

Doncaster & Bassetlaw Medicines Formulary

Drugs for Urinary Retention

Tamsulosin 400microgram MR Capsules

Alfuzosin MR 10mg Tablets

Finasteride 5mg Tablets

Drugs for Urinary Incontinence

Solifenacin 5mg and 10mg Tablets

Mirabegron 25mg and 50mg Tablets

Duloxetine 20mg and 40mg Capsules

Drugs for Erectile Dysfunction

Sildenafil 25mg, 50mg and 100mg Tablets

Tadalafil 10mg and 20mg Tablets

Approved by Drug and Therapeutics Committee: December 2020

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Prescribing Guidance:

Urinary Retention

Alpha-blockers act to reduce smooth muscle tone in the bladder neck, decreasing resistance to urinary flow, and therefore relieving the symptoms of benign prostatic hypertrophy (BPH).

The advantage of the two drugs listed (tamsulosin and alfuzosin) is that they do not require dosage titration and are given as once daily doses. However, postural hypotension can still be a problem and prescribers may advise taking at night in order to minimise this effect.

Finasteride is used where there is a poor response to alpha-blockers, and where the prostate is particularly enlarged. Its use is limited by delayed onset of action (patients may not see the full effects until 6 months of treatment). It should only be used under the advice of a consultant urologist.

Nursing staff should be alerted that women of childbearing age should not handle broken or crushed tablets.

KEY: ^[UL] Unlicensed Preparation; **Drug** – first line choice; **Drug** – hospital only; **Drug** – **Amber** (TLS), **Drug** – Red (TLS), see <http://medicinesmanagement.doncasterccg.nhs.uk/>

Prescribing outside this formulary should only take place via a New Product Request

Urinary Incontinence

Local guidance around management of overactive bladder in females is available via:

NICE Guidance can be found via <https://www.nice.org.uk/guidance/ng123>

Anticholinergic side effects (minimised by the use of solifenacin) include dry mouth, constipation, dry eyes and blurred vision, and urinary retention. They should not be used for patients with BPH unless prescribed by (or on the advice of) a urologist.

Duloxetine prescribing guidance (from [NICE NG123](#)):

- Do not use duloxetine as a first-line treatment for women with predominant stress urinary incontinence.
- Do not routinely offer duloxetine as a second-line treatment for women with stress urinary incontinence, although it may be offered as second-line therapy if women prefer pharmacological to surgical treatment or are not suitable for surgical treatment.
- If duloxetine is prescribed, counsel women about its adverse effects.

Erectile Dysfunction

Local guidance for the management of erectile dysfunction is [available](#).