NEL Prescribing and Medicines Newsletter

May 2026

Updates for Primary Care across North East London

Contents

1. Important update: Levemir® (insulin detemir) Discontinuation

Novo Nordisk is discontinuing **Levemir® Penfill®** and **Levemir® FlexPen®**. A recent Medicines Supply Notification highlights that, although UK stock is currently anticipated to last until December 2026, there is an increasing risk of earlier stock depletion, reinforcing the need for timely and coordinated switching.

Please refer to the NEL Guidance note for more information on this product discontinuation.

Actions for General Practice:

- **STOP** initiating new patients on Levemir® FlexPen® or Penfill®.
- Run clinical searches to identify all patients currently prescribed Levemir®. Searches are available on both EMIS and SystmOne across NEL practices, stored in practice support searches under '*Externally created resources*'.
- Prioritise review of patients currently prescribed Levemir® starting with Type 1 diabetic patients, complex patients requiring specialist care, paediatric and adolescent patients under the care of specialist diabetes teams who should be managed in accordance with specialist pathways.
- Check whether patients have a routine appointment with their diabetes specialist team scheduled before September 2026.
- If an appointment is scheduled after this date or no appointment is scheduled notify the relevant specialist service (secondary care or community) using the most appropriate route, e.g. Advice & Guidance (A&G) so an appointment can be scheduled before September 2026.
- Where primary care staff with diabetes specialist expertise or other suitably experienced clinicians are available, practices should prioritise all other patients for review in line with national clinical guidance.

- Diversify prescribing across recommended alternative insulins to support demand.
- Check stock availability using the SPS Medicines Supply Tool and SPS safety considerations when switching insulin before prescribing.

2. Domperidone 1mg/1ml oral suspension – shortage

Domperidone 1mg/ml oral suspension is affected by an ongoing supply issue and is expected to be out of stock until September 2026.

Actions for prescribers:

- Do not initiate new patients on domperidone 1mg/ml oral suspension until the supply issue has resolved. Parallel-import stock is reserved for paediatric patients only. Please see the SPS Medicines Supply Tool for further information.
- Domperidone 10mg tablets and orodispersible (Epzit®) 10mg tablets remain available and can support an increase in demand.
- Secondary care can only maintain supplies for internal use; on-going prescribing is expected to be managed in primary care.

3. Look-alike/sound-alike (LASA) prescribing errors: topical corticosteroids

The NEL Pharmacy and Medicines Optimisation team have been made aware of several LASA prescribing errors in which clobetasol propionate (Dermovate®), a very potent topical corticosteroid, has been prescribed to children without first trialling a lower-potency steroid. ClobetaSONE butyrate (Eumovate®) is a moderately potent topical corticosteroid and is a look-alike/sound-alike medicine to clobetaSOL propionate (Dermovate®).

Actions for prescribers:

- Prescribers should familiarise themselves with the BNF guidance on topical corticosteroid potencies and the MHRA Drug Safety Update.
- For children under 12 years, clobetasol propionate (Dermovate®) should be prescribed only **on specialist advice** and as an acute prescription; it should not be added to repeat medication.
- All staff involved in prescribing processes should be made aware of look-alike/sound-alike medicines (LASA), please note the PrescQIPP resources available (free registration required for access).

4. NICE guidance Type 2 Diabetes in adults: management update

Following the recent update to NICE NG28 Type 2 diabetes in adults: management, this guidance now supersedes the North East London (NEL) guidelines. The NEL guideline for the management of Type 2 diabetes should no longer be used.

Action for prescribers:

- Follow the updated NICE NG28 guidance when selecting first-line treatment options: NG28 Type 2 diabetes in adults: management guidance on choosing first line treatment options.
- Disregard the treatment recommendations in NEL guideline for the management of Type 2 diabetes.

5. Obesity Management Update

The updated NEL ICB Obesity Management Clinical Policy, setting out access to NICE-approved obesity management medicines is now available. *Read the full policy here.*

The update reflects QOF 2026/27 obesity indicators (OB004 and OB005) and the NICE Funding Variation for tirzepatide (Mounjaro®).

To support implementation, a webinar for NEL GP practices will take place on Wednesday 3rd June 2026, 1-2pm. Register here: Registration link

As the position on weight loss medicines continues to evolve, comments on the policy are welcome and will help inform future updates. Please send feedback to nelondonicb.prescribingqueries@nhs.net.

Practice clinicians can also join weekly obesity management drop-in sessions with a Barts Health Consultant Physician in Diabetes and Obesity to discuss clinical queries. Sessions will run on Tuesdays, 1-2pm, starting from 2nd June. Join here: Joining link

6. NEL Prescribing Quality Scheme (PQS): 2025/26 – 2026/27

Thank you to all practices for your continued engagement with the NEL Prescribing Quality Scheme (PQS) 2025/26.

Please be reminded that the current PQS scheme is an 18-month scheme running from March 2025 to 30th September 2026 and therefore covering both the 2025/26 and 2026/27 financial years.

Consequently, practices remain within the current scheme and should continue to work towards the final agreed targets and submission requirements.

Practices that achieved their midpoint targets by 31st December 2025, where applicable, have now received their advance payments in this month's payment cycle.

Please continue to review the scheme requirements and ensure timely submissions against the agreed milestones: NEL PQS 2025 2026 Summary v12 Final.docx.

Practices can monitor their progress against agreed indicators on their practice Co-ordinateRx webpage here: CoordinateRx dashboard Practice Links.xlsx

7. Reminder: GP Connect Access and Update Functions

GP practices are reminded that, in line with national contractual requirements (GMS, PMS and APMS regulations 2025), GP Connect functionality should have been fully enabled by 1st October 2025.

GP Connect composes of two key functions:

Access Record (Read Only):	**Update Record:**
Allows authorised professionals to view GP records, supporting safe clinical decision-making.	Allows community pharmacy teams to send structured consultation summaries directly into GP systems (via workflow), reducing reliance on NHSmail and manual processing including read coding by practice staff.

Why It Matters for Practices:

- Improves patient safety, information sharing and integrated patient care
- Reduces administrative burden and error from manual processing of documents
- Supports integration with Pharmacy First and related clinical services
- Essential for contractual compliance

There are approximately 60 practices in NEL that have not yet enabled the full functions of GP Connect, as required by the national GP contract.

Action for Practices:

- Confirm the GP systems are configured to have BOTH Access and Update record enabled.
- Please refer to the document here on how to enable GP Connect.

8. Items which should not be routinely prescribed in primary care – NEL position statement

A new NEL ICB Position Statement on items not routinely prescribed in primary care is now available on the Medicines Optimisation Portal.

The guidance supports NHS England guidance and the NEL Joint Formulary, with input from primary and secondary care clinicians. It includes:

- Items with **no** prescribing exceptions.
- Items that may be prescribed only in defined circumstances.

EMIS and SystmOne searches are available on the Medicines Optimisation Portal and within the EMIS/SystmOne CEG folder to help identify patients.

Patient information leaflets are also available for commonly prescribed items to support reviews and deprescribing discussions.

Action for practices:

- **Do not** initiate these items in new patients unless they meet the defined exception criteria and follow any specialist initiation or MDT requirements outlined in the guidance.
- Review existing patients prescribed these items and deprescribe or switch where appropriate, unless the defined exception criteria apply.

The position statement supports safe, appropriate and cost-effective prescribing across North East London.

9. NEL ICS Pharmacy Workforce Transformation Group – Primary Care representatives required

The NEL ICS Pharmacy Workforce Transformation Group has four priority workstreams (see table below) focused on pharmacy workforce development across North East London, identified through collaboration across all pharmacy sectors.

We are seeking Pharmacists, and Pharmacy Technicians based in PCN/GP practices or community pharmacies to join one or more workstreams through monthly one-hour meetings. If you would like to get involved - or stay informed and support delivery if you cannot attend meetings -, please contact ruma.rahman@nhs.net.

This is a great opportunity to help shape pharmacy workforce transformation and expand your network across partner organisations in North East London.

Pharmacy Workforce Workstreams:	Newly Qualified Pharmacist Prescribing	Designated Prescribing Practitioners (DPPs)	Pharmacy Technician	Supervision
Aim:	To create a clear and structured development roadmap that enables newly qualified independent prescribing pharmacists to effectively utilise their qualification.	Increase number, quality and diversity of DPPs. Quality assurance on DPP training.	Upskilling and retention of pharmacy technician across sectors.	Establish what current clinical supervision looks like across sectors for: - Newly qualified, - post Independent Prescribing qualification or - other post graduate training. Create guidance for clinical supervision in priority areas

10. NEL ICS Pharmacy Workforce Transformation Group - Surveys

The NEL Pharmacy Workforce Transformation Group is seeking feedback to support three key workstreams. We would appreciate your support in completing the short surveys below (each takes less than 5 minutes):

(i) NEL Pharmacy Technician Development Scoping Survey
Help us understand current development opportunities for Pharmacy Technicians across NEL and identify future career progression support needs.
Deadline: 31 May 2026 - NEL Pharmacy Technician Development Scoping Survey 2026

(ii) Designated Prescribing Practitioner (DPP) Survey
We are gathering feedback from current and aspiring DPPs, including interest in joining a future DPP supervision support database. Responses are anonymous.
Deadline: 1 June 2026 - NEL Pharmacy DPP Survey 2026

(iii) NEL Supervision Scoping Survey
Share your insights on current clinical supervision arrangements for pharmacy professionals and support staff across sectors.
Deadline: 15 June 2026 - NEL Pharmacy Supervision Survey 2026

11. Formulary and Pathways Group (FPG) Updates

Approved Item / Guidance and Pathway	Additional information
NEL Position statement: Items which should not be routinely prescribed in primary care in North East London and supporting Patient Information Leaflets	Medicines Position Statements – NEL – North East London
Travoprost 0.004% preservative-free eye drops (Visutrax®)	**Amber 2**: Initiated by ophthalmology specialist, 1 month supply on initiation by hospital and thereafter supply from primary care

Losartan + hydrochlorothiazide tablets (For the treatment of complex hypertension)	**Green**: Medicines that can be initiated in primary and secondary care.
BHRUT Shared Care Guidelines expiry extension until Oct 2026 for the following: • Apomorphine (Parkinsons disease) • Methotrexate (inflammatory bowel disease, psoriasis, pulmonary sarcodosis) • Cinacalcet (primary hyperparathyroidism) • Degarelix (prostate cancer) • DMARDs – azathioprine, hydroxychloroquine, leflunomide, methotrexate, mycophenolate, sulfasalazine (rheumatology) • Enoxaparin (thromboembolic disease obstetrics and non-obstetrics)	

12. PrescQIPP Updates

PrescQIPP Bulletins: Bulletin 376. Teratogenic medicines, link can be found here: Bulletin 376. Teratogenic medicines

PrescQIPP Podcast: Talking Meds Episode 42. Medication safety initiatives, link can be found here: Talking Meds Episode 42. Medication safety initiatives with Emma Kirk

PrescQIPP Virtual Professional Group: Care homes: Addressing overprescribing in frail older people living in care homes. Register here: Microsoft Virtual Events Powered by Teams

Not registered with PrescQIPP yet? You can register free of charge to access PrescQIPP resources by clicking here. Please select "ICS North East London" as the organisation.

13. Contact Details and Additional Resources

CONTACT DETAILS	
NEL ICB Pharmacy and Medicines Optimisation Team	**For prescribing and medicines enquiries:** nelondonicb.prescribingqueries@nhs.net
Specialist Pharmacy Service (SPS) Medicines Advice	For all patient specific clinical queries please use the following SPS contact: asksps.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	
For **NEL Joint Formulary**	https://www.nel-jointformulary.nhs.uk User guide: NEL netFormulary User Guide FINAL .pdf
For **Pharmacy & Medicines Optimisation Team** Resources	https://primarycare.northeastlondon.icb.nhs.uk/home/meds/
For **PGD Updates**	UK Health Security Agency (UKHSA) – click here SPS – click here NHS England (NHSE) – click here
For **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.

For **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
For **Medicines Safety Tools - PrescQIPP**	PrescQIPP - Medicines safety
For **reporting suspected adverse effects/defects of medicines or devices – Yellow Card Scheme**	Yellow Card | Making medicines and medical devices safer