

North of Tyne, Gateshead and North Cumbria **Area Prescribing Committee**

Summary of decisions made regarding new product requests considered at a meeting of the Committee on Tuesday 6th July 2021.

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.

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

Product		Decision		Comments/notes
	Approved	Refused	Deferred	
1) Requests defe	erred from p	orevious	meeting	S
None				
2) New Requests	;			
Cefiderocol Delafloxacin	R			Cefiderocol has been requested for the treatment of infections with gram negative aerobic bacteria in patients with limited treatment options. It has a novel mechanism of uptake into bacterial cells and is resistant to all classes of beta lactamases. Decision: Approved as a RED drug in line with the above criteria. To be used on the advice of microbiology and ID physicians only. Delafloxacin is an anionic fluoroquinolone
	Ř			with broad spectrum activity. It has been requested for acute bacterial skin and skin structure infections (ABSSSI) where other antibiotics are inappropriate, either due to resistant organisms or intolerance/allergy. Decision: Approved as a RED drug in line with the above criteria. To be used on the advice of microbiology and ID physicians only.

Product		Decision		Comments/notes
	Approved	Refused	Deferred	
Nexobrid® 3) New formulation		nsions tr		Nexobrid® is an enzyme-based debriding agent that consists of a partially purified mixture of proteolytic enzymes enriched in bromelain. It has been requested for the removal of eschar in adults with deep partial and full thickness thermal burns. Compared to standard of care for partial and full thickness burns Nexobrid® treated burns required less percentage of the wound area to be excised, less autographs, and less percentage of the wound area autografted. Decision: Approved as a RED drug
) u3C	
Anakinra for islet cell transplantation	R			Anakinra has been requested as part of a protocol including alemtuzumab and etanercept for islet cell transplantation to improve outcomes e.g. insulin independence.
				Decision: Extended indication approved as part of the protocol with alemtuzumab and etanercept for islet cell transplantation
Rivaroxaban granules	Ē			Requested by the paediatric haematologists at NUTH for the treatment of VTE in children.
				Decision: Approved for this and in patients with swallowing difficulties.
Hydrocortisone Sodium Phosphate Preservative Free Eye Drops (Softacort®)			~	Requested for the treatment of mild non- infectious allergic or inflammatory conjunctival diseases. It was noted that there are no published head-to-head studies comparing Softacort® with other low potency (or any other) topical ocular corticosteroids. Weak evidence suggests that Softacort® isn't associated with an increase in ocular pressure. The group felt that it wasn't clear which patients this would be used in and when this would be used in relation to the other ocular steroid preparations. The group also recognised that there was a need for an overall review of the dry formulary / pathway.
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Product	Approved	Decision Refused	Deferred	Comments/notes
Nasal Naloxone (Nyxoid®)	R			A naloxone nasal spray may offer a simpler and more convenient method of administration by non-healthcare professionals. In addition, it avoids the risk of needlestick injuries associated with intramuscular injection. As with all naloxone products the key message is one of ensuring emergency services are called whilst using rescue medication to 'buy time' before they arrive.
				Decision: Approved as a suitable alternative, for purpose of limited therapeutic pilot, under following circumstances:
				 Plummer court staff use (Specialist addictions service – Day unit patients) to gain a better understanding of use in practice
				 Carers (of addicitons service users – Plummer Court) who are unwilling to use Prenoxad
				 Addictions service users (Plummer Court) who would normally require carers to administer naloxone
				 Addictions service users (Plummer Court) who continuously fail to carry Prenoxad due to stigma etc
				 Partners (ie police, who would not normally use the injectable formulation, where nyxoid is more acceptable to use)
				 Supply by the following CNTW Community Drug and Alcohol Services in accordance with local written process/protocols for Nyxoid distribution:
				 Newcastle Treatment and Recovery (NTaR)
				 Northumberland Recovery Partnership (NRP)
				 North Tyneside Recovery Partnership (NTRP)
			Page 3 o	The results of a planned 12-month review should be brought back to the formulary subcommittee.

Product	Decision Approved Refused	ן Deferred	Comments/notes
4) NHS England Spe	cialised Service	es comm	unications noted and endorsed by APC
SSC2247 NICE Techn Appraisal Determinati deruxtecan for treating unresectable or metas 2 or more anti-HER2	on: Trastuzumat g HER2- positive static breast can) ;	The formulary will reflect the SSC position
SSC2248 NICE Tech Appraisal Determinati monotherapy for untre small-cell lung cancer	nology Appraisal on: atezolizumal eated advanced	C	The formulary will reflect the SSC position
SSC2251 - Nivolumat unresectable adv oes	o for prev treated		The formulary will reflect the SSC position
SSC2252 - osimertinil NSCLC	b adjuvant EGFF	२ +ve	The formulary will reflect the SSC position
SSC2253 - Pembro 1 cancer	L MSI-H MMR co	olorectal	The formulary will reflect the SSC position
SSC2262 NICE Techn Appraisal Determinati treating hormone-sens cancer	on: enzalutamid	e for	The formulary will reflect the SSC position
SSC2263 NICE Tech Appraisal Determinati ipilimumab for previou colorectal cancer with instability or mismatch	on: nivolumab w usly treated meta high microsatell	ith Istatic lite	The formulary will reflect the SSC position
5) Products conside	red by NICE		
TA692 <u>Pembrolizuma</u> advanced or metastat after platinum-contain Negative appraisal	ic urothelial carc	inoma	The formulary will reflect the NICE position
TA693 <u>Olaparib plus I</u> maintenance treatmen fallopian tube or prima	nt of advanced o	<u>varian,</u>	The formulary will reflect the NICE position
TA694 <u>Bempedoic ac</u> treating primary hyper mixed dyslipidaemia	id with ezetimibe cholesterolaemi	<u>e for</u> a or	The formulary will reflect the NICE position. RAG status of Bempedoic acid should be green but there will be a formulary annotation highlighting that use should only be in line with the TAG and that the statin intolerance pathway outlined in the NEELI guidance should be followed before escalating treatment in line with the TAG.
TA695 <u>Carfilzomib wit</u> lenalidomide for previo myeloma			The formulary will reflect the NICE position
TA696 <u>Tafamidis for t</u> amyloidosis with card appraisal			The formulary will reflect the NICE position

Product	Dec	ision		Comments/notes
	Approved Ref	used Def	ferred	
TA697 Andexanet a			on	The formulary will reflect the NICE position
anticoagulation from TA698 Ravulizumab				
nocturnal haemoglol		aroxysme	<u>ai</u>	The formulary will reflect the NICE position
TA699 Ofatumumab		elapsing		The former dominantly reflect the NICE presition
multiple sclerosis				The formulary will reflect the NICE position
TA700 Selinexor wit				The formulary will reflect the NICE position
dexamethasone for		tory mult	iple	
myeloma (terminate				
TA701 <u>Crisaborole f</u>				The formulary will reflect the NICE position
and older (terminate	<u>matitis in people 2 years</u> d appraisal)			
TA702 Ibrutinib with		h for		
untreated chronic lyr			nd	The formulary will reflect the NICE position
small lymphocytic ly			_	
appraisal)				
TA703 Ibrutinib with			-	The formulary will reflect the NICE position
chronic lymphocytic	<u>leukaemia</u> (te	rminated		······································
appraisal)				
TA704 <u>Trastuzumab</u> HER2-positive unres			a	The formulary will reflect the NICE position
breast cancer after 2				
therapies				
TA705 Atezolizumat	o monotherap	y for		The formular (will reflect the NICE position
untreated advanced			ncer	The formulary will reflect the NICE position
TA706 Ozanimod fo				The formulary will reflect the NICE position
remitting multiple sc	<u>lerosis – nega</u>	<u>itive</u>		
appraisal				
TA707 <u>Nivolumab fo</u> unresectable advance				The formulary will reflect the NICE position
oesophageal cancer		<u>m</u>		
TA708 Budesonide		tablet fo	r	
inducing remission c			_	The formulary will reflect the NICE position
TA709 Pembrolizum				The formulary will reflect the NICE position
metastatic colorecta	<u>I cancer with I</u>	<u>nigh</u>		The formulary will reliect the NICE position
microsatellite instabi	<u>ility or mismat</u>	<u>ch repair</u>		
deficiency				
TA710 <u>Ravulizumab</u>		<u>typical</u>		The formulary will reflect the NICE position
haemolytic uraemic TA711 <u>Guselkumab</u>		otivo poor	riatio	
arthritis after inadeq				The formulary will reflect the NICE position
6) Northern (NHS)				(N-TAG)
Perampanel (Fycom	pa®) for Parti	al-onset		The formulary will reflect the N TAC
(focal) epilepsy – up	dated recomn	nendatior		The formulary will reflect the N – TAG position
include license exter	nsion in childr	en under	12	P
years old.				

 neurogenic bowel dystunction, chronic constipation, and chronic faecal incontinence – updated to replace Peristeen with Peristeen Plus as Peristeen discontinued by manufacturer. Infliximab Subcutaneous (Remsima®) – reviewed and no change to recommendation that this is an option during Covid-19 Pandemic. To be reviewed again in 6 months. Dupilumab and Omalizumab for chronic rhinosinusitis with nasal polyps - updated to note that not recommended as NICE TA terminated. Transcutaneous vagus nerve stimulation for treatment of cluster headache and migraine – updated to reflect change in funding arrangements. Now CCG commissioned and funded. 7) Regional Medicines Optimisation Committe Shared care consultations noted. 8) Appeals against earlier decisions by the AP None 9) Guidelines approved. http://www.northoftyr 	The formulary will reflect the N – TAG position The formulary will reflect the N – TAG position The formulary will reflect the NICE position The formulary will reflect the N – TAG position
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None 9) Guidelines approved. http://www.northoftyn Antiplatelet guidance Prescribing intervals	
9) Guidelines approved. http://www.northoftyn Antiplatelet guidance Prescribing intervals	°C
Antiplatelet guidance Prescribing intervals	
Prescribing intervals	<u>neapc.nhs.uk/guidance/</u>
	Updated guidance
Children's ADHD shared care quidance	Updated guidance
	Updated guidance
management of Sleep/Wake Disorders in Children and Young People: update.	The main changes to the guidance are that each shared care agreement is time limited to 2 years at which point a formal review is to be undertaken by secondary care and a new shared care agreement requested if needed. There should also be at least an annual trial off treatment.
Bariatric surgery - management of patients, post-bariatric surgery, in primary care - update	Updated guidance
Immunosuppression following liver transplant	Updated guidance
10) Miscellaneous decisions by the APC None	Opualed guidance