

Drug recommendations from Area Prescribing Committee – 16th June 2016

APC recommendations

	Drug	Recommendation	Cumbria implications
<i>The following drugs have been recommended for use in Cumbria under the stated rating.</i>	Carbocisteine sachets		GREEN
	PICO TNP System	Wound management	AMBER
	Fulvestrant	Re-categorise to black.	BLACK

Lothian formulary recommendations

	Drug	Licensed indication	Recommendation
<i>The following drugs have been recommended as suitable for use:</i>	Dulaglutide 0.75mg and 1.5mg solution for injection in prefilled pen (Trulicity®)	Treatment in adults of type 2 diabetes mellitus to improve glycaemic control as add-on therapy in combination with other glucose-lowering medicinal products including insulin, when these, together with diet and exercise, do not provide adequate glycaemic control.	AMBER
	Ceritinib 150mg hard capsules (Zykadia®)	Treatment of adult patients with anaplastic lymphoma kinase (ALK)-positive advanced non-small cell lung cancer (NSCLC) previously treated with crizotinib.	BLACK
	Alendronic Acid 70mg effervescent tablets (Binosto®)	Treatment of postmenopausal osteoporosis.	GREEN
	Botulinum toxin type A 50 unit, 100 unit and 200 unit powder for solution for injection (Botox®)	Focal spasticity, including the treatment of wrist and hand disability due to upper limb spasticity associated with stroke in adults.	RED

	Drug	Licensed indication	Recommendation
	Botulinum toxin type A 50 and 100 LD50 units powder for solution for injection (Xeomin®)	Post stroke spasticity of the upper limb presenting with flexed wrist and clenched fist in adults.	RED
	Botulinum toxin type A powder for solution for injection (Botox®)	The management of bladder dysfunctions in adult patients who are not adequately managed with anticholinergics: overactive bladder with symptoms of urinary incontinence, urgency and frequency.	RED
	Camellia Sinensis (green tea) leaf extract 10% ointment (Catephen®)	Cutaneous treatment of external genital and perianal warts (condylomata acuminata) in immunocompetent patients from the age of 18 years.	RED For use in GUM Clinic only.
	Liraglutide (Victoza®)	First choice drug for the treatment of Type 2 diabetes.	AMBER
	Prasugrel (Efient®)	Patients undergoing flow diverter stent insertion for the treatment of an intracranial aneurysm with a subtherapeutic level of platelet inhibition after loading with clopidogrel, as measured by VerifyNow assay.	AMBER

NTAG Treatment Appraisal recommendations

Drug/indication	NTAG recommendation	Cumbria APC decision
Etanercept biosimilar (Benepali®)	Treatment option for the following indications: Rheumatoid arthritis, Axial spondylitis, Psoriatic arthritis and Plaque psoriasis (adults only) – RECOMMENDED as an option for use in adults where the originator product (Enbrel®) would normally be prescribed.	RED
e-VOKE® electronic inhaler	To relieve and/or prevent withdrawal symptoms and reduce the cravings associated with tobacco dependence- NOT RECOMMENDED	BLACK
Transanal irrigation (TAI) systems (Peristeen®, Aquaflush®, Irypump®, S and QuFora®)	for neurogenic bowel dysfunction, chronic constipation and chronic faecal incontinence – RECOMMENDED	GREEN

NICE Technology assessments

	Drug	Condition	Summary	Cumbria APC Decision
TA387	Abiraterone	Treating metastatic hormone relapsed prostate cancer before chemotherapy is initiated.	Abiraterone in combination with prednisone or prednisolone is recommended, within its marketing authorisation, as an option for treating metastatic hormone-relapsed prostate cancer: in people who have no or mild symptoms after androgen deprivation therapy has failed, and before chemotherapy is indicated	RED
TA388	Sacubitril valsartan	Treating symptomatic chronic heart failure with reduced ejection fraction.	Sacubitril valsartan is recommended as an option for treating symptomatic chronic heart failure with reduced ejection fraction, only in people: <ul style="list-style-type: none"> with New York Heart Association (NYHA) class II to IV symptoms and 	RED

			<ul style="list-style-type: none"> • with a left ventricular ejection fraction of 35% or less and • who are already taking a stable dose of angiotensin-converting enzyme (ACE) inhibitors or angiotensin II receptor-blockers (ARBs). <p>Treatment with sacubitril valsartan should be started by a heart failure specialist with access to a multidisciplinary heart failure team. Dose titration and monitoring should be performed by the most appropriate team member as defined in NICE's guideline on chronic heart failure in adults: management.</p>	
TA390	Canagliflozin, Dapagliflozin and Empagliflozin as monotherapies	Treating type 2 diabetes	<p>Canagliflozin, dapagliflozin and empagliflozin as monotherapies are recommended as options for treating type 2 diabetes in adults for whom metformin is contraindicated or not tolerated and when diet and exercise alone do not provide adequate glycaemic control, only if:</p> <ul style="list-style-type: none"> • a dipeptidyl peptidase-4 (DPP-4) inhibitor would otherwise be prescribed and • a sulfonylurea or pioglitazone is not appropriate. <p>1.2 Adults whose treatment with canagliflozin, dapagliflozin or empagliflozin as monotherapy is not recommended in this NICE guidance, but was started within the NHS before this guidance was published, should be able to continue treatment until they and their NHS clinician consider it appropriate to stop.</p>	AMBER
TA391	Cabazitaxel	For hormone relapsed metastatic prostate cancer treated with docetaxel.	This guidance replaces NICE technology appraisal guidance on cabazitaxel for hormone-refractory metastatic prostate cancer previously treated with a docetaxel-containing regimen (TA255). It does not cover the use of cabazitaxel	RED

			for people who have had docetaxel and then abiraterone, enzalutamide or radium 223 dichloride.	
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NICE clinical guidelines

Clinical Guideline	Condition	Date of Publication	Summary of Guidance
NG45	Routine preoperative tests for elective surgery	April 16	<p>This guideline covers routine preoperative tests for people aged over 16 who are having elective surgery. It aims to reduce unnecessary testing by advising which tests to offer people before minor, intermediate and major or complex surgery, taking into account specific comorbidities (cardiovascular, renal and respiratory conditions and diabetes and obesity). It does not cover pregnant women or people having cardiothoracic procedures or neurosurgery.</p> <p>No specific prescribing implications.</p>
NG46	Controlled Drugs: safe use and management	April 16	<p>This guideline covers systems and processes for using and managing controlled drugs safely in all NHS settings except care homes. It aims to improve working practices to comply with legislation and have robust governance arrangements. It also aims to reduce the safety risks associated with controlled drugs.</p>

			<p>This guideline includes recommendations:</p> <ul style="list-style-type: none"> • for organisations on developing systems and processes, including governance arrangements, storage, stock checks, transportation and destruction and disposal • for organisations on record keeping, risk assessment and reporting controlled drug-related incidents for organisations • for health professionals on prescribing, obtaining and supplying, administering and handling controlled drugs <p>for health professionals monitoring use, including governance and systems for reporting concerns and incidents.</p>
NG47	Haematological cancers: improving outcomes	May 16	<p>This guideline covers integrated diagnostic reporting for diagnosing haematological cancer in adults, young people and children. It also covers staffing, facilities (levels of care) and multidisciplinary teams needed for adults and young people. It aims to improve care for people with suspected or diagnosed cancer by promoting best practice on the organisation of haematological cancer services.</p> <p>There are no specific prescribing implications</p>