

## County Durham and Darlington Area Prescribing Committee

Summary of decisions made regarding new product requests considered at a meeting of the Committee on **Thursday 17<sup>th</sup> January 2019**

### Classification of products:

- G** **Green drug** - Can be initiated and prescribed in all care settings **G-** Second line / alternative green drug
- G+** **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** **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** **Red drug** - Drugs that should remain under the total responsibility of the specialist. Usually considered as "hospital only" drugs
- X** **Not Approved** - Drugs that have been considered by the APC or other approved body and are not approved for prescribing within County Durham & Darlington.
- ⊘** **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.
- **Unclassed Drug** - Drugs that do not fall into one of the above categories

Product	Decision			Comments/notes
	Approved	Refused	Deferred	
<b>1) Requests deferred from previous meetings</b>				
None				
<b>2) New Requests</b>				
Insulin Lispro Sanofi® Biosimilar	✓ <b>G</b>			As alternative to Humalog insulin in new patients  <b>Decision:</b> Approved and prescriptions need to be written as Insulin Lispro Sanofi® or Humalog® to avoid prescribing/dispensing errors.
<b>3) New formulations &amp; extensions to use</b>				
None				
<b>5) Products considered by NICE</b>				
TA542: Cabozantinib for untreated advanced renal cell carcinoma	✓ <b>R</b>			The formulary will reflect the TAG – NHS England is the responsible commissioner.





DECISION SUMMARY

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	Approved	Refused	Deferred	
<b>TA543: Tofacitinib for treating active psoriatic arthritis after inadequate response to DMARDs</b>	✓ <b>R</b>			The formulary will reflect the TAG – CCG is the responsible commissioner.
<b>TA544: Dabrafenib with trametinib for adjuvant treatment of resected BRAF V600 mutation-positive melanoma</b>	✓ <b>R</b>			The formulary will reflect the TAG – NHS England is the responsible commissioner.
<b>TA545: Gemtuzumab ozogamicin for untreated acute myeloid leukaemia</b>	✓ <b>R</b>			The formulary will reflect the TAG – NHS England is the responsible commissioner.
<b>TA546: Padeliporfin for untreated localised prostate cancer</b>		✓		The formulary will reflect the TAG – NHS England is the responsible commissioner – NICE did not recommend use.
<b>TA547: Tofacitinib for moderately to severely active ulcerative colitis</b>	✓ <b>R</b>			The formulary will reflect the TAG – CCG is the responsible commissioner.
<b>TA537: Ixekizumab for treating active psoriatic arthritis after inadequate response to DMARDs</b>	✓ <b>R</b>			The formulary will reflect the TAG – CCG is the responsible commissioner.
<b>TA538: Dinutuximab beta for treating neuroblastoma</b>	✓ <b>R</b>			The formulary will reflect the TAG – NHS England is the responsible commissioner.
<b>TA539: Lutetium (177Lu) oxodotreotide for treating unresectable or metastatic neuroendocrine tumours</b>	✓ <b>R</b>			The formulary will reflect the TAG – NHS England is the responsible commissioner.
<b>TA540: Pembrolizumab for treating relapsed or refractory classical Hodgkin lymphoma</b>	✓ <b>R</b>			The formulary will reflect the TAG – NHS England is the responsible commissioner.

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<b>TA541: Inotuzumab ozogamicin for treating relapsed or refractory B-cell acute lymphoblastic leukaemia</b>	✓ <b>R</b>			The formulary will reflect the TAG – NHS England is the responsible commissioner.
<b>7) Appeals against earlier decisions by the APC</b>				
None				
<b>8) Products considered by NTAG</b>				
<b>Pitolisant (Wakix®) for the treatment of narcolepsy with or without cataplexy in adults (updated)</b>	✓ <b>R</b>			The formulary will reflect the NTAG position The Northern (NHS) Treatment Advisory Group recommends the use of Pitolisant only in narcoleptic patients with residual severe daytime sleepiness who have an Epworth score of 14 or over if they have already tried modafinil and dexamfetamine or methylphenidate, and where therapy will make a substantial difference to their quality life. Prescription of this medication will be limited to Sleep Centres with adequate expertise in managing narcolepsy and using this medication: The James Cook University Hospital, Department of Sleep Medicine and Royal Victoria Infirmary
<b>Erenumab and galcanezumab for prophylaxis of migraine</b>				The formulary will reflect the NTAG position i.e. NOT APPROVED.  The Northern (NHS) Treatment Advisory Group does not recommend the use of erenumab and galcanezumab for prophylaxis of migraine.  Noted NICE TA due Q3 2019.
<b>8) Miscellaneous decisions by the APC</b>				
<b>Benzyl Peroxide – Acnecide 5% gel</b>	✓			Other strengths not available on prescription.  <b>Decision:</b> Agreed to change formulary to read just Acnecide 5% available plus available OTC
<b>Eltrombopag</b>	✓ <b>R</b>			NICE TA approved and NHSE commissioned. Currently not included in formulary  <b>Decision:</b> Approved as per NICE TA
<b>Safinamide 50mg and 100mg tablets</b>	✓ <b>G+</b>			Approved for use in Parkinson's Disease patients on levodopa who are having motor fluctuations affecting their quality of life as an alternative to rasagiline.  <b>Decision:</b> Approved. First supply must be from specialist. Is on formulary in Tees and this is causing some cross boundary issues. (Also on NoT formulary).
<b>Vitamin B Co Strong</b>	✓			<b>Decision:</b> Agreed to update formulary that not to be used for alcohol related disorders as per NICE guidance.

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<b>Insulin Aspart (Fiasp®)</b>	 			<p>Has faster onset of action than other short acting insulins. Currently on the formulary as a RED drug for use in pregnant patients only.</p> <p><b>Decision:</b> It was agreed to change to GREEN+ and extend use to all type 1 diabetes patients in whom their diabetes cannot be adequately managed with alternative formulary choices and in whom a faster onset of action may be beneficial or greater effect on post-prandial glucose is required. Novorapid insulin remains 1<sup>st</sup> choice.</p>
<b>Testosterone</b>	 			<p><b>Decision:</b> it was agreed that formulary status of all testosterone preparations when used for licensed indications should be GREEN+.</p>

The following guidelines were presented to and approved at the January 2019 meeting of the APC:

- RMOG Liothyronine Guidance
- County Durham & Darlington DNP List – updated
- County Durham & Darlington Grey List – updated
- County Durham & Darlington Patient Decision Aids Resource – updated
- TEWV Hyperprolactinaemia Guidance
- Medicinal Cannabis – agreed regional position statement on the prescribing of medicinal cannabis

The following Green+ drug information leaflets were presented to and approved at the January 2019 meeting of the APC:

- Nil

The following shared care guidelines were presented to and approved at the January 2019 meeting of the APC:

- Melatonin