

Prescribing and Medicines Optimisation Guidance

Issue: 42

Date: 10th March 2021

1. Guidance on issuing the new Steroid Emergency Cards

The Society for Endocrinology, the Specialist Pharmacy Service (SPS), and the British Association of Dermatology (BAD) have produced the following guidance:

Exogenous steroids, adrenal insufficiency and adrenal crisis—who is at risk and how should they be managed safely. ([Link](#))

This is in response to the national patient safety alert (NatPSA) of August 2020 ([Link](#)) promoting the use of a new Steroid Emergency Card to support the early recognition and treatment of adrenal crisis in adults. The NatPSA advising actions are to be completed as soon as possible and no later than 13 May 2021.

Please see the tables included in the guidance for advice for dose thresholds for issuing a Steroid Emergency Card to patients taking:

- Oral glucocorticoids
- Intra-articular glucocorticoid injections
- Inhaled glucocorticoids
- Nasal glucocorticoids
- Nasal glucocorticoids plus inhaled glucocorticoids
- Steroid eye drops
- Topical glucocorticoid creams and ointment
- Rectal glucocorticoids

For **oral prednisolone**, Steroid Emergency Cards should be given to patients who have received:

- a long-term course of glucocorticoids (4 weeks or longer) at a dose equivalent or higher than prednisolone 5mg (see Table 1 in the guidance)
- 3 or more short courses of high-dose oral glucocorticoids within the last 12 months, and for 12 months after stopping (see Table 2 in the guidance)

Ardens templates are available to help identify patients that require a Steroid Emergency Card. However, these will need clinical review to filter out the relevant patients.

2. Hay fever: continue to promote self-care

With the start of hay fever season, please continue to promote self-care by encouraging patients to visit their community pharmacy for advice and treatment. Many preparations can be purchased by patients from pharmacies and supermarkets without a prescription. Patients do not always realise that a wide range of hay fever medications are available without seeing their doctor and that these medications are often cheaper than NHS prescription fees. Fexofenadine 120mg is also now available over the counter for the relief of symptoms associated with seasonal allergic rhinitis (hay fever) in adults and children aged 12 years and over.

3. University Hospitals Southampton (UHS) allergy advice and guidance for COVID-19 vaccination

University Hospital Southampton (UHS) has developed a form for GPs to complete when requesting advice for managing patients with anaphylaxis or who have had an allergic reaction to the first dose of their COVID-19 vaccination.

[You can see a facsimile of the form here – third page.](#)

The form is available on Ardens and will need to be attached as an advice and guidance request to UHS via eRS, using the new service details **7974034 Allergy-COVID Vaccine Concern – (Advice & Guidance)-Southampton-UHSFT-RHM.**

A pathway for managing patients who have had an allergic reaction to their first dose is included with the form, to support GP decision making. More detailed information can also be found in the Green Book ([Link](#)). Please refer to the Green Book before referring to the allergy service for advice. Where there is doubt, rather than withholding vaccination, appropriate advice should be sought.

4. Fentanyl patches -Shared learning

A local patient presented to an Emergency Department with increased confusion and shortness of breath and was admitted for treatment of community acquired pneumonia. The patient, who had significant visual impairment lived at home with his wife who had dementia.

Shortly after admission, the patient was discovered to be wearing four fentanyl patches (200 micrograms/hr total). His treatment plan was reviewed, and he was treated for possible opioid toxicity after which his consciousness levels (GCS) improved. Sadly, the patient deteriorated, and he passed away the next day.

The patient had recently had the dose of fentanyl patch increased. A review highlighted the importance of ensuring that patients know how to use fentanyl patches, the need to remove the old patch before applying a new one, the correct interval between patches and how to safely dispose of used patches.

Fentanyl is a potent opioid; a 50 microgram/hour patch is equivalent to 120mg morphine/day.

A previous MHRA alert: Serious and fatal overdose of fentanyl patches 2014 highlights the importance of patient information at the point of prescribing and dispensing ([link](#)).

**Prepared by Anita Bhardwaj, Sue Wakelin and Dr Emma Harris
On behalf of the Hampshire and IoW CCGs Medicines Optimisation Teams**

Previous bulletins can be found at:

<https://gp-portal.westhampshireccq.nhs.uk/medicines/covid-19-medicines-information/covid-19-medicines-optimisation-bulletins/>

For COVID-19 vaccine related updates, please refer to the regular NHSE&I Primary Care Bulletins.
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