

NEL Prescribing and Medicines Newsletter

November 2025

Updates for Community Pharmacies across North East London

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1. Rybelsus® (oral semaglutide) - Formulation Change

Novo Nordisk® is replacing the current Rybelsus® formulations (3mg, 7mg, 14mg tablets) of Rybelsus® with new formulations with **higher-bioavailability** (1.5 mg, 4 mg, 9 mg tablets). During the transition period, both original and new formulations will temporarily co-exist on the market. This poses a potential risk of prescribing, dispensing and dosing errors due to the increased higher bioavailability in the new formulations.

System Updates

The new formulations have been added to the EMIS and SystmOne prescribing systems and are now available to prescribe and will therefore present for dispensing in community pharmacies.

Novo Nordisk® is working with system providers to mitigate risks by implementing additional safety alerts at dispensing (ProScript, SystmOne) level. These alerts are already live in ProScript, and SystmOne.

The original Rybelsus® strengths are expected to be **discontinued at the end of January 2026**.

Key Safety Information:

Rybelsus® is transitioning to a new formulation with higher bioavailability.

- This means lower milligram strengths will achieve the same therapeutic effect. The new formulation maintains the same efficacy, safety profile, and administration method as the original.
- Please refer to the healthcare professional correspondence for further details. This is available here- [Link](#)

Actions for Clinicians:

- Familiarise yourself with the new dose formulations and information above to ensure patient safety and prevent prescribing errors. Please refer to the healthcare professional correspondence for details - [DHPC Letter- Rybelsus 2G.pdf](#)
- Inform and counsel patients currently taking Rybelsus® about the upcoming change in formulation and dosage when prescribing or dispensing the new tablets.
- Patient educational resource has also been published on the [Medicines Compendium \(eMC\) website](#) that can be referred to and shared with patients when the new formulation is available to prescribe.

2. Field Safety Notice: FreeStyle Libre 3 and FreeStyle 3 Plus Sensors

Abbott has identified that certain FreeStyle Libre 3 and FreeStyle Libre 3 Plus sensors may give incorrect low glucose readings. Using a sensor that reports incorrect low glucose readings over time could lead to unnecessary carbohydrate intake or changes to insulin dosing, which may pose serious health risks and complications.

Action required:

Please ensure all team members are aware of the recent safety alert regarding certain FreeStyle Libre 3 and Libre 3 Plus sensors in the event patients present at the pharmacy with concerns regarding their blood glucose readings.

Inform your patients to check if their sensor is affected:

- Visit www.FreeStyleCheck.com
- Select “CONFIRM SENSOR SERIAL NUMBER.”
- Patients will need to locate their sensor serial number to determine if sensor is potentially affected.
- If sensor is identified as potentially affected, to stop using it immediately and dispose of affected sensor(s).
- Abbott will send a free replacement sensor

For further information, please refer to the MHRA field safety notice, which is available via the following link - [Field Safety Notices](#) - or contact Abbott Customer Service: 0800 170 11 77

3.MHRA Latest Drug Safety Updates

National Patient Safety Alert (NatPSA): Harm from incorrect recording of penicillin allergy and penicillamine allergy (CAS Alert 103270)

A new [national patient safety alert](#) was issued on 20 November 2025, highlighting the risk of harm from the incorrect labelling of penicillin allergy as penicillamine allergy. This error can result in patients with true penicillin allergy being prescribed penicillin antibiotics, with the risk of allergic reactions. The NHS NEL [Medicines Safety Quality Group](#) will provide on-going updates, support materials and guidance as the national work progresses.

Medicines Shortages

Creon® 10,000 and 25,000 gastro-resistant capsules remain in short supply, with resupply now expected by 29 January 2027.

For guidance on managing Pancreatic Enzyme Replacement Therapy (PERT) shortages, please see:

- [PERT medication shortages – Information for patients and families](#)
- [PERT medication guidance for community pharmacy Feb 2025 V1.0](#)
- [Pangrol® – Information for community pharmacy](#)

- [OPS New Customer Verification Form](#)

Specialist Pharmacy Service (SPS) medicines shortages

Please refer to the [SPS Medicines Supply Tool](#) for details of all current medicines shortages (free registration to access).

NHS Business Services Authority (NHSBSA) Serious Shortage Protocols (SSPs)

All active SSPs can be accessed [here](#).

Further information on medicines safety

- [Medicines Safety Newsletter \(London Region\) - Autumn 2025](#)

Please consult the following for further information on alerts, recalls, supply issues and medicines safety information [MHRA](#) tab on the Medicines Safety section of the Medicines Optimisation page on the Primary Care Portal.

4. Allergen concerns linked with SunVit-D3 and other prescribed supplements

[Allergy Aware UK](#), an independent UK-based initiative, has raised a patient safety concern about SunVit-D3®, an unlicensed vitamin D3 food supplement that the manufacturer confirms may contain traces of nuts and peanuts. Several allergic reactions have been reported nationally in patients prescribed unlicensed supplements containing allergens.

Unlicensed products lack an MHRA-approved Summary of Product Characteristics (SPC) and are not listed on the [Electronic Medicines Compendium \(EMC\)](#), so prescribers may not have full allergen or excipient information. This increases risk for patients with known food or excipient allergies.

Note: There is currently no notification from the Food Standards Agency (FSA) on this issue.

Recommended actions community pharmacy:

- Check allergy status when dispensing or supplying vitamin D supplementation to patients and the public.
- Confirm current allergen status with the manufacturer, as formulations and excipient sources can change.

5. Learning from a Prevention of Future Death (PFD) Report - Time Critical Medicines

The NEL Pharmacy and Medicines Optimisation team is sharing learning from a recent [PFD report](#) following a medicines-related safety event that occurred outside North East London.

The patient died from Sudden Unexpected Death in Epilepsy (SUDEP), likely linked to not receiving essential medication despite repeated attempts over two days. This case reinforces the need for timely access to medicines and robust processes for urgent supply.

Further guidance is available [here](#)

6. Formulary and Pathways Group Update

Approved Item / Guidance and Pathway	Additional information
Bezafibrate for Primary Biliary Cholangitis (PBC) and pruritus in Primary Sclerosing Cholangitis (PSC)	Formulary status change from Red to Amber 2 (Specialist initiation with maintenance in primary care). NEL Primary Care Prescribing Support Factsheet Bezafibrate
Cequa® (Ciclosporin) 0.9 mg/mL aqueous preservative-free eye drops (for the treatment of severe dry eye disease (keratoconjunctivitis sicca) in adult patients	Amber 2 specialist initiation and supply of 3 months treatment

7. Safe Prescribing of Home Enteral Tube Feeds for Adults and Children

The guidance note linked below supports the appropriate prescribing and supply of Enteral Tube Feeds (ETF). Feeds should not be supplied without an appropriate prescription and prescriptions should not be issued after a feed has already been supplied.

Guidance note: [13.10.2025-Pharmacy-MedOp-Guidance-Note-Development-Enteral-Tube-Feeds-Final-1.pdf](#)

Enteral Tube Feeding is classified as a medical treatment and has risks and benefits associated with its use. It should be prescribed by appropriate healthcare prescribers to meet the nutritional requirements for patients who cannot achieve adequate nutrition from food and/or for those who are unable to eat or drink safely. The provision of care, feeding supplies and information to ETF patients is complex and multifactorial, and involves several health care professionals and partner organisations. Therefore, effective collaboration between all healthcare professionals involved is essential.

8. Genomics England Survey for a new population study: Pharmacy input will be valuable

Genomics England is taking its first steps to explore the design of an adult population genomic research study, as set out in the NHS Ten Year Health Plan and the Life Sciences Sector Plan. The study aims to build evidence and digital systems to assess how genomics can be used in routine, preventative healthcare for adults. This study will also be considering pharmacogenetics.

As part of this exploratory work, Genomics England is working with RAND Europe, a policy research organisation, to understand the views of healthcare professionals on the future use of genomics for risk prediction, disease prevention, and prescribing.

Healthcare professionals in primary and community care are invited to complete a 10-minute survey on 'Healthcare Professionals: Views on Using Genetic Information in Healthcare'. Those who complete the survey may also be contacted for subsequent online workshops. All data collected will be handled in accordance with UK GDPR and the Data Protection Act 2018.

- **Survey link:** <https://www.thiscovery.org/landing/use-of-genomic-information-in-adult-healthcare>
- **Project page link:** <https://www.thiscovery.org/project/use-of-genomic-information-in-adult-healthcare>

9.Reminder: The ‘getUBetter’ Musculoskeletal (MSK) Self-Management App

NEL ICBs contract with the digital self-management app ‘getUBetter’ for muscle, bone and joint conditions, has been extended for another year across North East London.

This app is NICE approved and is part of the self-management pathway approved by NEL ICB. It has also been configured to our ICB MSK pathway and is updated regularly. ‘getUBetter’ is supported by local GPs and MSK clinicians to empower patients with safe, personalised recovery plans for every stage of their MSK journey - covering new, recurrent, and ongoing issues. It is suitable for approximately 80% of MSK patients and anyone aged over 16 years, helping reduce demand on GP practices and other services.

Community pharmacists can consider signposting patients presenting with MSK-related symptoms to ‘getUBetter’ during consultations. However, it is not recommended for individuals who require targeted physiotherapy or medical management, e.g. rheumatological conditions, bone injury or anterior cruciate ligament (ACL) injury.

Eligible conditions include:

Back pain	Neck pain	Elbow Pain
Shoulder pain	Ankle Pain	Tendinopathy – Arm
Back and leg pain	Knee pain	Hand
Sprains and Strains – leg	Hip Pain	

The app is available in 14 different languages with touch to speak function. It is free for all NEL patients, accessible to patients via app stores on desktop/tablet by scanning the QR code below or using this [link](#). A demonstration of the app is available [here](#).



10.SPS Webinar – Hypertension Care in Community Pharmacy

Strengthening Access and Recovery Through Blood Pressure Management

‘Primary Care Discussions: Hypertension Care in Community Pharmacy’ is an interactive webinar exploring how collaborative blood pressure management is transforming patient care in NHS Black Country ICB. A community pharmacist, GP, and primary care team will share practical insights on integrating the NHS Community Pharmacy Hypertension Case-Finding Service with pharmacy independent prescribing. This approach improves access, reduces GP workload, and supports early intervention to prevent cardiovascular disease—key priorities in the NHS 10-Year Plan.

Discussions will include real-world reflections on overcoming implementation barriers, benefits of delivering hypertension care in community settings, and the positive impact on patient outcomes and service efficiency. [Register here](#) with an NHS or work-based email. For queries, contact the [admin team](#) for this webinar.

11. Things You Might Have Missed

Inclusive Pharmacy Practice Week 2025 (24th – 27th November 2025)

Hosted by NHS England and CPPE, Inclusive Pharmacy Week offered a series of online interactive workshops exploring practical ways to create more inclusive workplaces and better patient outcomes. For further details on the workshops visit: [CPPE News: Inclusive Pharmacy Practice Week 2025: What's on?](#)

PrescQIPP Webinars

Wednesday 26th November - **Prescribing mastery- CKD- Session 1**

(Session 2 will be held on Wednesday 10th December 2025)

For more details on upcoming and previous webinars refer to: [Learning](#)

12. Contact Details and Additional Resources

CONTACT DETAILS

NEL ICB Pharmacy and Medicines Optimisation Team	Prescribing and medicines enquiries (HCP use only): nelondonicb.prescribingqueries@nhs.net
Specialist Pharmacy Service (SPS) Medicines Advice	For all patient specific clinical queries please use the following SPS contact: askspns.nhs@sps.direct
For all enquires, reporting concerns or incidents relating to Controlled Drugs	england.londonaccountableoffice@nhs.net Report CD incidents using the national reporting tool www.cdreporting.co.uk

RESOURCES

NEL Joint Formulary	https://www.nel-jointformulary.nhs.uk User guide: NEL netFormulary User Guide FINAL .pdf
Pharmacy & Medicines Optimisation Resources	https://primarycare.northeastlondon.icb.nhs.uk/home/meds/
Medicine Supply Shortages	Click here for SPS Medicines Supply Tool which offers up-to-date information on Medicines Shortages, provided by DHSC and NHSE/I. Register with SPS free-of-charge to access.
PGD Updates	UK Health Security Agency (UKHSA) – click here SPS – click here NHS England (NHSE) – click here
MHRA information	For all MHRA updates on alerts, recalls and safety information on drugs and medical devices Alerts, recalls and safety information: drugs and medical devices - GOV.UK
Learn from Patient Safety Events Service (LFPSE)	For reporting patient safety incidents and misses NHS England » Learn from patient safety events (LFPSE) service
Medicines Safety Tools - PrescQIPP	PrescQIPP - Medicines safety
Reporting suspected adverse effects/defects of medicines or devices – Yellow Card Scheme	Yellow Card Making medicines and medical devices safer

For your information:

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