1 Reason for the review

The advantage of enteric-coated tablets is speculative only and there is little, if any, good evidence to recommend their use. The side effects associated with prednisolone therapy are associated with systemic effects rather than a local irritant action of the drug.
Therefore it is proposed that uncoated (plain) steroid tablets should be used in preference to the enteric coated tablets for the vast majority of new prescriptions as they are more cost effective.
Long term users of corticosteroids should be switched to plain tablets plus gastro-protection (PPI).
Short courses should not normally need gastro-protection but clinicians may wish to offer a PPI to certain at risk patients.

Patients at high risk of developing corticosteroid-induced ulcers include:
• Co-administration of NSAIDs
• Total dosage of greater than 1000mg prednisolone equivalent
• Duration of therapy longer than 30 days
• History of peptic ulcer disease (PUD)
• Patients aged over 65 years

<table>
<thead>
<tr>
<th>Preparation</th>
<th>Cost 28 tablets (Dec 09 tariff prices)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prednisolone plain</td>
<td>1mg £1.02 5mg £1.09</td>
</tr>
<tr>
<td>Prednisolone enteric coated</td>
<td>2.5mg £5.58* 5mg £5.63</td>
</tr>
<tr>
<td>Omeprazole 20 mg capsule</td>
<td>£1.77</td>
</tr>
</tbody>
</table>

*Patients taking 2.5mg ec tablets may need to have their dose reviewed in order to change to a plain tablet and therefore will need to be reviewed on a patient to patient basis. Patient numbers are likely to be very small in comparison to the 5mg ec tablets.

2 Inclusion Criteria

Search for all patients prescribed prednisolone on repeat (and acute where possible) prescription within the last 6 months.

3 Exclusion Criteria

• Previous intolerance to plain, uncoated prednisolone.
• Patients with terminal cancer
• Previous switch to an alternative product which caused distress
• Any individual patient exclusions deemed necessary by the GP. (e.g. patients who are deemed to be not open to change, as judged by the GP)

4 Preparation and planning

Implementation of audit in selected GP practices Prescribing Support Team is as follows:
• Protocol to be discussed with all GPs in the practice to ensure that agreement to proceed is reached
• Computer search of all patients according to the inclusion criteria
• Review of patients medical notes and repeat prescribing records
• Two lists produced:
  ○ List of patients who are on regular short courses prednisolone ec who can be switched to
| Action | Letters written to all patients outlining the reasons for the switch or stopping to ensure they are fully informed and given an opportunity to discuss the switch with either their GP or practice pharmacist. (Appendix 1)  
Admin staff in practices to be made aware of changes of repeat medication.  
Local pharmacies to be informed of need to amend stock and of counselling for patients (copy of patient letters supplied)  
Report for practices will include number of switches made by the pharmacist/technician and projected cost savings as a result of the recommendations.  
Review to be undertaken by: | GP Authorisation: | Date: |
Dear Mr/Mrs __________

As part of a review of prescribing, NHS Dumfries and Galloway are currently reviewing all patients prescribed enteric coated (ec) prednisolone tablets (red tablets).

Enteric coated tablets are designed to protect the stomach against possible side effects from prednisolone, however, there is little, if any, evidence which shows that they do this. The stomach effects are *not* caused by direct irritation of the stomach when it comes in contact with the tablet, therefore the enteric coated tablets, do not offer any advantage over plain uncoated tablets, yet are much more costly. If you do need extra protection for your stomach, a medicine called omeprazole will be offered instead and this gives you better protection.

The next time you request **enteric coated prednisolone tablets** you will notice we have changed your prescription to **plain prednisolone tablets (and omeprazole 20mg capsules, One daily to be taken for stomach protection)**

This change has been made to help doctors to continue to use high quality treatments while making the most effective use of available resources.

We propose to introduce the change with your next prescription. Please finish your tablets as normal and then start the new tablets as directed.

Should have any queries, please contact the Surgery on the number above or, alternatively, you can contact a member of the Prescribing Support Team on

Yours sincerely

Name

Prescribing Support Technician
On behalf of the Doctors
# Prednisolone EC Review - Audit Data Collection Sheet

<table>
<thead>
<tr>
<th>SURGERY:</th>
<th>DATE:</th>
<th>UNDERTAKEN BY:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patients name/DOB</td>
<td>Prescribed medication and dosage</td>
<td>Indication</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>