



What can your Pharmacy do for you NIMDTA

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Aims & Objectives

To provide information about over-the-counter medicines that have relevance for dentistry

- Outline the indications for use
- Understand safety concerns (cautions, contraindications, interaction profile and abuse/misuse potential)
- Appreciate the evidence base (and where to find it)



Session overview

- A little about me
- Community pharmacy – what support is available?
- OTC medicines – safety concerns and the evidence base
- Helpful resources

A little about me

Section



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Community pharmacy – what support is available for dentists?

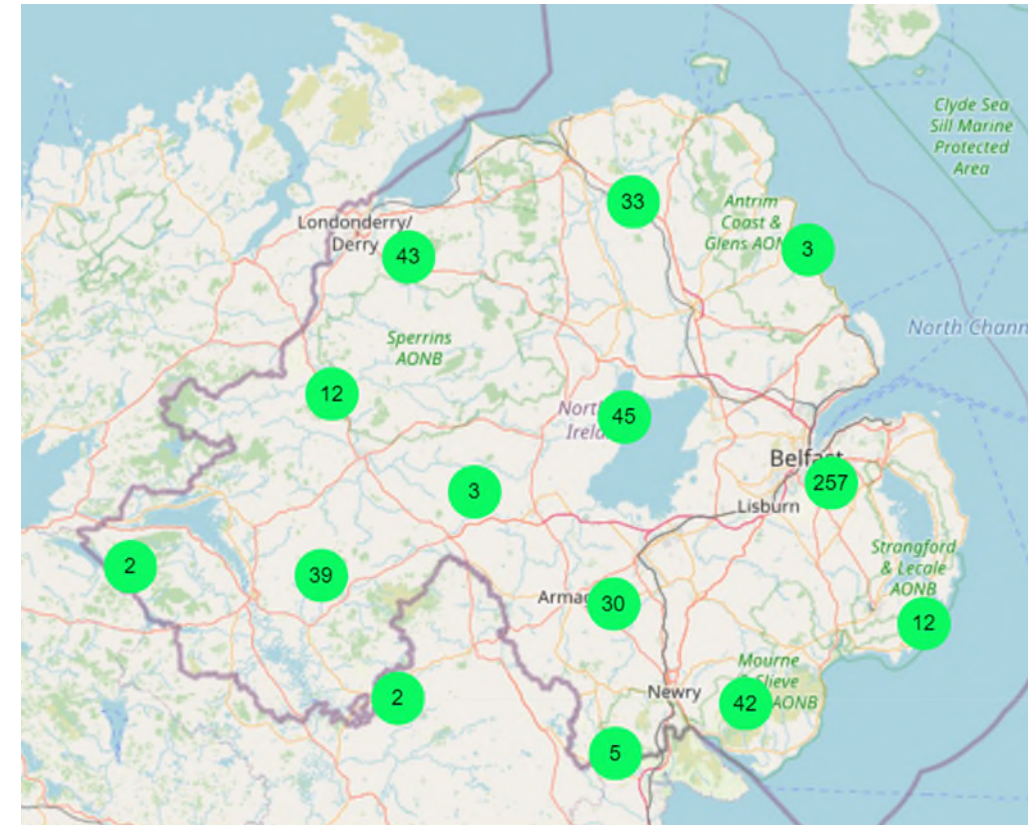
Your local pharmacy

Get to know the pharmacy team in your area

More than happy to help and advise:

- Drug interactions
- Contra-indications
- Cautions
- Use in pregnancy & breast feeding
- Administration issues
- Medicinal forms
- Licensed use

If they don't know, they will know how to find out...



<https://hscbusiness.hscni.net/services/2286.htm>

Your local pharmacy

Core services – Funded	Additional services – not funded
Prescription dispensing	OTC services
Prescription advice	Prescription collection
Advice on a health problem	Prescription delivery
NI Minor ailment scheme	Compliance aid support
Disposing of medicines and sharps	Health checks
Healthy lifestyle advice	Vaccines
Stop smoking scheme	Travel clinics
Needle exchange	Sun safety
Substitute prescribing	Emergency contraception
Palliative care service	Stoma care

Pharmacy First – Northern Ireland

Treatment algorithms for:

- Acne vulgaris
- Athlete's foot
- Acute diarrhoea
- Ear wax
- Groin area infection
- Haemorrhoids
- Head lice
- Threadworms
- Vaginal thrush
- Mouth ulcers
- Oral thrush
- Scabies
- Verrucae



Pharmacy First for help with everyday health conditions

HSC Health and Social Care

For **FREE** confidential advice and treatment ask your pharmacist **FIRST**

SAVE TIME AND AVOID WAITING TO SEE A GP

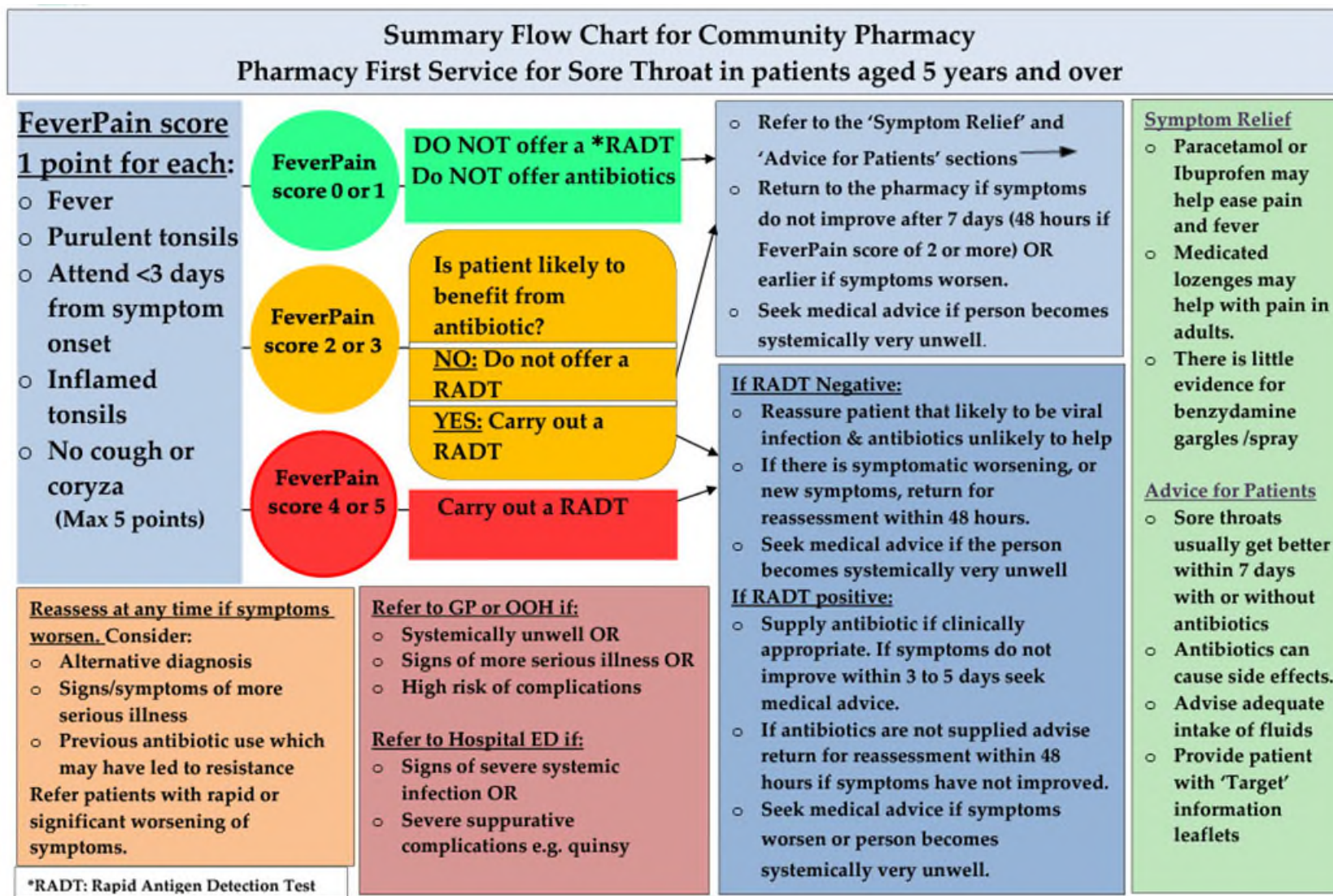
✓ Acne	✓ Haemorrhoids	✓ Scabies
✓ Athlete's foot	✓ Head lice	✓ Threadworms
✓ Diarrhoea	✓ Mouth Ulcers	✓ Vaginal Thrush
✓ Ear Wax	✓ Oral Thrush	✓ Verrucae
✓ Groin area infection		

Pharmacy First – Sore Throat Service



Aims of the service

- Provide an accessible, efficient and high-quality clinical pathway for patients with a sore throat.
- Better use of pharmacist skills and will free up GP time.
- Use point of care (POC) testing for Group A Streptococcus (GAS) to guide management of the condition and potentially reduce unnecessary antibiotic prescribing



Vaccination - Pharmacy

Which vaccination location
would you like to visit?

Where are you today?

Postcode or town



10 miles ▼

Find location by name

Select location type

☐ Trust

☐ Pharmacy

Select vaccine type

☐ Seasonal Flu

☐ COVID Booster

☐ COVID Dose 1

Select location

Alley Theatre, Strabane

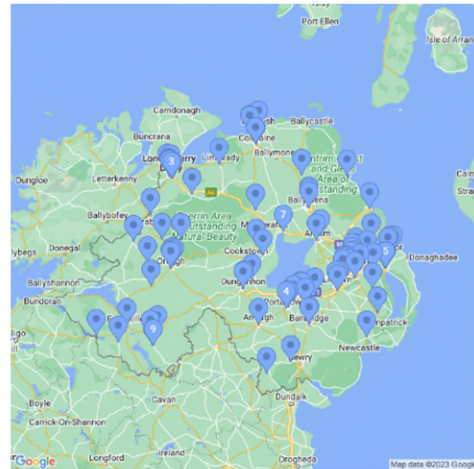
Alley Theatre & Conference
Centre, Railway Street, Strabane,
BT82 8EF

**Altnagelvin - Level 5
Tower Block Treatment
Wing**

Altnagelvin - Level 5 Tower Block
Treatment Wing, Altnagelvin Area
Hospital, Glenshane Road,
Londonderry, BT47 6SB

**An Chroi, Hillcrest
House**

10 Trench Road, Londonderry
BT47 2DS



COVID vaccines

<https://vaccinations.covid-19.hscni.net/location-search>

Travel clinics & Malaria chemo-
prophylaxis

<https://www.fitfortravel.nhs.uk/home>

Harm Reduction Services

- Needle and syringe exchange

- Reduce harms associated with injecting drugs
- Signpost to treatment /support services
- Access to sterile needles & syringes and sharps containers for return of used equipment
- Provide materials e.g. citric acid, sterile water, swabs, foil etc.
- 26 pharmacies across NI

- Opioid substitution treatment (OST)

- Mostly for those dependent on heroin
- Treatment usually started in secondary care
- Only methadone and buprenorphine are licensed and approved by NICE in the UK for use as an OST
 - Sugar free methadone available
- Initially: daily dose dispensed and consumed under direct supervision of pharmacists (5-7 days/week)

Needle and syringe provision

Drug equipment available



2mL syringe (different colours available) 	1mL syringe with needle (different colours available) 
1" (0.5mm x 25mm) needle 25G orange 	One hit kit 
1 1/4" (0.6mm x 32mm) needle 23G blue 	2mL water for injection 
1 1/2" (0.7mm x 38mm) needle 22G black 	Water amp snapper 
1 1/2" (0.8mm x 38mm) needle 21G green 	Foil (20 sheets) 
Pre-injection swab 	Citric acid sachet 
Spoon 	0.45L Sharps box (black) 

Know Check Ask - NI

Before you take it...

! Know
your medicines and keep an up-to-date list

✓ Check
that you are using your medicines in the right way

? Ask
your healthcare professional if you're not sure



What is My Medicines List?

My Medicines List is a list of all the medicines and supplements you take.

Why should I use it?

Keeping an up-to-date list can help you know your medicines. It can also help you when discussing your medicines with a healthcare professional.

How should I fill it in?

To fill out My Medicines List, you need all your medicines in front of you. Carefully list everything prescribed by your GP. Include things like inhalers, eye-drops, injections and creams, if you use them. You can also add other medicines or supplements you are taking, for example, medicines you have bought, vitamins, minerals, herbal or alternative medicines.

How should I use it?

Keep your list up-to-date. Bring it with you when attending any healthcare appointment. You may find it useful to keep a photo of your My Medicines List on your phone.

How can I get another form?

Scan the QR code below (using your mobile phone camera) and print, or ask for one at your local Pharmacy.



scan me

Questions about your medicines?
Talk to your pharmacist, nurse or doctor.

Information for people who take medicines and their families

My Medicines List





! Know
✓ Check
? Ask



Medicines are the most commonly used medical intervention in NI, and at any one time, around 70% of our population take prescribed or over-the-counter medicines to treat or prevent ill health.

OTC medicines: dentistry



Part IX (a)

List of Preparations Approved by the Department that may be prescribed On Form HS21D by Dentists

AS Saliva Orthana Spray (a medical device listed in Part III)
 Aciclovir Cream BP
 Aciclovir Oral Suspension BP 200mg/5ml
 Aciclovir Tablets BP 200mg, 800mg
 Amoxicillin Capsules BP
 Amoxicillin Oral Powder DPF
 Amoxicillin Oral Suspension BP (includes sugar-free formulation)
 Artificial Saliva Gel DPF
 Artificial Saliva Oral Spray DPF
 Artificial Saliva Pastilles DPF
 Artificial Saliva Protective Spray DPF
 Artificial Saliva Substitutes as listed below (to be prescribed only for indications approved by ACBS)
 # AS Saliva Orthana Lozenges
 # Bioextra
 # Glandosane
 # Saliveze
 Aspirin Tablets Dispersible BP
 Azithromycin Capsules 250mg DPF
 Azithromycin Oral Suspension 200mg/5ml DPF
 Azithromycin Tablets 250mg, 500mg DPF

Beclometasone Pressurised Inhalation BP 50micrograms/metered inhalation CFC-free as: Clenil
 Modulite
 Benzydamine Mouthwash BP 0.15%
 Benzydamine Oromucosal Spray BP 0.15%
 Betamethasone Soluble Tablets 500microgram DPF

Carbamazepine Tablets BP
 Cefalexin Capsules BP
 Cefalexin Oral Suspension BP
 Cefalexin Tablets BP
 Cefradine Capsules BP
 Cetirizine Oral Solution 5mg/5ml BP
 Cetirizine Tablets 10mg BP
 Chlorhexidine Gluconate Gel BP
 Chlorhexidine Mouthwash BP 0.2% w/v
 Chlorhexidine Oral Spray DPF
 Chlorphenamine Oral Solution BP (includes sugar-free formulation)
 Chlorphenamine Tablets BP
 Choline Salicylate Dental Gel BP
 Clarithromycin Oral Suspension 125mg/5ml DPF
 Clarithromycin Oral Suspension 250mg/5ml DPF
 Clarithromycin Tablets BP
 Clindamycin Capsules BP
 Co-amoxiclav Oral Suspension BP 125/31 (amoxicillin 125mg as trihydrate, clavulanic acid 31.25mg as potassium salt)/5ml (includes sugar-free formulation)
 Co-amoxiclav Oral Suspension BP 250/62 (amoxicillin 250mg as trihydrate, clavulanic acid 62.5mg as potassium salt)/5ml (includes sugar-free formulation)
 Co-amoxiclav Tablets BP 250/125 (amoxicillin 250mg as trihydrate, clavulanic acid 125mg as potassium salt)

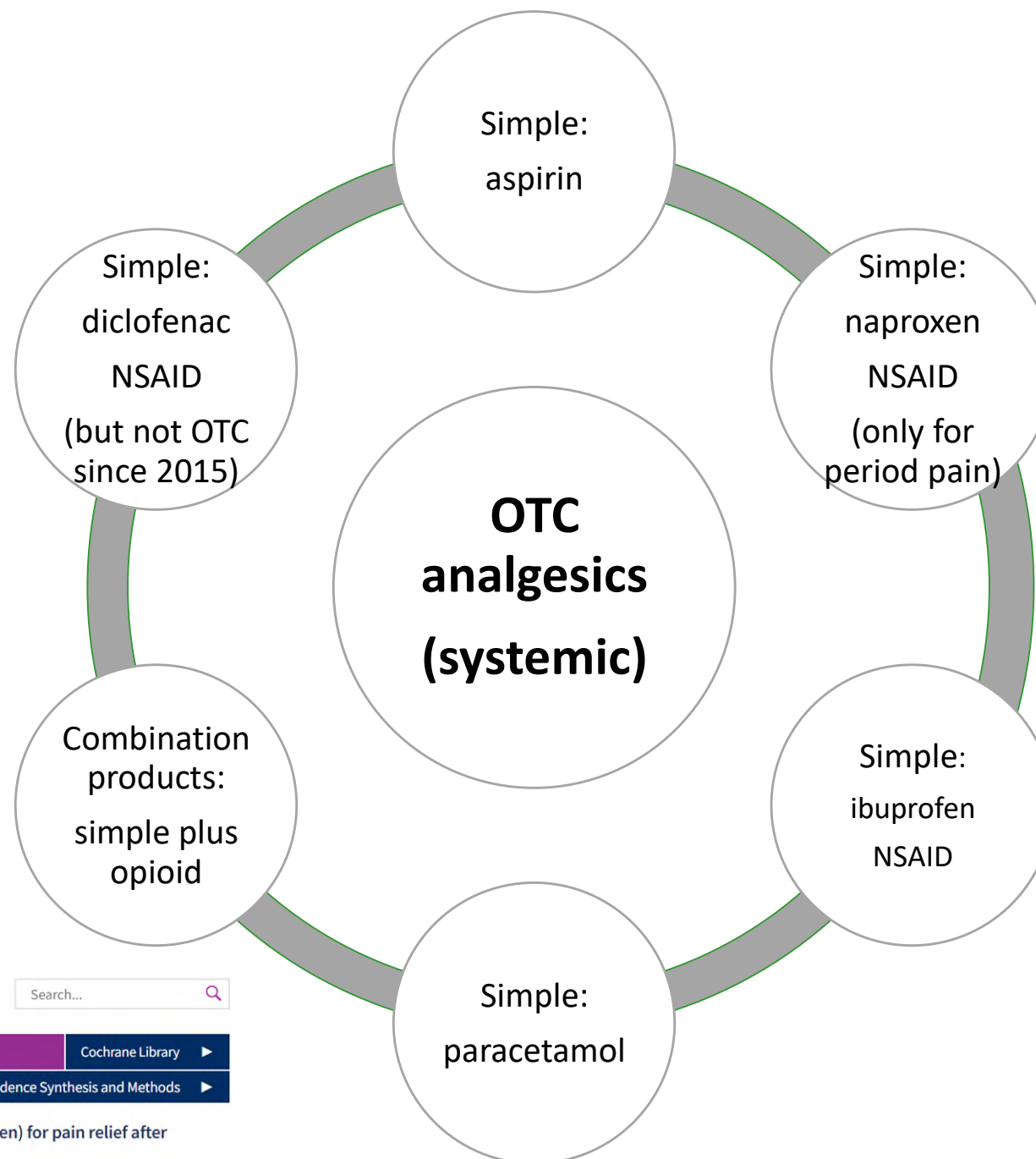
These products have Advisory Committee on Borderline Substances approval for patients suffering dry mouth as a result of having (or having undergone) radiotherapy or sicca syndrome.



Many DPF items are available as prescription-only and OTC medicines - much greater restrictions imposed on OTC versions
 Many OTC medicines are not licensed for use in pregnancy and breast-feeding (lack of trial data)

Community pharmacy OTC: Dentistry

- Allergic rhinitis and upper respiratory tract infections (such as sore throat, acute sinusitis, cough, common cold, flu)
- Angular cheilitis
- Cold sores
- Dry mouth
- Gingivitis
- Heartburn and indigestion
- Minor mouth (aphthous) ulcers
- Oral thrush (candidiasis)
- Toothache and teething



The addition of caffeine (≥ 100 mg) to a standard dose of commonly used analgesics provides a small but important increase in the proportion of participants who experience a good level of pain relief (5-10% improvement)

Safety: ibuprofen (diclofenac/naproxen similar)

- **Cautions:** older adults, cardiac impairment, risk factors for cardiovascular events, uncontrolled hypertension, cerebrovascular disease, heart failure, ischaemic heart disease, peripheral arterial disease, Crohn's disease, ulcerative colitis
- **Contraindications:** past/current gastric ulcer, allergy to NSAIDs/aspirin, severe HF
- **GI and CV events risk:** use lowest effective dose for shortest possible time (see BNF)

Safety: ibuprofen (diclofenac/naproxen similar)

Interaction profile (examples):

- ↑ bleeding risk with antiplatelets, anticoagulants, heparins, SSRIs, other NSAIDs
- ↑ GI irritation risk with systemic corticosteroids, bisphosphonates, nicorandil, other NSAIDs, excess alcohol
- ACE inhibitors (↑ risk of hyperkalaemia and renal failure)
- diuretics (↑ risk of renal failure)
- lithium (increases concentration of lithium)
- methotrexate (↑ risk of toxicity)

[Aspirin: not suitable <16 years, GI irritation/bleed risk, similar interaction profile. Out of all 'simple' analgesics, paracetamol currently has the best safety profile]

OTC codeine and dihydrocodeine

- Short term for acute, moderate pain which is NOT relieved by paracetamol, ibuprofen or aspirin alone
- Products state that they are for short term use only (up to three days) and that they can cause addiction or overuse headache if used continuously for >3 days
- Limited evidence at OTC doses; exposed to opioid side-effects and potential interactions



OTC analgesics & anaesthetics (topical/oromucosal)

Name	Age	Notes
Benzydamine mouthwash	>12 years	Mouthwash can be diluted with water, products can cause numbness (care with hot food/beverages), not advisable if hypersensitive to aspirin/NSAIDs, spray may precipitate bronchospasm in patients with bronchial asthma
Benzydamine oromucosal spray	No age restriction* *<6 years dosed by weight	
Clove oil BP	> 2 years	Temporary relief of toothache, repeated use may cause gum damage. Can also cause transient irritation, contact dermatitis, lip inflammation, mouth inflammation/ulceration. May enhance inhibition of platelet activity-care with anticoagulant therapy
Choline salicylate gel	>16 years	Transient local burning sensation and irritation, frequent application can give rise to salicylate poisoning. Not to be used in patients with active peptic ulceration or hypersensitive to aspirin/NSAIDs. May enhance anticoagulant effect and inhibit the action of uricosurics
Lidocaine/benzocaine	No age restriction	Can cause sensitisation and avoid anaesthesia of the pharynx and mouth before meals (due to choking and burn/scald risk)

OTC antibacterials

- Chlorhexidine mouthwash
- Antimicrobial stewardship – Dentistry tends to fair really well here (despite AAA during COVID!)
- Prescription writing

Pharmacists' Independent prescribers** current undergraduate education, foundation training, and post-registration reform across UK

OTC antivirals

Topical: penciclovir (12 years+) and aciclovir, for Herpes labialis

NICE CKS: “do not routinely prescribe topical antiviral preparations, such as aciclovir or penciclovir. These products are available over-the-counter, and may be used by some people if they find them helpful, from the time of onset of prodromal symptoms before vesicles appear, if possible, until lesions have healed”

Interaction profile: nothing of note for topical products

Management: centres on minimising the spread of infection

OTC, we do not typically manage:

- immunocompromised or pregnant patients
- frequent, persistent and/or severe episodes
- systemic symptoms, dehydration, mouth involvement/difficulty swallowing

OTC antifungals

Indications:

- miconazole cream: for angular cheilitis (wouldn't typically manage OTC)
- miconazole oral gel: for oral candidiasis (Daktarin® SF 2% oral gel) - usefulness of 15 g tube given dose, dosing frequency and duration of use?

Management: in many cases, this centres on minimising the spread of infection

Miconazole oral gel (Daktarin®) & warfarin



Advice for healthcare professionals:

- bleeding events have been reported by patients on warfarin
- patients taking warfarin should not use OTC miconazole oral gel
- if the concomitant use of miconazole oral gel with an oral anticoagulant such as warfarin is planned, exercise caution and ensure that you monitor and titrate the anticoagulant effect carefully
- advise patients taking prescription-only miconazole oral gel and warfarin that if they experience signs of over-anticoagulation, such as sudden unexplained bruising, nosebleeds, or blood in urine, to stop using miconazole and seek immediate medical attention

<https://www.gov.uk/drug-safety-update/miconazole-daktarin-over-the-counter-oral-gel-contraindicated-in-patients-taking-warfarin>

Fluoride products

- We wouldn't typically initiate these (advocate patient seeks dental advice first). OTC: follow NHS information on toothpaste strengths, amount and frequency of use (e.g. "an adult should brush at least twice daily with a toothpaste containing 1350-1500ppm fluoride")
- Fluoride gel – large reduction in tooth decay in permanent and baby teeth. As children may swallow gel, more research is needed on these effects. [Marinho VCC, Worthington HV, Walsh T, Chong LY (Cochrane Review, 2015)]

Children received a fluoride rinse formulated with sodium fluoride (NaF), mostly on either a daily or weekly/fortnightly basis at two main strengths, 230 or 900 ppm F. A large reduction in caries increment in permanent teeth was found. Future research should focus on comparisons between different fluoride rinses or against other preventive strategies and evaluate adverse effects and acceptability [Marinho VCC, Chong LY, Worthington HV, Walsh T (Cochrane Review, 2016)]

Xylitol-containing products

- Some low quality evidence that fluoride toothpaste containing xylitol may be more effective than fluoride-only toothpaste for preventing caries in the permanent teeth of children but interpret findings with caution due to high risk of bias
- The remaining evidence is of low to very low quality and is insufficient to determine whether any other xylitol-containing products can prevent caries in infants, older children, or adults

Riley P, Moore D, Ahmed F, Sharif MO, Worthington HV. Xylitol-containing products for preventing dental caries in children and adults. Cochrane Database of Systematic Reviews 2015, Issue 3. Art. No.: CD010743

Dry mouth and artificial saliva

No real safety concerns with artificial saliva products (no side-effects/interaction profile of note), but weak evidence-base

However, we wouldn't typically initiate OTC as it could be due to:

- underlying condition requiring further investigation (salivary gland issues/tumour, Sjögren's syndrome, diabetes, liver disease, amyloidosis, sarcoidosis, thyroid disease, stroke)
- side-effect of medication requiring discussion with prescriber (such as antidepressants, hypnotics, antipsychotic agents, antiparkinsonian drugs, antiepileptics, sedating antihistamines, radiation/chemotherapy)
- mouth-breathing and smoking (smoking cessation would be advocated)



PPIs esomeprazole, omeprazole, pantoprazole OTC



Antacids, Alginates, Ranitidine all > 16 years

Certain products can be given to children but dyspepsia is unusual in children and therefore pharmacy is more likely to refer to GP for treatments.

PPIs OTC for > 18 years

Side effects: Headache, diarrhoea, constipation, nausea and vomiting, abdominal pain, insomnia, dizziness, dry mouth, rash

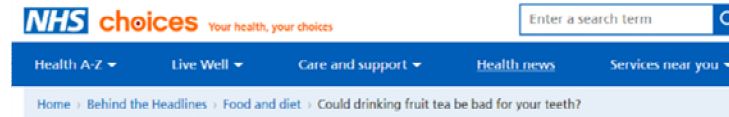
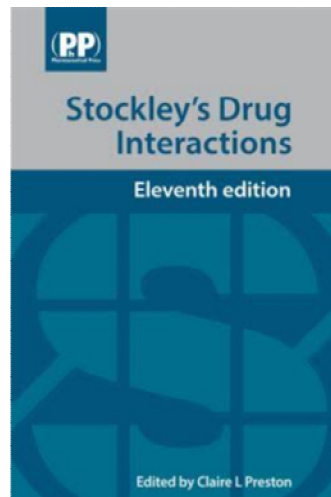
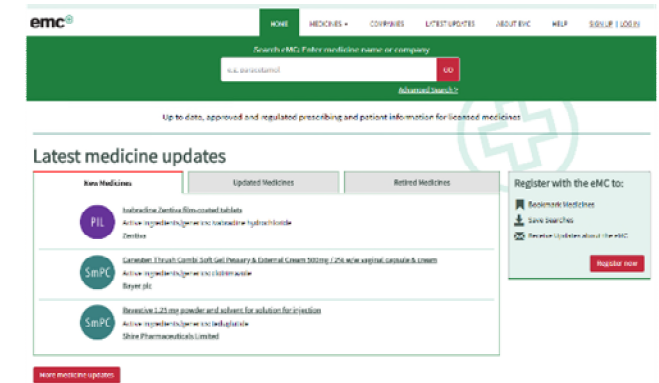
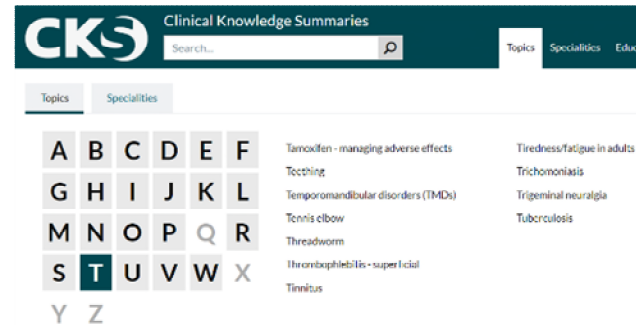
Interactions: Clopidogrel, diazepam, fluvoxamine, cilostazol, atazanavir

Pregnancy & breast feeding - license dependent, some manufacturers advice avoid but guidance says it can be used

Useful resources

Section 4

Useful resources



Could drinking fruit tea be bad for your teeth?

Monday February 26 2018

Page contents

- Where did the story come from?
- What kind of research was this?
- What did the research involve?
- What were the basic results?
- How did the researchers interpret the results?
- Conclusion

"Sipping acidic fruit teas can wear away teeth, says study," reports BBC News on a new review on the role of diet in tooth erosion – where the tooth's enamel coating is worn down by acid.

Two researchers from King's College London looked at a number of existing studies on the topic of dietary causes of tooth erosion. The studies ranged from those looking at which foods and drinks contained the most acids, to those considering how the way in which people sipped and tasted drinks might affect their risk of tooth enamel erosion.

Although we know that acidic foods can cause tooth erosion, many of the studies included in this review were quite small and some were likely to be less reliable than others. The review gives no



NHS Medicines Q&As

Q&A 2403

Can miconazole oral gel be used by patients taking a statin?

Prepared by UK Medicines Information (UKMI) pharmacists for NHS healthcare professionals
Before using this Q&A, read the disclaimer at www.ukmi.nhs.uk/activities/medicinesQAs/default.asp
Date prepared: April 2014

Summary

- Miconazole is an azole antifungal which inhibits cytochrome P450 isoenzymes CYP2C9 and CYP3A4. It is absorbed systemically from the oral gel preparation and has the potential to raise plasma levels of drugs metabolised by these isoenzymes, increasing the risk of adverse effects.
- The Summary of Product Characteristics for miconazole oral gel (Daktarin) contraindicates the coadministration of miconazole with drugs that are metabolised by CYP3A4, including some of the statins.
- There are no reports describing interactions between miconazole and any of the statins.
- Patients taking pravastatin can use miconazole oral gel. Pravastatin is not metabolised by CYP450 isoenzymes and therefore will not interact with miconazole.
- As metabolism via CYP3A4 is limited for fluvastatin and rosuvastatin, a clinically significant interaction is unlikely. Miconazole oral gel could be used with caution in patients taking fluvastatin or rosuvastatin, provided they are monitored for adverse effects.
- For patients taking atorvastatin or simvastatin, the lack of reports of an interaction with miconazole oral gel suggests that the antifungal may be used with caution if considered essential and there is no suitable alternative. However, cases of rhabdomyolysis have been reported with concomitant use of fluconazole and atorvastatin or simvastatin, and as miconazole has the potential to interact similarly, prescribers should consider the benefits of treatment versus the risk of using the combination.
- Prescribers should be aware that prescribing the combination of atorvastatin, simvastatin, fluvastatin or rosuvastatin and Daktarin is outside of the product licence.
- Any patient taking a statin (other than pravastatin) who is given miconazole oral gel should be warned to watch for signs of myopathy (i.e. unexplained muscle pain, tenderness or weakness or dark coloured urine). If myopathy does occur the statin should be stopped immediately.

Read about [our approach to COVID-19](#)

Home > Interactions > Amoxicillin

You are viewing BNF. If you require BNF for Children, use [BNFC](#).

Amoxicillin

The interactions content in BNF publications has changed.
[Find out more.](#)

[Acenocoumarol](#)

[Allopurinol](#)

[Methotrexate](#)

[Phenindione](#)

[Warfarin](#)

Useful information

[General interaction information](#)

Amoxicillin has the following interaction information:

Acenocoumarol

Amoxicillin potentially alters the anticoagulant effect of acenocoumarol. Manufacturer advises monitor INR and adjust dose.

Severity of interaction: Severe
Evidence for interaction: Anecdotal

Allopurinol

Allopurinol increases the risk of skin rash when given with amoxicillin. Manufacturer advises consider alternatives.

Severity of interaction: Moderate
Evidence for interaction: Study

BNF
88

September 2024
– March 2025

[bnf.org](#)

Carbamazepine

Carbamazepine has the following interactions:

Abacavir

Carbamazepine is predicted to decrease the exposure to Abacavir. Manufacturer makes no recommendation. **Moderate Theoretical**

Abemaciclib

Carbamazepine is predicted to markedly decrease the exposure to Abemaciclib. Manufacturer advises avoid. **Severe Study**

Abiraterone

Carbamazepine is predicted to decrease the exposure to Abiraterone. Manufacturer advises avoid. **Severe Study**

Yellow card scheme - MHRA

Use the Coronavirus Yellow Card reporting site to report suspected side effects to medicines and vaccines or medical device and diagnostic adverse incidents used in coronavirus treatment

COVID-19

Side effect to a medicine, vaccine, herbal or homeopathic remedy

Side effects

Incidents involving a medical device including diagnostic tests, software and apps

Devices

Defective medicine (not of an acceptable quality)

Defective

Falsified or fake medicine or medical device

Fake

Side effect or safety concern for an e-cigarette

e-cigarette

<https://yellowcard.mhra.gov.uk/>

Drug safety updates

<https://www.gov.uk/drug-safety-update>

Guidance

Drug Safety Update: monthly PDF newsletter

Monthly PDF editions of the Drug Safety Update newsletter from MHRA and its independent advisor, the Commission on Human Medicines

From: [Medicines and Healthcare products Regulatory Agency](#)

Published 22 January 2015

Last updated 26 April 2023 — [See all updates](#)

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Documents



[Drug Safety Update April 2023](#)

PDF, 345 KB, 17 pages

This file may not be suitable for users of assistive technology.

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About

^ Message type

- ☐ Field safety notice
- ☐ National patient safety alert
- ☐ Device safety information
- ☐ Medicines

^ Medical specialty

1 selected

- ☐ Critical care
- ☒ Dentistry
- ☐ Dispensing GP practices
- ☐ General practice

National Patient Safety Alert: Class 1 Medicines Recall Notification: Recall of Emerade 500 micrograms and Emerade 300 micrograms auto-injectors, due to the potential for device failure, NatPSA/2023/004/MHRA

Pharmaswiss Česka republika s.r.o. is initiating an urgent recall of all batches of Emerade 500 micrograms and Emerade 300 micrograms auto-injectors.

Alert type: National patient safety alert

Medical specialism: Anaesthetics and 22 others Issued: 9 May 2023

Class 2 Medicines Recall: Various Marketing Authorisation Holders, pholcodine-containing products, EL (23)A/09

Following the conclusion of a review of post-marketing safety data by the MHRA, all pholcodine-containing medicines are being recalled and withdrawn from the UK as a precaution.

Medical specialism: Anaesthetics and 22 others Issued: 14 March 2023

Field Safety Notices: 21 to 25 November 2022

List of Field Safety Notices (FSNs) from 21 to 25 November 2022

Alert type: Field safety notice Medical specialism: Anaesthetics and 22 others

Issued: 28 November 2022

And the extended pharmacy profession



The first stop
for professional
medicines advice

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Email off ▾



COVID-19 Vaccines Guidance Events Networks Planning Training Publications Q Search

Recommended

Allocating 31 day expiry to thawed Pfizer-BioNTech COVID-19 vaccine labelled with 5 day expiry

The MHRA published revised advice on stability on 20 May 2021. Changing the expiry date of existing supply may be needed in the immediate following period.

Pfizer-BioNTech Vaccine: Answers to Questions · 20 May 2021

Choosing between oral vancomycin options

Local decision makers should choose between the options for giving vancomycin orally. Licensing status and other factors affect decision making.

Vancomycin · 18 May 2021

Using chloramphenicol eye products in children under 2 years

Using antidepressants for depression in people with epilepsy

Moderna vaccine: Handling in Trusts and Vaccination Centres

Cold chain management for COVID-19 Vaccines

<https://www.sps.nhs.uk>

NICE - Medicine's awareness service

NICE National Institute for
Health and Care Excellence

[NICE Pathways](#)[NICE guidance](#)[Standards and indicators](#)[Evidence search](#)

Read about [our approach to COVID-19](#)

[Home](#) > [News](#)

NICE newsletters and alerts

Medicines

Medicines awareness service

 Daily or weekly

Our service provides links to current awareness and evidence-based information relating to medicines and prescribing.

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- ☐ Liver disorders
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- ☐ Musculo-skeletal disorders
- ☐ Neurological disorders
- ☐ Nutritional and metabolic disorders
- ☐ Obstetrics and gynaecology
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- ☐ Other / Unclassified
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- ☐ Policy, Commissioning and Managerial
- ☐ Renal and urologic disorders
- ☐ Respiratory disorders
- ☐ Sexual health

<https://www.nice.org.uk/news/nice-newsletters-and-alerts>



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