

17/06/2021

Dear Extended hours and Minor Illness team,

Please see below summary of relevant updates/ MHRA.

I also wondered whether anyone would like to join an education/ update WhatsApp group to help disseminate information/ discuss issues. At Kingston health Centre we have found this to be a really useful way of sharing information in a timely way.

We also produce short (10-15 minute) recorded webinars with clinical updates – these maybe useful, particularly to those of you not affiliated with a specific practice and I would be happy to share them (we do via whatsapp so they can be easily accessed).

Topics so far:

- Cancer update  
Change to Asthma management update
- Chronic Pain and antidepressants
- Lipids and VTE
- Tinnitus
- Breast pain
- Contraception
- Immunoglobulins and eosinophilia

If you would like to be added to a EH/ MI group please send me a text/ whatsapp – **07796 304969**

### Updates

#### Management of symptomatic patients post AZ vaccine

Most patients are now receiving the Pfizer vaccine now (all under 40's) but some patients are having a second dose of AZ and may present concerned that their symptoms represent Vaccine induced Thrombosis and Thrombocytopenia (VITT)

Symptoms of concern > 4-28 days post vaccine:

- Persistent or severe headaches, seizures or focal neurology
- SOB/ Chest or abdominal pain
- Swelling, redness, pallor or cold lower limbs

The below link is a useful resource produced by RSEM and explains how these patients are handled in the emergency department.

<https://www.rcem.ac.uk/docs/Policy/ED-AM%20%20Vaccine%20pathway%20concerns%20-%20RCP%20-%20SAM%20-%20RCSEM.pdf>

### Pulmicort for covid in community

The CMO update has reported the trial of budesonide (they used pulmicort turbohaler 800mg bd) shortened the length of covid symptoms in community patients by an average of 3 days, although it did not reduce their risk of hospitalisation or death. So they have advised although it is an unlicensed indication, we can consider it for patients with covid symptoms in the last 14 days who are over age 65 or over 50 with a risk factor. The patients can use this for up to 2 weeks.

### Delta variant

The delta variant of Covid is presenting with slightly different symptoms – rhinorrhoea/ sore throat/ headache (as well as the usual symptoms) we are being encouraged to be aware of this even in patients who think they have hayfever and to encourage testing .

### Yellow card scheme

Encouragement to use the yellow card scheme if there are possible covid vaccine side effects

### PEG laxatives and thickeners

There is a new potential interaction between macrogol/movicol and some thickeners used for our patients with poor swallow. Unfortunately it counteracts the thickener, so the patient is left with a watery liquid and aspiration risk. As obviously dysphagia and constipation often coexist, this is one to look out for. Other agents for constipation should be used.

### Magnets

If a child is suspected of swallowing a strong magnet, should be referred to A&E, as there is a risk of bowel necrosis if they have managed to swallow two.

### Audit Plan

As you know, for clinical governance purposes, the Chambers team carry out regular audits. Clinical records audits and more specific audits.

Over the next quarter I will be doing the following audits

1. Re-audit for antibiotic prescribing
2. Opioid/ Gabapentinioid prescribing audit
3. New notes audit for all new GP's into the service
4. Regular note taking audit

If you have any questions or suggestions please let me know

Bw

Rick

Dr Richard Hughes  
Clinical Lead