

# Prescribing and Medicines Optimisation Guidance

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**1. DHSC COVID-19 Therapeutic Alert: Antimicrobials (azithromycin and doxycycline) not beneficial in the management of COVID-19 positive patients. ([Link](#))**

Azithromycin and doxycycline should NOT be used in the management of confirmed or suspected COVID-19 infection within primary care unless there are additional indications for which its use remains appropriate (see product details).

The recent announcement from the National Institute for Health Research (NIHR) supported PRINCIPLE trial demonstrates the vital importance of robust clinical trials in our response to COVID-19. The lack of beneficial effect in patients aged over 50 who are treated with either azithromycin or doxycycline at home in the early stages of COVID-19 suggests that these antibiotics should not be used within primary care for the treatment of COVID-19 unless there is an additional licensed indication. Overuse of antibiotics in the community can contribute to antimicrobial resistance.

**2. UK Chemotherapy Board: Clinician FAQs and guidance on COVID-19 vaccine for patients receiving systemic anti-cancer therapy. 21 January 2021.**

This document has been produced in response to questions raised by cancer health care professionals relating to the administration of the Pfizer/BioNTech COVID-19 vaccine and the Oxford University/AstraZeneca COVID-19 vaccine in patients receiving systemic anti-cancer therapy (SACT). This FAQ document covers all tumour groups receiving chemotherapy and is relevant to all clinical staff involved with the management of patients within these tumour groups. This document is available on the UK Chemotherapy Board's publication page via [www.ukchemotherapyboard.org/publications](http://www.ukchemotherapyboard.org/publications)

### **3. Vaccinating people starting immunosuppressive treatment**

The Green Book Chapter 14a has been updated with advice for people about to start new immunosuppressive treatment ([Link](#)).

The Arthritis and Musculoskeletal Alliance (ARMA) have also produced a working document entitled Principles for COVID-19 vaccination in musculoskeletal and rheumatology for clinicians. This is being updated as new information becomes available. This advice includes safety concerns, interactions with ongoing treatment and cautions and contraindications. This is available on the ARMA website ([Link](#)).

### **4. SPS Summary of COVID-19 medicines guidance: Nutritional and inherited metabolic disorders ([link](#))**

The Specialist Pharmacy Service (SPS) guidance summarises and signposts to medicine related guidance from professional and government bodies relating to coronavirus and nutritional and inherited metabolic disorders.

### **5. Green Book advice regarding co-administration of COVID-19 vaccine with other vaccines ([Link](#))**

The Green Book advises scheduling of vaccines to be separated by an interval of at least 7 days to avoid incorrect attribution of potential adverse events. As both of the early COVID-19 vaccines are considered inactivated, where individuals present having received another inactivated or live vaccine, COVID-19 vaccination should still be considered. The same applies for other live and inactivated vaccines, where COVID-19 vaccination has been received first or where a patient presents requiring two vaccines. In most cases, vaccination should proceed to avoid any further delay in protection and to avoid the risk of the patient not returning for a later appointment. In such circumstances, patients should be informed about the likely timing of potential adverse events relating to each vaccine.

**For COVID-19 vaccine related updates, please refer to the regular NHSE&I Primary Care Bulletins.** Please click on this link to subscribe ([Link](#))

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*Previous bulletins can be found at:*<https://gp-portal.westhampshireccg.nhs.uk/medicines/covid-19-medicines-information/covid-19-medicines-optimisation-bulletins/>