, A. et al

Pharmacy, vol. 8(2)
April 2020

[This systematic review aimed to identify published primary research and critically evaluate the quality of prediction tools to identify elderly patients at increased risk of drug-related problems and/or likely to need clinical pharmacist intervention. PubMed, EMBASE, OVID HMIC, Cochrane Library, PsychInfo, CINAHL PLUS, Web of Science and ProQuest databases were searched along with the reference lists of included articles. Data were extracted and systematically assessed for quality by considering the four key stages involved in accurate risk prediction models — development, validation, impact and implementation. Nineteen studies met the inclusion criteria.]

[The role of the clinical pharmacist in an Irish university teaching hospital: A mixed-methods study](#)

Ronan, S. et al

Pharmacy, vol. 8(1)
March 2020

[This mixed methods study assessed the impact of medication review (MR) in terms of potential clinical harm, cost avoidance, and the views of nursing staff on the role of the pharmacist. The setting was a 192-bed, voluntary, acute hospital, in the Munster region of Ireland. **Study I:** The pharmacist provided MR to patients conventionally once a week. Any interventions were then assessed for potential clinical harm and to calculate cost avoidance. **Study II:** Semi-structured interviews, guided by a topic guide were completed with 12 nurses (11 female). Thematic analysis was used to code the main themes. The main outcome measure was to estimate the cost, cost avoidance, and the net cost benefit ratio of MR provided by pharmacists.]

[The UK BIO-TRAC study: A cross-sectional study of product and batch traceability for biologics in clinical practice and electronic adverse drug reaction reporting in the UK](#)

Klein, K. et al

Drug Safety, vol. 43(3) pp. 255-263

March 2020

[The aim of this study was to assess the extent to which biologics are traceable by brand name and batch number in UK hospital practice and in adverse drug reactions (ADRs) reported by patients and healthcare professionals. An online hospital pharmacist survey captured information on how specific product details are recorded during the processes of prescribing, dispensing and administration of biologics in routine UK hospital practice. The proportion of ADR reports specifying brand name and batch number submitted to the UK national spontaneous reporting database, the Yellow Card Scheme, were assessed between 1 January 2009 and 30 September 2017.]

Education and Training

[Nationwide survey of experiential learning in Mpharm programmes in UK Universities](#)

Jacob, S.A. and Boyter, A.C.

The International Journal of Pharmacy Practice, vol. 28(2) pp. 121-129

April 2020

[This study aimed to determine the current structure of experiential learning (EL) in Master of Pharmacy (MPharm) programmes in UK universities, and assess how they meet the standards specified by the General Pharmaceutical Council. A cross-sectional survey of staff in charge of EL in MPharm programmes was conducted, utilising a 31-item on-line survey, consisting of both open and close-ended questions. Variables of interest were administrative aspects and structure of the EL component, tutor issues, and placement sites. To pinpoint the challenges faced with EL, the Relative Importance Index (RII) was calculated.]

[Practice, Skill Mix, and Education: The Evolving Role of Pharmacy Technicians in Great Britain](#)

Boughen, M. and Fenn, T.

Pharmacy, vol. 8(2)

March 2020

[This paper compares the GphC standards for the initial education and training of pharmacy technicians with the qualifications currently used in practice and discusses whether future qualifications will be 'fit for purpose'. In this context, knowledge, skills, and competence are reviewed to assess whether they will meet the expectations and underpin the evolving pharmacy technician role as integral to healthcare provision. Based on drivers, policy change, and the changing healthcare landscape, effectiveness of skill mix is analysed to establish whether this is being optimised to support person-centred pharmacy in response to the challenges and pressures faced within the NHS.]

Technology

[Personalised 3D printed medicines: optimising material properties for successful passive diffusion loading of filaments for fused deposition modelling of solid dosage forms](#)

Cerda, J.R. et al


Pharmaceutics, vol. 12(4)

April 2020

[Fuse deposition modelling (FDM) is a 3D printing technique that can be used to create a 3D pharmaceutical dosage form by employing drug loaded filaments extruded via a nozzle, melted and deposited layer by layer. FDM requires printable filaments, which are commonly manufactured by hot melt extrusion, and identifying a suitable extrudable drug-excipient mixture can sometimes be challenging. The authors propose the use of passive diffusion as an accessible loading method for filaments that can be printed using FDM technology to allow for the fabrication of oral personalised medicines in clinical settings.]

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