

County Durham & Tees Valley Area Prescribing Committee

Summary of decisions made regarding new product requests considered at a meeting of the Committee on **Thursday 9th September 2021**

Classification of products:

- G** **Green drug** - Can be initiated and prescribed in all care settings **○**- Second line / alternative green drug
- A** **Amber Specialist initiation / recommendation drug**. 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.
- ASC** **Amber Shared Care 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 & Tees Valley.
- ⊘** **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 & Tees Valley.
- **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				
Misoprostol 25microgram tablets	✓ R			CCG commissioned tariff included drug. For induction of labour only for use within the policy: Intra-uterine death, Pregnancy Loss & Termination of Pregnancy for Major Fetal Abnormality from 16+0 weeks; and Stillbirth. This is a recently licensed product. Previously the 200microgram tablets were used “off label”. This will allow accurate dosing using a licensed preparation. Decision: To add to formulary as a RED drug.
3) New formulations & extensions to use				
None				
4) Products considered by NICE				
TA705: Atezolizumab monotherapy for untreated advanced non-small-cell lung cancer	✓ R			The formulary will reflect the TAG – NHS England is the responsible commissioner.

DECISION SUMMARY

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TA706: Ozanimod for treating relapsing–remitting multiple sclerosis	✓ ✗			The formulary will reflect the TAG – NHS England is the responsible commissioner.
TA707: Nivolumab for previously treated unresectable advanced or recurrent oesophageal cancer	✓ R			The formulary will reflect the TAG – NHS England is the responsible commissioner.
TA708: Budesonide orodispersible tablet for inducing remission of eosinophilic oesophagitis	✓ R			The formulary will reflect the TAG – CCG is the responsible commissioner. Note: NICE TA did not cover maintenance treatment.
TA709: Pembrolizumab for untreated metastatic colorectal cancer with high microsatellite instability or mismatch repair deficiency	✓ R			The formulary will reflect the TAG – NHS England is the responsible commissioner.
TA710: Ravulizumab for treating atypical haemolytic uraemic syndrome	✓ R			The formulary will reflect the TAG – NHS England is the responsible commissioner.
TA711: Guselkumab for treating active psoriatic arthritis after inadequate response to DMARDs	✓ R			The formulary will reflect the TAG – CCG is the responsible commissioner.
TA712: Enzalutamide for treating hormone-sensitive metastatic prostate cancer	✓ R			The formulary will reflect the TAG – NHS England is the responsible commissioner.
TA713: Nivolumab for advanced non-squamous non-small-cell lung cancer after chemotherapy	✓ R			The formulary will reflect the TAG – NHS England is the responsible commissioner.
TA714: Dasatinib for treating Philadelphia-chromosome-positive acute lymphoblastic leukaemia (terminated appraisal)	✓ ✗			The formulary will reflect the TAG – NHS England is the responsible commissioner.
TA715: Adalimumab, etanercept, infliximab and abatacept for treating moderate rheumatoid arthritis after conventional DMARDs have failed	✓ R			The formulary will reflect the TAG – CCG is the responsible commissioner – <i>note given the potential financial implications this will need approval from CCG Finance/Exec committees plus contracting teams.</i>

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TA716: Nivolumab with ipilimumab for previously treated metastatic colorectal cancer with high microsatellite instability or mismatch repair deficiency	✓ R			The formulary will reflect the TAG – NHS England is the responsible commissioner.
TA717: Duvelisib for treating relapsed follicular lymphoma after 2 or more systemic therapies (terminated appraisal)	✓ ✗			The formulary will reflect the TAG – NHS England is the responsible commissioner.
TA718: Ixekizumab for treating axial spondyloarthritis	✓ R			The formulary will reflect the TAG – CCG is the responsible commissioner.
TA719: Secukinumab for treating non-radiographic axial spondyloarthritis	✓ R			The formulary will reflect the TAG – CCG is the responsible commissioner.
TA723: Bimekizumab for treating moderate to severe plaque psoriasis	✓ R			The formulary will reflect the TAG – CCG is the responsible commissioner.
5) Appeals against earlier decisions by the APC				
None				
6) Products considered by NTAG				
Perampanel (Fycompa®) for Partial-onset (focal) epilepsy –	✓ A			Updated recommendation to include license extension in children under 12 years old. The formulary will reflect the NTAG recommendation.
Transanal Irrigation Systems (TAIs) for neurogenic bowel dysfunction, chronic constipation, and chronic faecal incontinence	✓			Updated to replace Peristeen with Peristeen Plus as Peristeen discontinued by manufacturer.
Infliximab Subcutaneous (Remsima®)	✓ R			Reviewed and no change to recommendation that is an option during Covid-19 Pandemic. To be reviewed in 6 months. The formulary will reflect the NTAG recommendation.
Dupilumab and Omalizumab for chronic rhinosinusitis with nasal polyps	✓			Updated to note that not recommended as NICE TA terminated. The formulary will reflect the NTAG recommendation.
Transcutaneous vagus nerve stimulation for treatment of cluster headache and migraine	✓			Updated to reflect change in funding arrangements. Now CCG commissioned and funded. The formulary will reflect the NTAG recommendation.

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7) Miscellaneous decisions by the APC				
Lacri-lube eye ointment – to delete from formulary as discontinued	✓			Decision: to delete from formulary as discontinued.
Symtuza® –(Darunavir 800mg/cobicistat 150mg/emtricitabine 200mg/tenofovir alafenamide 10mg)	✓ R			NHSE commissioned tariff excluded drug. For management of HIV as per national guidelines and NHSE commissioning policy. Decision: To add to formulary as a RED drug.
Treclin® gel, Duac® 3% gel and Duac Once Daily® 5% gel	✓ G			Decision: To add to formulary as per NG198: Acne vulgaris: management.
Varenciline	✓ A	✓		Decision: change from Green to Amber Specialist Recommendation approved.

The following guidelines were presented to and approved at the September 2021 meeting of the APC:

- CD&TV Do Not Prescribe/Grey List – reviewed & updated
- CD&D DVT pathway – minor clarification re number of scans required.

The following shared care guidelines were presented to and approved at the September 2021 meeting of the APC:

- Nil.

Other documents presented to and approved at the September 2021 meeting of the APC:

- TEWV Deprescribing Guidelines – dosulepin, trimipramine, promazine
- CD&T Guidelines on Defining RAG Status – reviewed & updated
- CD&T APC Declarations of Interest Policy – reviewed & no changes made