Practice Guide for Switching Patients from Fostair® ® pMDI to Proxor® pMDI

- Nottingham and Nottinghamshire ICB are advising that all eligible patients prescribed Fostair® pMDI are switched to the more cost-effective Proxor® pMDI.
- Proxor® pMDI contains the same active ingredients (beclometasone/formoterol) as Fostair® pMDI.
- Proxor® pMDI is available in two strengths; 100/6 and 200/6 and has the same licensing agreements as Fostair® pMDI.
- Aerochamber Plus is the licensed compatible spacer device for Proxor® pMDI.
- Practices can use the "Bulk Switch" tool on SystmOne to perform this switch however each practice may wish to use their own process to enable the change.
- Please find below details of how to perform a bulk switch from Fostair® pMDI to Proxor® pMDI ensuring that separate bulk switches are performed for each strength (100/6 or 200/6).
- It is advisable that prior to performing the bulk switch, patients are notified via SMS text or letter. A Patient Information Leaflet (PIL) and a patient letter template accompany this guidance which you may wish to use to inform patients why the ICB are recommending this switch. (Appendix 1)
- It is advisable that all local community pharmacies are contacted 2 weeks prior to performing the bulk switch to enable appropriate stock management. Please find a Community Pharmacy letter template within the "Prescriber Pack" which you may find useful.
- For those patients clinically suitable to switch to a "Greener Inhaler" please discuss suitable options at the patient's next face to face respiratory review.
- Please ensure that this switch is explained to practice admin staff to ensure that Fostair® pMDI isn't inadvertently put back onto the repeat template.
- For those patients whereby written communication may not be appropriate (i.e. learning/physical disability; English not their first language); please consider alternative methods of communication prior to switching.

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Prior to performing the bulk switch, please run the following F12 searches on SystmOne:

1. Fostair® 100/6 (Repeat): accessed via F12 group / F12 007 ICB Meds Op Searches / 001c Respiratory Workstreams
2. Fostair® 200/6 (Repeat): accessed via F12 group / F12 007 ICB Meds Op Searches / 001c Respiratory Workstreams

- (Set up > Bulk operations > Repeat template replacement) Read the warning that comes up with exact details for how this function works. Repeat templates are replaced with the same authorisation dates, problem linking etc

Step 1 – Drug to be replaced:

- Add Fostair® pMDI and strength (either 100/6 or 200/6) to outgoing drug section - choose 'Formulary substitution' as the reason for switch. The notes section can be used to add further information. This will appear in the administration section of the new repeat template. Add text 'Fostair® switch to Proxor® by practice'

- Each strength of Fostair® pMDI (100/6 or 200/6) will have to be bulk switched separately

- Select Replacement applies to 'a particular report'. Click on the red 'Select Clinical Report' icon next to this and select the correct report from the list. Make sure the report you need has been run that day otherwise you will not be able to proceed. Select Continue

Step 2 – Patients:

- A list will be produced of all patients in that search who are affected by the changes – this can be printed if needed. Select Continue

Step 3 - Replacement

- Enter Proxor® pMDI ensuring the correct strength (either 100/6 or 200/6 has been selected) into the replacement drug box. Click each pencil icon in the list to map the Proxor® pMDI we will be switching to. Select Continue

Step 4 – Doses and Quantities:

- In the Doses section double click on each dose keeping the same direction but adding the text 'This is the same as Fostair® pMDI' to the end of the directions

- In the Quantities section double click onto each quantity and select the same quantity for the Proxor® pMDI (120 doses)

- Select Continue

Step 5 – Confirmation:

- Read the summary of what is to be switched and double check all details carefully. Then press RUN to confirm. The switch is usually carried out at 7pm the same evening. Press Close.

Ensure that patients who are being switched are being contacted in the relevant manner (see practice agreement and leaflet available).

One option is to add a one-off message to each prescription; this can be done for up to 100 patients at a time. You can do this via your search in Clinical Reporting.

One option is to inform them by letter. Letters can be sent in bulk via the MailMerge tool if needed. See sample letter attached in the Prescriber Pack.

A read code can be also be added in bulk for up to 100 patients at a time by right clicking on your selected patients and selecting add diagnosis. A suggested read code for this is:

"Drug changed to cost effective alternative (XaJKo)"