# County Durham and Darlington
# Area Prescribing Committee

Summary of decisions made regarding new product requests considered at a meeting of the Committee on **Thursday 2nd May 2019**

## Classification of products:

G **Green drug** - Can be initiated and prescribed in all care settings O- 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

✕ **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 | |
| **1) Requests deferred from previous meetings** | | | | |
| **None** | | | | |
| **2) New Requests** | | | | |
| **HCG (Ovitrelle®) Injection** | ✓ R | | | Requested for as a diagnostic test for hypogonadism in boys to diagnose hypogonadotrophic hypogonadism and androgen receptor resistance conditions. It is also used for undescended testes. It will be used as per Newcastle protocol.<br><br>**Decision:** approved |
| **Methoxyflurane (Penthrox®) Medical gas** | ✓ R | | | Requested for use in A&E only for emergency relief of moderate to severe pain in conscious adult patients with trauma and associated pain.<br><br>**Decision**: approved |
| **Kyleena® 19.5 mg intrauterine delivery system** | ✓ G | | | Requested as alternative to Mirena® as smaller in size. Jaydess® only licensed for 3 years use vs Mirena® and Kyleena® which are licensed for 5 years use. Plan is to remove Jaydess® from the formulay and replace with Kyleena® as an alternative to Mirena®.<br>It is not to replace Mirena® entirely and the potential increased failure rate with Kyleena® will be discussed with patients.<br><br>**Decision:** approved as replacement for Jaydess® on formulary. |

| Product | Decision | | | Comments/notes |
|---|---|---|---|---|
| | Approved | Refused | Deferred | |
| **3) New formulations & extensions to use** | | | | |
| **None** | | | | |
| **5) Products considered by NICE** | | | | |
| **TA560: Bevacizumab with carboplatin, gemcitabine and paclitaxel for treating the first recurrence of platinum sensitive advanced ovarian cancer (terminated appraisal)** | | ✓ | | The formulary will reflect the TAG – NHS England is the responsible commissioner – NICE did not recommend use. |
| **TA561: Venetoclax with rituximab for previously treated chronic lymphocytic leukaemia** | ✓ R | | | The formulary will reflect the TAG – NHS England is the responsible commissioner. |
| **TA562: Encorafenib with binimetinib for unresectable or metastatic BRAF V600 mutation-positive melanoma** | ✓ R | | | The formulary will reflect the TAG – NHS England is the responsible commissioner. |
| **TA563: Abemaciclib with an aromatase inhibitor for previously untreated, hormone receptor-positive, HER2-negative, locally advanced or metastatic breast cancer** | ✓ R | | | The formulary will reflect the TAG – NHS England is the responsible commissioner. |
| **TA564: Dabrafenib with trametinib for treating advanced metastatic BRAF V600E mutation-positive non-small-cell lung cancer (terminated appraisal)** | | ✓ | | The formulary will reflect the TAG – NHS England is the responsible commissioner – NICE did not recommend use. |
| **TA565: Benralizumab for treating severe eosinophilic asthma** | ✓ R | | | The formulary will reflect the TAG – NHS England is the responsible commissioner. |

| Product | Decision | | | Comments/notes |
|---|---|---|---|---|
| | Approved | Refused | Deferred | |
| **TA567: Tisagenlecleucel for treating relapsed or refractory diffuse large Bcell lymphoma after 2 or more systemic therapies** | ✓ R | | | The formulary will reflect the TAG – NHS England is the responsible commissioner. |
| **TA568: Abatacept for treating psoriatic arthritis after DMARDs (terminated appraisal)** | | ✓ | | The formulary will reflect the TAG – CCGs are the responsible commissioner – NICE did not recommend use. |
| **TA569: Pertuzumab for adjuvant treatment of HER2-positive early stage breast cancer** | ✓ R | | | The formulary will reflect the TAG – NHS England is the responsible commissioner. |
| **TA570: Pembrolizumab for treating recurrent or metastatic squamous cell carcinoma of the head and neck after platinum-based chemotherapy (terminated appraisal)** | | ✓ | | The formulary will reflect the TAG – NHS England is the responsible commissioner – NICE did not recommend use. |
| **TA571: Brigatinib for treating ALK positive advanced non-small-cell lung cancer after crizotinib** | ✓ R | | | The formulary will reflect the TAG – NHS England is the responsible commissioner. |
| **TA572: Ertugliflozin as monotherapy or with metformin for treating type 2 diabetes** | ✓ GO | | | The formulary will reflect the TAG – CCGs are the responsible commissioner. |
| **7) Appeals against earlier decisions by the APC** | | | | |
| **None** | | | | |
| **8) Products considerd by NTAG** | | | | |
| **i-Port Advance®** | ✓ | | | APC noted and endorsed the NTAG recommendation for use of this device. |
| **Flash glucose monitoring (updated)** | ✓ | | | APC noted and endorsed the NTAG recommendation for use of this device. |

DECISION SUMMARY

| Product | Decision | | | Comments/notes |
|---|---|---|---|---|
| | Approved | Refused | Deferred | |
| **8) Miscellaneous decisions by the APC** | | | | |
| **Pramipexole – for restless legs** | ✓ G | | | Indication not specifically listed in formulary.<br><br>**Decision:** agreed to add to formulary as GREEN drug for this indication as no special monitoring required. |
| **Ropinirole – for restless legs** | ✓ G | | | Indication not specifically listed in formulary.<br><br>**Decision:** agreed to add to formulary as GREEN drug for this indication as no special monitoring required. |
| **Minoxidil for hypertension – change in RAG status from RED to GREEN+** | ✓ G+ | | | Listed as Green+ in Sunderland and North of Tyne. Unclear why RED in CD&D for hypertension.<br><br>**Decision:** approved change in RAG status from RED to GREEN+ (N.B. remains RED for other indications) |
| **Mexiletine** | ✓ R | | | Newly licensed product is significantly more expensive than unlicensed products use currently.<br><br>**Decision**: agreed to add to formulary as NOT APPROVED for unlicensed uses (e.g. pain, cardiac arrhythmias) and RED for licensed use in non-dystrophic myotonia which is as an NHSE excluded indication. |
| **Pancrex V** | ✓ G+ | | | Creon 40,000 unit capsules have been discontinued and another alternative option to 10,000 capsules is required.<br><br>**Decision:** agreed to add to formulary as GREEN+ |
| **Lubiprostone** | n/a | | | **Decision:** agreed to delete from formulary as product discontinued and NICE TA now withdrawn. |

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

- County Durham & Darlington Paediatric Asthma Guidelines

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

- Nil

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

- Mycophenolate (updated0

Other documents presented to and approved at the May 2019 meeting of the APC:

- CD&D APC Annual Report 2018/19