

**MINUTES OF THE MEETING OF THE CUMBRIA AREA PRESCRIBING COMMITTEE
HELD ON THURSDAY 13th OCTOBER 2016 AT 2.00PM
PRUFC, PENRITH**

Present:	Bill Glendinning Lesley Angell Pauline Bourne Andrea Loudon Dr Andrea Mulgrew Sarah Roberts Dr Nirmalan Arulanantham Helen Huck Dr Julia Smith Phillip Utting	Chief Pharmacist, NCUHT (Chair) Senior Medicines Optimisation Pharmacist, NECS Senior Pharmacist, UHMBT Clinical Pharmacy Lead, CCG GP Prescribing Lead, Allerdale Locality Patient Voice representative Clinical Pharmacologist General Physician, NCUHT Head of Pharmacy CPFT GP Prescribing Lead, South Lakes Professional Secretary Cumbria APC & Senior Medicines Optimisation Technician, NECS
In attendance	Graham Atkinson Karen Hailes Dr John Atkinson Dr Richard Davidson	Head of Medicine Optimisation, Lancs North CCG Specialist Respiratory Nurse, CPFT Respiratory Physician NCUHT Core Medical Trainee NCUHT

APOLOGIES FOR ABSENCE

Action

Ben Merriman	LPC Representative
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DECLARATION OF INTERESTS

Committee members reminded to complete the declaration of interest form and return to PU before the next meeting.

MINUTES OF THE PREVIOUS MEETING

The minutes of the previous meeting held on 11th August 2016 were approved.

ACTION LOG FROM PREVIOUS MEETING (11th August 2016)

Updates were given as follows:

- 66/16 – This action was completed
- 87/16 – This action was completed
- 88/16 – This action was completed
- 90/16 – This action was completed
- 91/16 – This action was completed
- 94/16 – This action was completed

72/15 – Vitamin D guidelines (was NG 14 Melanoma assessment and Management) –

Proposals to be considered by the committee:

1. Should IM Ergocalciferol be considered as a RED drug on the RAG list?
Decision: APPROVED RED RAG status.
2. Should the treatment of deficiency of vitamin D in children be considered as a RED/AMBER drug on the RAG list?
Decision: APPROVED AMBER RAG status
3. (a) Drug choices?
Decision: Follow current Lothian drug choices.
(b) Choice of treatment doses – should they be listed generically or by brand?
Decision: To be listed generically
(c) Thorens vs. Invita D3
Decision: Invita D3 in line with Lothian

The guideline was approved – COMPLETED, to be added to Prescription Pad and NECS MO website. LA

126/15 – Azathioprine & Mercaptopurine SCG – LA to review the SCG taking comments from Mr Dennis Burke and Dr Shadad (both NCUHT) into account. LA to contact Dr Chris McDonald - ONGOING LA

03/16 – Cumbria and Lancashire Formulary (was Lothian Joint Formulary review)

Graham Atkinson discussed the Morecambe Bay formulary saying it will be completed and operational by December 2016.

During the period of change from Dec 16 to April 17 when the Cumbria boundary change process is underway he asked if both North Lancs APC and Cumbria APC can work closely together when reviewing drugs for RAG status.

LA will be attending both meetings during this period and will inform Cumbria APC of the North Lancs decisions.

ONGOING LA

08/16 Transfer of care audit – Report of the audit results was reviewed.

Actions from results still to be completed:

- I. Secondary care medication discharge form to be reviewed BG
 - II. Report to be taken to the Local Professional Network for Pharmacy. AL
 - III. Report for Prescription Pad LA
 - IV. Report to be uploaded to website PU
- ONGOING

18/16 & 33/16 Memantine and AChEI SCG

Final version circulated and approved. - COMPLETED

46/16(2) NICE Technology appraisals- TA388 Sacubitril valsartan – Suggested changes:

Full NICE criteria to be added to first box.

Include requirement for GPs to prescribe once secondary care reviewed and stable

NA to feedback changes to author, final document to be circulated before the next meeting for comments. ONGOING NA

55/16 Domperidone SCG – Item closed.

56/16 PICO dressings RAG review – Prescription request form – APPROVED , CPFT logo to be added to document – COMPLETED

64/16 LMMG Psoriasis Biologics Agents consultation – Consultation document to be brought to the December APC meeting, PB to forward to members.

PB

65/16 Dr Macdonald comments noted - COMPLETED

68/16 Specials Guide –updated version (was Off-label uses of tablets and capsules) - To be brought to the December APC meeting. – ONGOING

LA

77/16 Formulary amendments:

July 2016

Noted

Minor Ailments Formulary review, BM to feedback to LPC. – ONGOING

BM

81/16 Contract monitoring - Dr Richard Davidson gave a short presentation on his survey of consultants attitudes to the use of NOACs in the Cumberland Infirmary.. The committee discussed effect lack of compliance has on therapy and the review of TTR from INR star which demonstrates efficient and effective warfarin service provision in primary care. Dr Davidson was requested to feed this back to colleagues- COMPLETED

83/16 ADHD Drugs SCG – Final version circulated and approved. – COMPLETED

84/16 CG183 Drug allergy diagnosis and management – No further action can be taken by the committee. GPs are encouraged to free text details of the reaction when adding to patient notes. Add to Prescription Pad

LA

85/16 Gain Share Principles for Cumbria – Updated document circulated Approved with the exception of the - finance section which is outwith the APC remit. - COMPLETED

94/16 **Recent LJF Formulary decisions and amendments**

Bevacizumab 25mg/ml concentrate for solution for infusion Avastin® - In combination with paclitaxel and cisplatin or, alternatively paclitaxel and topotecan in patients who cannot receive platinum therapy, for the treatment of adults with persistent, recurrent, or metastatic carcinoma of the cervix. Noted - RED

Dexamethasone 700 micrograms intravitreal implant in applicator Ozurdex®- Treatment of adult patients with visual impairment due to diabetic macular oedema who are pseudophakic or who are considered insufficiently responsive to, or unsuitable for non-corticosteroid therapy. Noted – RED in line with NICE TA 349

Zoledronic acid - Treatment of patients with osteogenesis imperfecta, juvenile idiopathic osteoporosis, recurrent fractures due to osteopaenia.

Zoledronic acid will be used first-line in preference to pamidronate, however some patients will be treated with pamidronate first. Noted - RED

Thrombin injection Floseal®- Bleeding gastric and ectopic varices.

It was noted that Floseal® is a medical device which will be used off-label. Noted – RED

Diamorphine 720 microgram / actuation and 1600 microgram / actuation nasal spray

Ayendi®- Treatment of acute severe nociceptive pain in children and adolescents in a hospital setting. Diamorphine hydrochloride nasal spray (Ayendi®) should be administered in the emergency setting by practitioners experienced in the administration of opioids in children and with the appropriate monitoring. Noted – RED

Emtricitabine / tenofovir alafenamide 200mg/25mg, 200mg/10mg film coated tablets

Descovy®- In combination with other antiretroviral agents for the treatment of adults and adolescents (aged 12 years and older with body weight at least 35kg) infected with human immunodeficiency virus type 1. Noted – RED NHSE commissioned

Rilpivirine 25mg film coated tablet Edurant®- In combination with other antiretroviral medicinal products, for the treatment of human immunodeficiency virus type 1 (HIV-1) infection in antiretroviral treatment-naïve patients aged 12 to 18 years of age and older with a viral load (VL) <100,000 HIV-1 RNA copies/ml. Noted – RED NHSE commissioned

Tisseel Ready to use (RTU) fibrin glue Tisseel®- Ophthalmic surgery involving conjunctiva and cornea as tissue adhesive.

This product will replace the Tisseel kit which has been discontinued. Noted – RED

Prednisolone 10mg/ml oral solution and prednisolone 5mg tablets For steroid responsive inflammatory conditions in children.

This product will replace prednisolone soluble tablets, the new product is more palatable and cost efficient. Plain 5mg tablets can also be used in older patients.- Noted – current RAG status maintained

Prednisolone 1mg/ml oral solution and prednisolone 5mg tablets Joint first choice preparation for the acute wheeze in children.

This product will replace prednisolone soluble tablets, the new product is more palatable and cost efficient. Plain 5mg tablets can also be used in older patients.— Noted - current RAG status maintained

Hypertonic sodium chloride - 7% nebuliser solution Resp-Ease® First choice for mobilise lower respiratory tract secretions in mucous consolidation.

This product will replace Nebusal hypertonic saline 7% nebuliser solution. Noted- AMBER

Human alpha1-proteinase inhibitor Respreeza® - Maintenance treatment to slow the progression of emphysema in adults with documented severe alpha1-proteinase inhibitor (A1-PI) deficiency. Not recommended - Noted – BLACK

Elotuzumab Emlipiti®- Treatment of multiple myeloma in combination with lenalidomide and dexamethasone in adult patients who have received at least one prior therapy. Not recommended - Noted BLACK

Necitumumab Portrazza®- Considered under item 96/16

Brivaracetam Briviact®- Adjunctive therapy in the treatment of partial-onset seizures with or without secondary generalisation in adult and adolescent patients from 16 years

of age with epilepsy.– NOTED – BLACK

Crizotinib Xalkori®- First-line treatment of adults with anaplastic lymphoma kinase (ALK)-positive advanced non-small cell lung cancer (NSCLC) Considered under item 96/16

Nivolumab Opdivo®- Treatment of locally advanced or metastatic squamous non-small cell lung cancer (NSCLC) after prior chemotherapy in adults. – NOTED – remains RED in line with NICE TA384

Secukinumab Cosentyx®- Treatment of active ankylosing spondylitis (AS) in adults who have responded inadequately to conventional therapy. Considered under item 96/16

Vortioxetine Brintellix® - The treatment of major depressive episodes in adults. NHS England commissioned – NOTED – Remains GREEN in line with NICE TA367

95/16

Formulary amendments:

August 2016

Noted

10.1 Drugs used in inflammatory arthritis – Ibuprofen now first choice – add to Prescription Pad

LA

96/16 **NICE TECHNOLOGY APPRAISALS**

TA401 Bosutinib – For previously treated chronic myeloid leukaemia in adults- RED

TA402 Pemetrexed -Maintenance treatment for non- squamous non- small cell lung cancer after pemetrexed and cisplatin - RED

TA403 Ramucirumab - For previously treated locally advanced or metastatic non- small cell lung cancer – Not recommended BLACK

TA404 Degarelix – Recommended as an option for treating advanced hormone dependent prostate cancer . - AMBER

TA405 Trifluridine- tipiracil – Previously treated metastatic colorectal cancer. - RED

TA406 Crizotinib - For untreated anaplastic lymphoma kinase-positive advanced non-small cell lung cancer. - RED

TA407 Secukinumab – For active ankylosing spondylitis after treatment with non-steroidal anti- inflammatory drugs or TNF- alpha inhibitors - RED

TA408 Pegaspargase – For treating acute lymphoblastic leukaemia - RED

TA409 Aflibercept – For treating visual impairment caused by macular oedema after branch retinal vein occlusion. – RED

TA410 Talimogene laherparepvec – For treating unresectable metastatic melanoma – RED

TA411 Necitumumab - For treating advanced or metastatic squamous non-small cell lung cancer – RED

TA412 Radium-223 dichloride - For treating hormone-relapsed prostate cancer with bone metastases - RED

97/16 **NICE CLINICAL GUIDELINES**

NG53: Transition between inpatient mental health settings and community or care home settings – No prescribing implications - Noted

NG54: Mental health problems in people with learning disabilities: prevention, assessment and management - Noted

NG55: Harmful sexual behaviour among children and young people. – No prescribing implications - Noted

NG56: Multimorbidity: clinical assessment and management – Noted - to be added to Prescription Pad LA

98/16 **NICE Medicines Optimisation NG5**

Nothing to discuss

99/16 **CONTRACT MONITORING**

Nothing to discuss

100/16 **MEDICINES SAFETY**

Patient Safety Alert – Resources to support the care of patients with acute kidney injury (August 16) – for information only. Trusts are asked to report back actions taken. COMPLETED

CLINICAL MATTERS

101/16 **COPD Treatment Algorithm** – Karen Hailes (CPFT) and Dr Mathew Lane presented the new algorithm to the committee. The algorithm was APPROVED for use with the following alterations:

- I. Re-name “ COPD Inhaler decision tool”
- II. Recognise within the document that this sits within the NICE COPD pathway and is line with the NICE Quality Standard.
- III. Remove – Important point one – Cumbria prescribes generically
- IV. Important point five becomes important point one.
- V. Remove “Ultibro breezhaler offers best evidence base”
- VI. Remove “Oral therapies” section.
- VII. Remove “Things to avoid in primary care”

The committee accepted that patients need a choice of devices to ensure optimal treatment.

NICE have published Evidence Summaries: new medicine ESNMs on the four dual bronchodilators that states that there are no published studies which directly compare to say that one is better than the other. Since they are all currently the same price it was agreed that all four should be included on the formulary. To ensure continuity of device it

was agreed that the equivalent single LAMA inhalers should also be included in the formulary choices. The LABA/ICS combinations Fostair, Relvar and Duoresp are already listed on LJF.

BG to discuss with Karen Hailes and bring back to next meeting. - ONGOING

BG

102/16 **Nefopam RAG rating request** – Approved BLACK RAG rating for all indications for new patients. All current patients should have their pain control reviewed. RAG list to be updated and add to Prescription Pad. - ONGOING

LA

103/16 **Cumbria NICE Blood Glucose Algorithm** – Drug choice of GLP-1 updated as per Lothian with Liraglutide as daily drug of choice, Dulaglutide as weekly drug of choice. To be added to NECS MO website and Prescription Pad. – ONGOING

LA

104/16 **Ascorbic Acid RAG rating request** – Approved GREEN RAG rating for scurvy licensed indication, BLACK RAG rating for all other indications. RAG list to be updated and add to Prescription Pad. - ONGOING

LA

105/16 **Ostomy care** – Work to be done across organisations to identify efficiencies and improve quality of prescribing . LMMG prescribing guidance approved which Cumbrian Clinicians may wish to follow. To be added to NECS MO website and Prescription Pad.
Members to bring to December meeting who supplies their stoma service.- ONGOING

LA

ALL

106/16 **RDTC reports** – Q1 Prescribing reports were circulated for information.

- Diabetes – noted Cumbria has average spend , no areas of current concern. Downward trend in BGTS
- Respiratory – Above England average spend for bronchodilators and inhaled corticosteroids..
- Cardiovascular – Above England average spend, awareness raised regarding anticoagulation within trusts.
- Dementia – antipsychotics low spend. Galantamine prescribing reducing and memantine prescribing rising- to CPFT care group for awareness
Noted for information.

HH

107/16 **Rebate scheme assessment process** –Agreed in principle.

108/16 **NTAG – FreeStyle Libre Flash (Abbott)** – RECOMMENDED as an option for continuous glucose monitoring (CGM) only and for patients who fulfil the NICE criteria for CGM and as per the North East and Cumbria CGM guidelines. ACCEPTED – RED

109/16 **NTAG – Eluxadoline(Truberizi®, Allergan)** – NOT RECOMMENDED as an option for the treatment of diarrhea dominant irritable bowel syndrome (IBS-D). ACCEPTED – BLACK

110/16 **NTAG – Ferric Maltol (Ferracru®, Shield TX, UK)** – RECOMMENDED as an option for the treatment if iron deficiency anaemia (IDA) in adults with inflammatory bowel disease (IBD). ACCEPTED – RED

111/16 **OPERATIONAL**

Nothing to discuss

DRUG SAFETY UPDATE

112/16 Drug Safety Update (August 2016) – Noted

113/16 Drug Safety Update (September 2016) – Noted, points 1 & 2 add to Prescription Pad. LA

114/16 **FOR INFORMATION**

Minutes received:

Lothian Formulary Committee (August 2016)

ANY OTHER BUSINESS

115/16 Membership of Cumbria APC to be discussed at December 16 meeting. PU
PU to add to agenda.

DATE and TIME of next meeting

Thursday 15th December 2016, 2pm at Enterprise House, Kendal
