



Learning from incidents

48 hour report Bow ward – Patient X recommended Colecalciferol 40,000 units ONCE weekly by the GP for 7 weeks.

Ward doctor prescribed 40,000 units ONCE daily for this patient. The patient had received this dose for a number of weeks

Immediate actions : identified by pharmacy and medication immediately stopped. Bloods were taken to assess toxicity

Findings

- Error was not recognized by clinician, pharmacy and nurse for a number of weeks. Dose was considered normal.
- >6 weeks bloods reported back as
 - 25 OH Vitamin D 304 nmol/l
 - Corrected calcium 2.31 mmol/l
- No signs or symptoms associated with vitamin D toxicity

Learning

- Vitamin D < 25nmol/l – prescribe 40,000 units ONCE weekly or 20,000 units TWICE weekly for 7 weeks followed by lifelong maintenance dose.
- Vitamin D toxicity manifest mainly through hypercalcemia leading to deposition of calcium in the soft tissues.
- Clinical features of hypercalcemia include N+V, diarrhoea, constipation, lethargy, polyuria, sweating, headache and vertigo.

MHRA: Drug Safety Updates

1. Methylphenidate (MR) Preparations- caution if switching between products due to differences in formulations

- Different release profiles may affect symptom management. Biphasic release profiles are not all equivalent and contain different proportions of the IR and MR components.
- Caution should be used if LA formulations of methylphenidate are used interchangeably due to the differences between formulations in dosing, frequency, administration with food, amount and timing of the modified release component and overall clinical effect.

- If a switch is needed
 - Consult with the patient and discuss possible changes they may experience in symptom management and side effects
 - Reiterate the instructions for use for the newly prescribed formulation especially whether it should be taken with or without food.
- Clinical guidelines advise to prescribe long acting formulations of methylphenidate by brand name or use generic name specifying the manufacturer

2. Nebulised asthma rescue therapy in children – home use of nebulisers in paediatric asthma should be initiated and managed only by specialists

- Nebulisers purchased independently of medical advice for use in the home to deliver asthma medicines can mask deterioration of asthma
- Only specialists in asthma should initiate and clinically manage use of nebulisers

ELFT Flu vaccination programme 2022/23

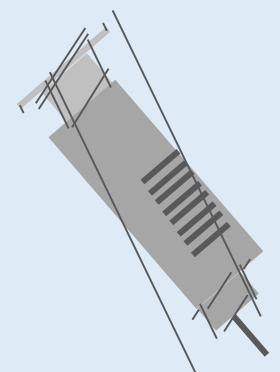
The influenza campaign has now started. Watch out for posters around your place of work as to when the next flu clinic will take place. Information will also be added to the intranet.

The flu vaccination is safe and effective. It's offered every year through the NHS to help protect people at risk of getting seriously ill from flu.

The trusts public health team have provided some Q&A on the staff intranet.



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Clinical alerts

Alert 17 ELFT VTE screening and assessment

VTE is a multifactorial disease that encompasses pulmonary embolism and DVT. Evidence suggests there is an association between antipsychotic drugs and an increased incidence of VTE.

**CLINICAL
ALERT**

Advice for staff

- Clinicians to ensure that all patients on antipsychotics are screened and assessed for VTE.
- Pharmacy teams to actively review adherence to this and support clinicians with completion of this in a timely manner (14 hours) to reduce risk to our patients.
- The risk assessment needs to be documented and recorded on RIO patient electronic template under physical health.

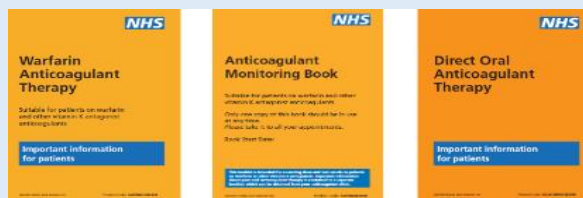
Medicine Shortages

1. [Aripiprazole Oct 22 – Shortage of the tablets.](#)
Please refer to memo for additional advice.
2. Fluoxetine 20mg/5ml liquid – currently no stock. Advice is to open capsules and disperse in 20mls of water to administer dose (Unlicensed).
3. Venlafaxine 75mg tablets – out of stock. To use the 37.5mg tablets to obtain dose.
4. Temezepam 10mg/20mg tablets – limited supply. Not to initiate any new patients on temezepam 10mg/20mg tablets. Consider switching to an alternative hypnotic at an equivalent dose (i.e diazepam alongside a slow withdrawal)

Consult your local pharmacy team for any support



- The old NPSA patient information resources for anticoagulation therapy have been reviewed and updated.
 - Updated alert card
 - Updated warfarin information/monitoring book
 - Updated anticoagulant folder
 - New DOAC information book
- New resources will be introduced as the old versions are used up



Safety update: Pregabalin during pregnancy

The MHRA has strengthened its warning about avoiding pregabalin during pregnancy after new data showed an increased risk of major congenital malformations associated with the drug.

Pregabalin is commonly used to treat peripheral and central neuropathic pain, generalised anxiety disorder and epilepsy.

Clinicians should provide counselling to patients using pregabalin on the potential risks to an unborn baby and the need to use effective contraception during treatment.

Safety update: Metformin and vitamin B12

Metformin can commonly reduce Vitamin B12 levels in patients, which may lead to B12 deficiency. The risk of low Vitamin B12 levels increases with higher metformin doses, longer treatment duration and in patient with risk factors for deficiency.

Key HSIB reports

1. [Medication omissions in learning disability secure units.](#)
2. [Administering high- strength insulin from a pen device in hospital](#)
3. [Unintentional overdose of morphine sulphate oral solution](#)