



**Change
Grow
Live**

Pharmacy Newsletter

Wear Recovery

March
2026

Pharmacy Support Visits

As mentioned in the January Newsletter there are support site visits conducted this year by Laura Jones. The visits are helping form national research by Change Grow Live on how to improve our provision alongside pharmacies.

We listened!

During a Pharmacy Support visit it was suggested it would be beneficial have a list of Recovery Coordinators mobile numbers. This has now been provided alongside this newsletter!

Contact Us

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Switchboard

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PharmOutcomes

Missed dose notification

Titration Guidance

In line with new national guidance, service user's who are titrating must be reviewed prior to each increase ensuring clinical safety and oversight. This means that every time a dose is due to increase on titration, Wear Recovery must review the person prior to allowing the next dose. The review can be remote or in person.

You might notice an increase in staff holding doses during titration, or prescriptions as 3-day and a 4-day or as a normal titration prescription based on risk assessment. Service Users will only be increased on weekends if clinically necessary.

It is important to continue to highlight when someone misses doses on titration as this can be a person's most vulnerable period.

Buprenorphine

Buprenorphine is now the preferred choice nationally over methadone. This is due to its less sedating effect and it can be titrated faster. Based on risk assessments, prescribers may now offer up to 7-days unsupervised. When supervising a buprenorphine patient, it is important to remember to ask them to wait in the pharmacy until the dose has dissolved. If a service user refuses to wait, please highlight this to us and we can review alternative options including Buvidal, crushing or having a word. All service users are informed of expectations when being supervised for buprenorphine.



Scan the QR code
to give us feedback!

Ketamine

Ketamine, Ket or 'Special K' is an increasingly popular drug of choice amongst young people. Previously, it had been established in rave scenes but now it is used more as a home-based substance. It can make people feel euphoric, disconnected from their body or surroundings, panic, fear or confused. Taking too much can result in being in a 'K-hole' (intense dissociation and immobility). Due to its analgesic effects it blocks pain. People might not notice injuries when on Ketamine.

Regular ketamine use can lead to rapid weight loss, low energy, tiredness, feeling dizzy, muscle loss, a weaker immune system and mood swings.

Long-term ketamine use can result in serious physical and mental health effects such as bladder ulcers, and bladders may need treatment or removal after long-term use. People end up being in a situation when they are needing to take more ketamine, to ease their pain leading to more physical harm.

Wear Recovery and YDAP (Young Drug Alcohol Project - Sunderland) have noticed an increase in ketamine related referrals within the past year.

"Its a home-based

substance, switching off at

the end of the day. Almost

checking out for a few hours

and go to bed and wake up.

Because you're clear and not

having effects on you in the

morning. You can still wake up,

function at your job and all the

rest of it. [. . .] Rather than a

glass of wine, it's a bump of

ket." (Young Adult Treatment

Service Transition Worker,

Manchester)

Why is Ketamine so popular?

'Affordability'

Cocaine is expensive, but ketamine is more affordable. A gram of ketamine is about £20, but a gram of cocaine is £70-£80.

'No comedown'

Most people report no comedown and always feel close to normal the next day.

'To chill out'

Ketamine creates feelings of dissociation, allowing you to change how you might feel and help you to relax.

'To aid sleep'

Ketamine can make you feel sleepy and can allow someone to have a better night sleep

Self-Medication

People take it not to get in a 'k-hole' but to feel less anxious, depressed.

More acceptable

Ketamine is more socially acceptable in young people. It has been said there is less stigma than taking drugs like cocaine or MDMA.

Why do pharmacies need to know?

Long term ketamine use can cause 'ketamine bladder' resulting in severe ulceration of the bladder, urinary tract and kidney problems. Symptoms can present similar to Urinary Tract Infections and can result in long term damage.

Pharmacy staff could have a key role in early interventions for ketamine use.

If you notice someone presenting regularly with UTI like

symptoms, this could be an opportunity to ask about ketamine use.

If the person discloses ketamine use, a referral to Wear Recovery could be a good place to start if they wish to have support.

If the person is under 18, we will send the referral to the young peoples service.

If the person does not wish to discuss, you can provide them with harm reduction techniques such as

- * Try not to use alone
- * Don't share straws or notes with friends if snorting
- * Eat before you take it
- * Don't re-dose if your in pain. If the pain comes back, get checked out.