

North of Tyne, Gateshead and North Cumbria Area Prescribing Committee

Summary of decisions made at APC meetings in April and July 2020.

Classification of products:

R = 'RED' drugs for hospital use only

A = 'AMBER' drugs suitable for use under Shared Care arrangements

G+ = 'GREEN PLUS – Drugs normally recommended or initiated by hospital specialist, but where the provision of an information leaflet may be appropriate to facilitate continuing treatment by GPs. Many of these information sheets are in the process of development.

c = 'GREEN' – Drugs where initiation by GPs is appropriate.

| Product | Approved | Decision Refused | Deferred | Comments/notes | |
|---|----------------------------|---------------------|----------|---|--|
| 1) Requests deferred from previous meetings | | | | | |
| None | | | | | |
| 2) New Requests | | | | | |
| Sucralfate suspension | Mixed green and red status | | | Sucralfate suspension was removed from the formulary in July 2017 following a chapter review on the grounds that it was a low use product and, at the time, no licensed product available. It has subsequently been requested for: • Short term use post Radio Frequency Ablation (RFA) for Barret's Oesophagus & Endoscopic Mucosal Resection (EMR). • Bile Reflux (usually post oesophagectomy) in patients in patients who have failed PPI treatment. Approx. 20 – 60 patients per year. Northumbria confirmed that they also use it for stomal ulceration and biliary gastritis in approx. 10-15 patients per year. A literature search didn't identify any studies that specifically looked at the use of sucralfate in patients with bile reflux following oesophagectomy but it has been compared to PPI in other patient groups. A licensed product is now available from Alliance Healthcare. Decision: Approved with a 'Red' status for post RFA and EMR patients and a 'Green Plus' status for bile reflux and stomal ulceration patients. | |

| Product | Approved | Decision Refused | Deferred | Comments/notes |
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| Betesil® (Betamethasone valerate0.1% medicated Plaster) | Другочеч | Neiuseu | Deletted | Decision: The committee agreed that Betamethasone valerate 0.1% Medicated Plaster (Betesil®) could be added to the formulary, subject to the production of a clear algorithm for use being approved by the FSC, and dependent on the removal of Fludroxycortide (Haelan®) tape. |
| 3) New formulation | s & extens | ions to u | se | |
| Subcutaneous vedolizumab | RED | | | Approved for gastroenterology indications where an anti TNF was deemed clinically inappropriate and self-administration was deemed beneficial for the patient. |
| 4) NHS England Տր | ecialised S | Services o | communi | cations noted and endorsed by APC |
| SSC2117 - Specialised February to April | Commission | ning Update |) | The formulary will reflect the SSC position |
| SSC2119 - Not for Routine Commissioning Policy for Telotristat for treating carcinoid syndrome diarrhoea in adults | | | | The formulary will reflect the SSC position |
| SSC2122 - Human plas inhibitors for Heredital | | |) | The formulary will reflect the SSC position |
| SSC2125 - NICE Technology Appraisal Final Appraisal Determination - Lenalidomide with rituximab for previously treated follicular lymphoma | | | | The formulary will reflect the SSC position |
| SSC2126 - Specialised Commissioning Update March 2020 | | | | The formulary will reflect the SSC position |
| SSC2128 - Two drug regimen policies for the treatment of HIV-1 Dolutegravir rilpivirine and dolutegravir lamivudine | | | | The formulary will reflect the SSC position |
| SSC2129 - NICE Technology Appraisal Final Appraisal Determination - Pembrolizumab for previously treated advanced or metastatic urothelial cancer (CDF review TA519) | | | | The formulary will reflect the SSC position |
| SSC2130 - Mercaptamine hydrochloride viscous eye drops for corneal cystine deposits in people aged older than 2 years | | | | The formulary will reflect the SSC position |
| EAMS approval for remdesivir in COVID-19 https://www.gov.uk/government/news/mhra-supports-the-use-of-remdesivir-as-the-first-medicine-to-treat-covid-19-in-the-uk?utm_source=4307a5df-53f5-408b-bcf6-fcd2adddd655&utm_medium=email&utm_campaign=govuk-notifications&utm_content=immediate | | | | The formulary will reflect the SSC position |
| SSC2133 NICE Technology Appraisal Final Appraisal Determination - obinutuzumab with bendamustine for treating follicular lymphoma after rituximab | | | The formulary will reflect the SSC position | |
| SSC2134 NICE Technology Appraisal Final Appraisal Determination: lorlatinib for previously treated ALK-positive advanced non-small-cell lung cancer | | | The formulary will reflect the SSC position | |
| SSC2136 Clinical Commissioning Policy: Temozolomide as adjuvant treatment for people with newly diagnosed anaplastic astrocytoma without 1p/19q codeletion following surgery and radiotherapy (Adults) | | | The formulary will reflect the SSC position | |
| SSC2137 Clinical Commissioning Policy: Dexrazoxane for preventing cardiotoxicity in children and young people (< 25 years) receiving high-dose anthracyclines or related drugs for the treatment of cancer | | | The formulary will reflect the SSC position | |

| Product Decision Approved Refused Deferred | Comments/notes |
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| SSC2138 Specialised Blood Disorder Policies: Factor X | The formulary will reflect the SSC position |
| and Vonicog Alfa SSC2139 NICE Technology Appraisal Final Appraisal Determination: larotrectinib for treating NTRK fusion- positive solid tumours | The formulary will reflect the SSC position |
| SSC2140 Canakinumab for periodic fever syndromes (all ages) | The formulary will reflect the SSC position |
| SSC2143 NICE Technology Appraisal Final Appraisal Determination: atezolizumab with nab-paclitaxel for treating PD-L1-positive, triple-negative, advanced breast cancer | The formulary will reflect the SSC position |
| SSC2144 - NICE Technology Appraisal Final Appraisal Determination - atezolizumab with carboplatin and etoposide for untreated extensive-stage small-cell lung cancer | The formulary will reflect the SSC position |
| SSC2148 - Nivolumab as monotherapy treatment of adult patients with unresectable advanced, recurrent or metastatic oesophageal, squamous cell carcinoma (OSCC) after one prior fluoropyrimidine and platinumbased chemotherapy | The formulary will reflect the SSC position |
| 5) Products considered by NICE | |
| TA617 Lusutrombopag for treating thrombocytopenia in people with chronic liver disease needing a planned invasive procedure | The formulary will reflect the NICE position |
| TA618 Atezolizumab with carboplatin and nab-paclitaxel for untreated advanced non-squamous non-small-cell lung cancer (terminated appraisal) | The formulary will reflect the NICE position |
| TA619 Palbociclib with fulvestrant for treating hormone receptor-positive, HER2-negative, advanced breast cancer | The formulary will reflect the NICE position |
| TA620 Olaparib for maintenance treatment of relapsed platinum-sensitive ovarian, fallopian tube or peritoneal cancer | The formulary will reflect the NICE position |
| TA621 Osimertinib for untreated EGFR mutation-positive non-small-cell lung cancer | The formulary will reflect the NICE position |
| TA622 Sotagliflozin with insulin for treating type 1 diabetes | The formulary will reflect the NICE position |
| TA623 Patiromer for treating hyperkalaemia | The formulary will reflect the NICE position |
| TA624 Peginterferon beta-1a for treating relapsing- remitting multiple sclerosis | The formulary will reflect the NICE position |
| TA625 Recombinant human parathyroid hormone for treating hypoparathyroidism (terminated appraisal) | The formulary will reflect the NICE position |
| TA626 Avatrombopag for treating thrombocytopenia in people with chronic liver disease needing a planned invasive procedure | The formulary will reflect the NICE position |
| TA627 Lenalidomide with rituximab for previously treated follicular lymphoma | The formulary will reflect the NICE position |
| TA628 Lorlatinib for previously treated ALK-positive advanced non-small-cell lung cancer | The formulary will reflect the NICE position |
| TA629 Obinutuzumab with bendamustine for treating follicular lymphoma after rituximab | The formulary will reflect the NICE position |
| TA630 Larotrectinib for treating NTRK fusion-positive solid tumours | The formulary will reflect the NICE position |
| TA631 Fremanezumab for preventing migraine | The formulary will reflect the NICE position |

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| management at the end of life) Cinacalcet shared care guideline - update Approved | North of Tyne recomme | endations for | symptom | | | |
| Cinacalcet shared care guideline - update Approved | | | ding symp | otom | | |
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| Product | Approved | Decision Refused | Deferred | Comments/notes |
|------------------------------------|--------------|---------------------|--|---|
| Vitamin D quick referen | ce quide – ı | update | Approved | |
| Brand name prescribing | | | Approved | |
| Ketamine in palliative c | | | Approved | |
| Vitamin B12 guidance - | | | | Approved |
| Menopause guidance | • | | | Retired as NICE have now produced guidance |
| 10) Miscellaneous of | decisions | by the AP | C | |
| Sativex for MS spasticity – status | | | Sativex for MS spasticity is recommended by NICE. The guideline states that a shared care agreement should be in place. The MS team will initiate treatment, review response after 4 weeks (using a VAS score) and perform an annual review thereafter. A short shared care guideline should be produced that contains information regarding: • the clinical criteria for initiation • the requirement for a review by the MS team prior to transfer to the GP • the requirement for specialist annual review thereafter. | |
| | | | | Decision The committee agreed that Sativex for MS spasticity should be given an 'Amber' status once the SCG is approved. Until then prescribing will be retained in secondary care. |
| Ingenol mebutate | | | | Following a series of safety alerts ingenol mebutate has lost its market authorisation and will therefore be removed from formulary. |
| Silicone scar preparation | ons | | | The committee clarified that the use of silicone scar gel preparations was previously approved for use by the 'Burns Team and Scar Clinic' and the formulary will be amended to reflect this. Currently the formulary only states "burns team". |
| GLP-1 agonist RAG sta | tus | | | Clarity has been requested around the RAG status of GLP-1 agonists as some have a 'Green' status while other have a 'Green Plus' status. The committee agreed that the RAG status of all GLP1 drugs on formulary should be changed to 'Green' subject to local guidelines being followed. |