East Lancashire Health Economy Medicines Management Board
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MHRA Drug Safety Update

May 2017

MHRA Regulating Medicines and Medical Devices

New CPD e-learning module on reporting suspected adverse drug reactions

The MHRA has created a new free e-learning module for all healthcare professionals to learn about the importance of reporting suspected adverse drug reactions (ADRs). The e-learning module can be accessed at http://www.scopejointaction.eu/outputsandresults/adr-collection/awareness-levels/story.html. The European Accreditation Council for Continuing Medical Education (EACCME), an institution of European Union of Medical Specialists (UEMS), has given the module the highest order of accreditation. Doctors are awarded 1 EACCME credit (1 hour) on completion of the 45 minute ADR e-learning module.

Other e-learning modules on ADRs are also available specifically for pharmacists and nurses and these also count for Continuing Professional Development (CPD) credits. Please see https://www.gov.uk/guidance/the-yellow-card-scheme-guidance-for-healthcare-professionals#further-guidance-and-online-learning for further information.

Reporting ADRs is part of the responsibilities of healthcare professionals and their team. These responsibilities include informing patients and carers about how they can help by reporting suspected side effects themselves. Duplicate reports can be detected by our systems so please do not hesitate to complete a Yellow Card report. The quickest way to send a report is through the Yellow Card website, https://yellowcard.mhra.gov.uk/, or the free Yellow Card app https://itunes.apple.com/gb/app/yellow-card-mhra/id99023748 for iOS or https://play.google.com/store/apps/details?id=uk.org.mhra.yellowcard&hl=en_GB for Android. Yellow Cards act as an early warning system to help the MHRA to identify and characterise important safety issues, many of which were not recognised as being related to a particular medicine until reports were received.

Retigabine (Trobalt) discontinuation: important reminder

GlaxoSmithKline (GSK) is reminding healthcare providers that retigabine (Trobalt) tablets (50mg, 100 mg, 200 mg, 300 mg, and 400 mg) will no longer be available after June 2017. GSK intends to discontinue the product permanently. This is due to the very limited usage of the medicine and not for reasons of efficacy or safety.

Retigabine is indicated as adjunctive treatment of drug-resistant partial onset seizures with or without secondary generalisation in patients aged 18 years or older with epilepsy, where other appropriate combinations with other medicinal products have proved inadequate or have not been tolerated.

Action required by healthcare providers

- All patients must be withdrawn from retigabine by the end of June 2017. Healthcare providers are urged to safely transfer any remaining patients on retigabine to an alternative medication where required, at the discretion of the treating physician.
- Withdrawal of a patient from retigabine should be gradual and take place over a period of at least 3 weeks, in accordance with the prescribing information.
- From now on, healthcare providers should not begin treating any new patients with retigabine