# NHS Greater Glasgow and Clyde: New Medicines Decisions

In Scotland, a newly licensed medicine is routinely available in a health board only after it has been:

- accepted for use in NHSScotland by the Scottish Medicines Consortium (SMC), and
- accepted for use by the health board's Area Drug and Therapeutics Committee (ADTC).

All medicines accepted by SMC are available in Scotland, but may not be considered 'routinely available' within NHS Greater Glasgow and Clyde (NHSGG&C) because of available services and preferences for alternative medicines.

'Routinely available' means that a medicine can be prescribed by the appropriately qualified person within a health board.

Each health board has an ADTC. The Greater Glasgow and Clyde ADTC is responsible for advising the NHSGG&C health board on all aspects of the use of medicines.

Medicines routinely available within NHSGG&C are usually included in the GGC Formulary. The Formulary is a list of medicines for use in the health board that has been agreed by ADTC in consultation with local clinical experts. It offers a choice of medicines for healthcare professionals to prescribe for common medical conditions. The GGC Formulary can help improve safety as prescribers are likely to become more familiar with the medicines in it and also helps make sure that standards of care are consistent across the health board.

# How does NHSGG&C decide which new medicines to make routinely available for patients?

The ADTC in NHSGG&C will consider national and local guidance before deciding whether to make a new medicine routinely available.

# What national guidance does the ADTC consider?

- SMC advice: The SMC considers newly licensed medicines and advises health boards in Scotland whether they should be available. When SMC considers a new medicine for the NHS in Scotland, it looks at:
  - how well the medicine works.
  - which patients might benefit from it ,
  - whether it is as good or better than medicines the NHS already uses to treat the medical condition, and
  - whether it is good value for money.
- In the table below, national guidance usually refers to SMC advice. Links to SMC advice for individual medicines are also included in the table.
- In some cases, other agencies may also provide guidance on how medicines should be used. For example, Healthcare Improvement Scotland issues alerts to advise if National Institute for Health and Care Excellence Multiple Technology Appraisals (NICE MTAs) are applicable in Scotland.

# What local guidance does the ADTC consider?

Advice from local clinical experts who would be expected to prescribe a particular medicine, where that service is available in NHSGG&C.

# Why is a particular medicine not routinely available in NHSGGC?

- This is usually because the medicine is not recommended for use in NHSScotland by the SMC.
- The medicine may not be routinely available in a health board, particularly in smaller health boards, because there is not a suitable specialist who may use the medicine.
- There may also be differences in which medicines are preferred in health boards. Sometimes SMC accepts more than one medicine for treating a specific medical condition. Clinical experts in each health board consider whether to add new medicines to their formulary and advise the ADTC. Sometimes it is agreed that established medicines are a better choice than new medicines.

#### What happens if a particular medicine is not routinely available in NHSGG&C?

If a medicine is not routinely available and included in the GGC Formulary and there are no suitable alternatives on the formulary, a healthcare professional can request to prescribe a medicine that is not on the formulary if they think you will benefit from using it. NHSGG&C and all health boards have procedures in place to consider requests when a healthcare professional feels a medicine that is not on the formulary would be right for a particular patient.

The table below lists NHS Greater Glasgow and Clyde's decisions on new medicines.

If you need more information on medicines decisions in NHS Greater Glasgow and Clyde, please email agc, medicines@agc, scot, nhs, uk

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
5-aminolaevulinic acid topical gel	Treatment of superficial and / or nodular basal cell carcinoma (BCC) unsuitable for surgical treatment due to possible treatment-related morbidity and / or poor cosmetic outcome in adults.	Not routinely available as not recommended for use in NHSScotland	28/08/2017
Ameluz®			
1260/17			
	http://www.scottishmedicines.org.uk/files/advice/5-aminolaevulinic_advi	cid_Ameluz_FINAL_July_2017_for_website.pdf	
Canakinumab	Treatment of the following autoinflammatory periodic fever syndromes in adults, adolescents and children aged 2 years and older: - tumour necrosis factor receptor associated periodic syndrome	Not routinely available as not recommended for use in NHSScotland	28/08/2017
injection			
llaris®			
1268/17	<ul> <li>hyperimmunoglobulin D syndrome / mevalonate kinase deficiency</li> <li>Familial Mediterranean Fever</li> </ul>		
	http://www.scottishmedicines.org.uk/files/advice/canankinumab_llaris	Non_Sub_FINAL_July_2017_for_website.pdf	
Carfilzomib	In combination with dexamethasone alone for the	Routinely available in line with local or regional guidance	28/08/2017
infusion	treatment of adult patients with multiple myeloma who have received at least one prior therapy.		
Kyprolis®	who have received at least one phor therapy.		
1242/17			
	http://www.scottishmedicines.org.uk/files/advice/carfilzomib_Kyprolis_FINAL_July_2017_for_website.pdf		
Certolizumab and Secukinumab	Active psoriatic arthritis after inadequate response to DMARDs	Routinely available in line with national guidance	28/08/2017
TA445			
	https://www.nice.org.uk/quidance/ta445		

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
Ciprofloxacin with Dexamethasone	Treatment of the following infections in adults and children: - Acute otitis media in patients with tympanostomy tubes (AOMT) - Acute otitis externa	Routinely available in line with national guidance	28/08/2017
ear drops			
Cilodex®			
1256/17			
	http://www.scottishmedicines.org.uk/files/advice/ciprofloxacin-dexamethasone_Cilodex_Abbreviated_FINAL_June_2017_for_website.pdf		
Desmopressin	Symptomatic treatment of nocturia due to	Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by:	28/08/2017
oral lyophilisate	idiopathic nocturnal polyuria in adults		
Noqdirna®			
1218/17		19/02/2018	
	http://www.scottishmedicines.org.uk/files/advice/desmopressin_Noqdirna_Resubmission_FINAL_July_2017_for_website.pdf		<u>pdf</u>
Emtricitabine with Tenofovir disoproxil tablets	Treatment of HIV-1 infected adolescents aged 12 to <18 years with nucleoside reverse transcriptase inhibitor resistance or toxicities precluding the use of first line agents	Not routinely available as not recommended for use in NHSScotland	28/08/2017
Truvada	or mot into agonto		
1263/17			
	http://www.scottishmedicines.org.uk/files/advice/emtricitabine-tenofov	rir_disoproxil_Truvada_Non_Submission_FINAL_Jur	ne_2017_for_website.pdf
Everolimus and Sunitinib	Unresectable or metastatic neuroendocrine tumours in people with progressive disease	Routinely available in line with local or regional guidance	28/08/2017
MTA 440			
MTA 449	https://www.nice.org.uk/guidance/ta449		

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
Follitropin delta	Controlled ovarian stimulation for the development of multiple follicles in women undergoing assisted	Not routinely available as not recommended for use in	28/08/2017
injection	reproductive technologies such as an in vitro	NHSScotland	
Rekovelle®	fertilisation or intracytoplasmic sperm injection cycle.		
1269/17	·		
	http://www.scottishmedicines.org.uk/files/advice/follitropin_Rekovelle_	Non Sub FINAL July 2017 for website.pdf	
Nivolumab	Treatment of adult patients with relapsed or	Routinely available in line with local	28/08/2017
infusion	refractory classical Hodgkin lymphoma (cHL) after autologous stem cell transplant (ASCT) and	or regional guidance	
Opdivo®	treatment with brentuximab vedotin.		
1240/17			
	http://www.scottishmedicines.org.uk/files/advice/nivolumab_Opdivo_c	CHL_FINAL_June_2017_for_website.pdf	
Pembrolizumab	As monotherapy for the first-line treatment of	Routinely available in line with local	28/08/2017
infusion	metastatic non-small cell lung carcinoma (NSCLC) in adults whose tumours express programmed	or regional guidance	
Keytruda	death ligand 1 (PD-L1) with a ≥50% tumour proportion score (TPS) with no epidermal growth		
1239/17	factor receptor (EGFR) or anaplastic lymphoma kinase (ALK) positive tumour mutations.		
	http://www.scottishmedicines.org.uk/files/advice/pembrolizumab_Key	truda_FINAL_June_2017_for_website.pdf	
Saxagliptin with	in adults aged 18 years and older with type 2	Routinely available in line with	28/08/2017
Dapagliflozin	diabetes mellitus 1)to improve glycaemic control when metformin and/or sulphonylurea and one of	national guidance	
tablets	the monocomponents of Qtern® do not provide		
Qtern	adequate glycaemic control or 2) when already being treated with the free combination of		
1255/17	dapagliflozin and saxagliptin		
	http://www.scottishmedicines.org.uk/files/advice/saxagliptin-dapagliflo	ozin_Qtern_Abbreviated_FINAL_June_2017_for_well	<u>bsite.pdf</u>

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	Condition being treated	NHSGGC Decision	Date of decision
Selexipag	For the long-term treatment of pulmonary arterial hypertension (PAH) in adult patients with WHO functional class (FC) II to III, either as combination	Not routinely available as not recommended for use in NHSScotland	28/08/2017
tablets			
Uptravi	therapy in patients insufficiently controlled with an endothelin receptor antagonist (ERA) and/or a		
1235/17	phosphodiesterase type 5 (PDE-5) inhibitor, or as monotherapy in patients who are not candidates for these therapies		
	http://www.scottishmedicines.org.uk/files/advice/selexipag_Uptravi_Fl	NAL_June_2017_for_website_amended_10.08.17.p	<u>df</u>
Sufentanil citrate sublingual tablets	Management of acute moderate to severe post- operative pain in adult patients.	Not routinely available as not recommended for use in NHSScotland	28/08/2017
•			
Zalviso®			
1270/17			
	http://www.scottishmedicines.org.uk/files/advice/sufentanil_Zalviso_N	on Sub_FINAL_July_2017_for_website.pdf	
Trametinib	in combination with dabrafenib for the treatment of adult patients with advanced non-small cell lung cancer with a BRAF V600 mutation	Not routinely available as not recommended for use in NHSScotland	28/08/2017
tablets			
Mekinist®			
1264/17			
	http://www.scottishmedicines.org.uk/files/advice/trametinib_Mekinist_l	Non_Submission_FINAL_June_2017_for_website.pd	<u>If</u>
Ustekinumab	for the treatment of adult patients with moderately	Routinely available in line with	28/08/2017
infusion, injection	to severely active Crohn's disease who have had an inadequate response with, lost response to, or	national guidance	
Stelara®	were intolerant to either conventional therapy or a tumour necrosis factor-alpha (TNFα) antagonist or		
1250/17	have medical contraindications to such therapies.		
	http://www.scottishmedicines.org.uk/files/advice/ustekinumab_Stelara	FINAL_June_2017_for_website.pdf	

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
Venetoclax	as monotherapy for the treatment of chronic	Routinely available in line with local	28/08/2017
tablets	lymphocytic leukaemia (CLL) either in the presence of 17p deletion or TP53 mutation in adult	or regional guidance	
Venclyxto®	patients who are unsuitable for or have failed a B- cell receptor pathway inhibitor, or in the absence of		
1249/17	17p deletion or TP53 mutation in adult patients who have failed both chemoimmunotherapy and a B-cell receptor pathway inhibitor.		
	http://www.scottishmedicines.org.uk/files/advice/venetoclax_Venclyxt	o_FINAL_July_2017_for_website.pdf	

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