**County Durham and Darlington**

**Area Prescribing Committee**

Summary of decisions made regarding new product requests considered at a meeting of the Committee on **Thursday 6th July 2017**

**Classification of products:**

**G Green drug** - Can be initiated and prescribed in all care settings Description: Green Alternative- Second line / alternative green drug

**G+** Description: Green plus**Green+ drug** Specialist initiation / recommendation.  Can be recommended by a specialist for initiation in primary care; or be initiated by a specialist and transferred to primary care once the patient stabilised. In some cases there may be a further restriction for use outlined - these will be defined in each case.

**A**  Description: Amber**Amber drug** - These are specialist drugs which must be initiated by the specialist, but with the potential to transfer to primary care within written and agreed shared care protocols and according to the agreed process for transfer of care

**R** Description: Red**Red drug** - Drugs that should remain under the total responsibility of the specialist. Usually considered as “hospital only” drugs

Description: Not approved **Not Approved** - Drugs that have been considered by the APC or other approved body and are not approved for prescribing within County Durham & Darlington.

Description: Not yet Reviewed **Not Reviewed** - Drugs that haven’t been reviewed by the APC yet. This usually means that no application has been received or that an application is in progress. These drugs are not normally considered appropriate for prescribing in County Durham & Darlington.

Description: Unclassed **Unclassed Drug** - Drugs that do not fall into one of the above categories

| Product | Decision | | | | | | | Comments/notes | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Approved | Refused | | Deferred | | | |  | |
| 1) Requests deferred from previous meetings | | | | | | | | | |
| **None** |  |  | |  | | | |  | |
| 2) New Requests | | | | | | | | | |
| **None** |  |  | |  | | | |  | |
| 3) New formulations & extensions to use | | | | | | | | | |
| **None** |  |  | |  | | | |  | |
| 5) Products considered by NICE | | | | | | | | | |
| **TA440 Pegylated liposomal irinotecan for treating pancreatic cancer after gemcitabine** |  | |  | |  | | The formulary will reflect the TAG – NHS England is the responsible commissioner. | | |
| **TA441 Daclizumab for treating relapsing–remitting multiple sclerosis** | **R** | |  | |  | | The formulary will reflect the TAG – NHS England is the responsible commissioner. | | |
| **TA442 Ixekizumab for treating moderate to severe plaque psoriasis** | **R** | |  | |  | | The formulary will reflect the TAG – CCG is the responsible commissioner. | | |
| **TA443 Obeticholic acid for treating primary biliary cholangitis** | **R** | |  | |  | | The formulary will reflect the TAG – NHS England is the responsible commissioner. | | |
| **TA444 Afatinib for treating advanced squamous non-small-cell lung cancer after platinum-based chemotherapy (terminated appraisal)** |  | |  | |  | | The formulary will reflect the TAG – NHS England is the responsible commissioner. | | |
| **TA445 Certolizumab pegol and secukinumab for treating active psoriatic arthritis after inadequate response to DMARDs** | **R** | |  | |  | | The formulary will reflect the TAG – NHS England is the responsible commissioner. | | |
| **6) Northern (NHS) Treatment Advisory Group (N-TAG )** | | | | | | | | | |
| **None** |  | |  | | |  | | |  |
| 7) Appeals against earlier decisions by the APC | | | | | | | | | |
| **None** |  |  | |  | | | |  | |
| 8) Miscellaneous decisions by the APC | | | | | | | | | |
| **Strontium** |  |  | |  | | | | Product to be discontinued worldwide from Aug 2017 so removed from formulary. | |
| **Liraglutide 18 mg/3ml soln for inj in prefilled pen (Saxenda®)** |  |  | |  | | | | Added to formulary as NOT REVIEWED drug To make clear that Saxenda® for use in obesity has not yet been reviewed by APC and as such should not be prescribed. | |
| **Selinium** |  |  | |  | | | | Added to formulary as a RED drug to make clear that for use on ITU only and should not be prescribed in primary care. | |
| **Retigabine** |  |  | |  | | | | Deleted retigabine from formulary as per MHRA Drug Safety Update May 2017 – all patients must be withdrawn from retigabine (Trobalt) by the end of June 2017. | |

The following guidelines were presented to and approved at the July 2017 meeting of the APC:

* Durham Guidelines for the use of Trans Anal Irrigation (TAI) as a Treatment for Chronic Constipation Refractory to Standard Treatments in Adults

The following Green+ drug information leaflets were presented to and approved at the July 2017 meeting of the APC:

* Colistimethate sodium (Colomycin®) for Nebulisation in Patients with Non-Cystic Fibrosis Bronchiectasis - INFORMATION FOR PRIMARY CARE

The following shared care guidelines were presented to and approved at the July 2017 meeting of the APC:

* Atomoxetine (TEWV)
* Methylphenidate (TEWV)