

# AWP PSYCHOTROPIC MEDICATION FORMULARY

The Trust has a formulary which lists medicines which have gone through an evidence-based review process and been agreed as safe and cost-effective to use. This review process also takes into consideration national standards such as NICE and MHRA data.

In general, where a medication is listed as 'formulary', all **licensed** preparations and indications as they apply to mental health settings are included in this. Where there are exceptions with regard to indication, brand or formulation, these are indicated.

This is not a clinical guideline although there is some signposting to relevant guidance. Prescribers are expected to apply their knowledge and skills to determine which preparations are most suitable for prescribing in any situation. Whenever possible, this decision should also be shared with the service user. The AWP Medicines Policy and associated procedures must be followed.

## APPLYING TO PRESCRIBE OUTSIDE THE FORMULARY

Some non-formulary medicines are indicated below, but any mental health drugs not explicitly included in the formulary must also be considered non-formulary. The Trust recognises that the use of non-formulary medicine can be appropriate. The process to follow when a prescriber wishes to prescribe a non-formulary medicine is outlined in an associated Trust procedure. Consultants should also follow this procedure to apply for a medicine to be added to the formulary.

## INTERFACE WITH PRIMARY CARE

AWP interfaces with four formulary groups which include representation from primary and secondary care organisations.

<a href="#">3Ts</a>	Swindon and North Wiltshire
<a href="#">BCAP</a>	Bath and West Wiltshire
<a href="#">BNSSG</a>	Bristol, North Somerset, & South Gloucestershire
<a href="#">Salisbury</a>	Salisbury and South Wiltshire

## AWP Psychotropic Medicines Formulary

Each medication is generally assigned a traffic light status. There are some local variations in the four formularies but they can be summarised as:

**Red** medicines for specialist use in secondary care.

**Amber** medicines appropriate for shared care. Responsibility for prescribing may be transferred from secondary to primary care with the agreement of an individual GP.

**Green** drugs are appropriate for prescribing in primary and secondary care and within the competencies of the prescriber;

**Blue** drugs are appropriate for prescribing in primary and secondary care and within the competencies of the prescriber, however they are either alternative choices (i.e. second/third line) or may only be prescribed in specific indications or circumstances.

**Black or non-formulary** these may either be listed specifically in the formulary or may be indicated by their omission (i.e. a drug not included in the formulary is by definition non-formulary)

For information about the formulary and traffic-light status of a drug from the AWP formulary in primary care, please refer directly to the relevant joint formulary webpage using the links above.

## PHYSICAL HEALTH MEDICINES

The AWP Trust formulary does not include physical health drugs. Drugs for physical health conditions should comply with the relevant local CCG formularies (or exceptions procedures) and traffic light status.

For inpatients, usually medicines listed as green, blue or amber on the traffic light classification system can be obtained via the AWP pharmacy department. There may be certain instances when an equivalent product will be substituted in line with procedures approved by MOG.

## TRANSFER OF PRESCRIBING TO PRIMARY CARE

Prescribers in primary care may be asked to take over prescribing for medicines initiated by AWP prescribers. The relevant local area formulary should be consulted to review the traffic light status of the medicine in question and any other restrictions.

Responsibility for prescribing 'red' drugs has to remain with secondary services. Amber drugs would usually be initiated by secondary care, with prescribing only transferred when the medication regimen is stable. A formal 'shared care agreement' with the GP may be necessary before prescribing can be moved.

## AWP Psychotropic Medicines Formulary

## ORAL ANTIPSYCHOTICS

Amisulpride

Aripiprazole

Chlorpromazine

Clozapine            Zaponex<sup>®</sup> brand used in AWP

Flupentixol

Haloperidol

Olanzapine

 Quetiapine            Immediate release first line  
                               XL only if clear clinical indication  
                               Prescribe XL as Biquelle XL<sup>®</sup> on FP10

Risperidone

Sulpiride

Trifluoperazine

Zuclopenthixol        Liquid is unlicensed and non-formulary

Asenapine            **Non-formulary**Lurasidone           **Non-formulary**Paliperidone         **Non-formulary**Perphenazine         **Non-formulary**

## LONG ACTING ANTIPSYCHOTIC INJECTIONS

Flupentixol decanoate

 Fluphenazine decanoate            **No new patients to be initiated:  
 discontinuation due 2018**

Haloperidol decanoate

Zuclopenthixol decanoate

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Aripiprazole long acting injection	<b>Non-formulary</b>
Olanzapine long acting injection	<b>Non-formulary <u>except</u> in Secure services</b>
Paliperidone long acting Injection	<b>Non-formulary</b>
Risperidone long acting injection	<b>Non-formulary</b>

### RAPID TRANQUILLISATION

Haloperidol short acting injection

Aripiprazole short acting injection

Olanzapine short acting injection

Promethazine short acting injection

Lorazepam short acting injection

Zuclopenthixol acetate injection  
Clopixol Acuphase®

### MOOD STABILISERS

Carbamazepine

Lamotrigine

Lithium

Valproate preparations      Generic e/c sodium valproate is  
the most cost effective option

### ANTIDEPRESSANTS

Amitriptyline

Citalopram

Clomipramine

## AWP Psychotropic Medicines Formulary

Duloxetine

Escitalopram

Fluoxetine

Imipramine

Lofepramine

Mirtazapine

Moclobemide

Paroxetine

Phenelzine                      Where treatment with other  
 medicines has failed

Sertraline

Trazodone

Venlafaxine                      Immediate release first line  
 Prescribe XL as tablets (not  
 capsules)  
 Prescribe XL as Venlalic<sup>®</sup> On FP10

Vortioxetine ▼

[NICE TA367](#)


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Agomelatine                      **Non-formulary**

Dosulepin                        **Non-formulary**

Trimipramine                    **Non-formulary**

Tranlycypromine                **Non-formulary**

Tryptophan                       **Non-formulary**

## AWP Psychotropic Medicines Formulary

### MEDICATION FOR ANXIETY

Buspirone

Clonazepam            Unlicensed for anxiety

Diazepam

Lorazepam

Pregabalin            Prescribe in two rather than three divided doses due to flat pricing structure

Promethazine

Propranolol

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 Nitrazepam            **Non-formulary**

### MEDICATION FOR SLEEP DISTURBANCE

Temazepam

Zaleplon

Zolpidem

Zopiclone

Melatonin (Circadin<sup>®</sup>)    Circadin<sup>®</sup> brand formulary within license only  
Use outside license and other preparations are **non-formulary**

Clomethiazole        Only for specialist use in SDAS inpatient settings

### MEDICATION FOR DEMENTIA

Donepezil                            [NICE TA217](#)Galantamine                        [NICE TA217](#)Memantine                         [NICE TA217](#)Rivastigmine                       [NICE TA217](#)

**MANAGEMENT OF SUBSTANCE MISUSE**

Acamprosate

Buprenorphine

[NICE TA114](#)Suboxone<sup>®</sup> (Buprenorphine/Naloxone)

Chlordiazepoxide

Disulfiram

Lofexidine

Methadone

[NICE TA114](#)

Nalmefene ▼

[NICE TA325](#)

Naloxone injection

Naltrexone

[NICE TA115](#)

Oxazepam

**Off-label for alcohol withdrawal**

Bupropion

Nicotine replacement therapy

[NICE PH45](#)

Varenicline

[NICE TA123](#)

Thiamine

Pabrinex<sup>®</sup> IM injection

## AWP Psychotropic Medicines Formulary

### MANAGEMENT OF ADHD

Atomoxetine		<a href="#">NICE TA98</a>
Dexamfetamine		<a href="#">NICE TA98</a>
Lisdexamfetamine ▼		<a href="#">NICE ESNM19</a>
Methylphenidate	<p>Concerta XL<sup>®</sup> first-line for initiation if supplied by AWP pharmacy</p> <p>Xenidate XL<sup>®</sup> first-line for initiation on FP10s (and review existing prescriptions)</p>	<a href="#">NICE TA98</a>

### MANAGEMENT OF EXTRAPYRAMIDAL SIDE EFFECTS

Procyclidine

Tetrabenazine

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Orphenadrine                      **Non-formulary**

### INDUCTION OF ANAESTHESIA IN ECT

Sodium methohexitone injection                      Unlicensed

### ORAL NUTRITIONAL SUPPLEMENTS

Nutricia products                      e.g. Fortisip, Calogen, Fortijuice etc.

Any other nutritional supplements require a non-formulary application



## AWP Psychotropic Medicines Formulary

VERSION HISTORY				
Version	Date	Revision description	Editor	Status
1.0	Feb 2016	Legacy version in old format	B. Shepherd	Final
2.0	May 2017	New format, approved at MOG July 2017	S. Jones	Final
2.1	Sept 2017	Tryptophan and Tranylcypromine made non-formulary (MOG 26.09.17)	S. Jones	Final