The prescribing of antivirals for Hepatitis B*

From April 1st 2013, NHS England (NHSE) became the responsible commissioner for a number of drugs previously commissioned by PCTs. The list of drugs includes mainly hospital only drugs but also some shared care drugs. This responsibility is complicated by some drugs being funded by NHSE for certain indications but by the CCG for others for example rituximab would be funded by NHSE when used for cancer indications but by the CCG when used for rheumatoid arthritis. We will write to GPs, in due course, on other aspects of impact of NHSE commissioning. This month the Prescribing Programme Board will focus on oral antivirals used for the management of Hepatitis B.

NHSE is the responsible commissioner for Hepatitis B drugs and hospitals prescribing Hep B antivirals are reimbursed by NHSE for the cost of supplying these drugs.

When the list of NHSE commissioned drugs was published, we sought clarity from NHSE about management of patients in City & Hackney where, unlike other parts of London, Hep B antivirals are prescribed in primary care. NHSE advised that prescribing of Hep B antivirals for treatment naïve patients should remain in hospital. They recognised that ideally existing patients would also receive their medicines in hospital however they warned against an immediate wholesale repatriation of prescribing which may destabilise supplies to patients.

The JPG has been discussing this issue over the last few months and from the October meeting the following agreements were made:

- All new/ treatment naïve patients will receive on-going antivirals from HUHFT
- HUHFT will be putting in place a Homecare supply service to facilitate provision of antivirals direct to patients
- HUHFT – by January 2014 – will have systems in place to ensure that all Hep B patients (new and existing) will be supplied their antivirals by HUHFT

* Adefovir, lamivudine & tenofovir have historically been prescribed in primary care via shared care with HUHFT
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Advice for Practices

For treatment naïve patients

Practices may want to consider using the “Inappropriate prescribing request communication form” [available on the Formulary pages of the CCG website: http://www.cityandhackneyccg.nhs.uk/gp/GResources/Prescribing/inappropriate-prescribing-request-communication-form.htm] to respond to hospital requests for continuation of antiviral prescriptions.

For existing patients

(i) Please start having a discussion with your current Hep B patients (who receive their antivirals via the Practice), that from mid-January the hospital will be responsible for on-going repeats to their antivirals.

(ii) Please arrange for patients from mid-January to receive their medicines from the hospital [we will be drafting and circulating to GPs a template that practices may wish to adopt]

(iii) For patients that you know have a pre-planned appointment in the hepatitis clinic before January – the practice may wish to write to the hospital now to ask that the hospital continues future prescriptions from the date of the next hospital appointment.

It is very important that throughout this process, patient supplies of antivirals are not compromised. Please continue to prescribe until you have confirmation (from the patient and/or hospital) that supplies are being made for that individual by the hospital or where the patient has been unable to obtain a hospital supply in the time frame intended. Please call the medicines management team to assist (please do not email us patient identifiable information) if you encounter any problems with this transfer.

We will work with HUHFT Pharmacy to ensure that they are on track to have their systems in place by 13th January. Ahead of this date please do not send all your patients back to the hospital for their repeats of antivirals. Certainly do make use of planned patient appointments at the hepatitis clinic but it is important that we await the implementation of safe, transparent arrangements by the hospital before all prescribing for existing patients is repatriated.

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