

Prescribing and Medicines Optimisation Guidance (9)

Wednesday 22nd April 2020

Updated information about medicines NSAIDs:

Acute use of non-steroidal anti-inflammatory drugs (NSAIDs) in people with or at risk of COVID-19

[NHS England Rapid Policy Statement](#) effective from 14th April 2020

This document sets out the clinical policy for the acute use of non-steroidal anti-inflammatory drugs (NSAIDs) in people with or at risk of COVID-19. The evidence review aimed to assess the best available evidence to determine whether there is any increased risk of developing COVID-19 in people using NSAIDs acutely, and whether using NSAIDs acutely can lead to an increased risk of developing more severe symptoms of COVID-19.

In summary

- The available evidence suggests that, although the anti-inflammatory effects of NSAIDs reduce acute symptoms (such as fever), they may either have no effect on, or worsen, long-term outcomes, possibly by masking symptoms of worsening acute respiratory tract infection.
- There is currently no evidence that the acute use of NSAIDs causes an increased risk of developing COVID-19 or of developing a more severe COVID-19 disease.

Advice from the European Medicines Agency (EMA)

- When starting treatment for fever or pain in COVID-19, patients and healthcare professionals should consider all available treatment options, including paracetamol and NSAIDs.
- Each medicine has its own benefits and risks which are reflected in its product information, and which should be considered along with national treatment guidelines, most of which recommend paracetamol as a first treatment option for fever or pain.
- These medicines should be used at the lowest effective dose for the shortest possible period.

There is currently no reason for patients taking ibuprofen or other NSAIDs for chronic diseases to interrupt their treatment.

Oral Nutritional Supplements (ONS) sample service

Fresenius Kabi has temporarily suspended the Fresubin® ONS sample service. The company has taken this step in order to prioritise the availability of stock and resource with the aim of ensuring that all non-sample orders for hospitals, homecare patients and wholesalers who are supplying local pharmacies, can be fulfilled.

To maintain the supply chain do NOT over order any medicines

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Product Name Changes

There have been changes to product names for some commonly used items. The constituents in each case remain the same.

Emollients:

Former name	New name
Isomol gel	Epimax Isomol gel
Epimax cream	Epimax Original cream

The new names for Epimax cream and Isomol gel are already in use on EMIS but not yet on SystmOne.

Epimax cream and Isomol gel have been marked as 'DM&D- unmatched' on EMIS and therefore cannot be sent via EPS prescription. Any repeat prescription containing the former name will need to be edited to the new name, either by removing the former named product and adding the new named product or by using the generic/trade button. The DAC box on EMIS will be automatically ticked; **untick** this, otherwise the prescription will be sent to an appliance contractor or will print out as a paper FP10.

This does not affect SystmOne practices at the moment, but may do in the coming weeks

Eye Ointment:

Former name	New name
VitA-POS eye ointment	Hylo Night eye ointment

This change is not currently showing on EMIS or SystmOne

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