# 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 ,
  - o 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 ggc.medicines@ggc.scot.nhs.uk

Medicine	Condition being treated	NHSGGC Decision	Date of decision

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Arsenic trioxide infusion Trisenox® SMC2181	In combination with all-trans-retinoic acid (ATRA [tretinoin]) for the induction of remission, and consolidation in adult patients with newly diagnosed, low-to-intermediate risk acute promyelocytic leukaemia (APL) (white blood cell count ≤10 x 103/µl), characterised by the presence of the t(15;17) translocation and/or the presence of the Pro Myelocytic Leukaemia/Retinoic-Acid-Receptor-alpha (PML/RAR-alpha) gene.	Routinely available in line with local or regional guidance	12/08/2019
Buprenorphine prolonged-release injection	Treatment of opioid dependence within a framework of medical, social and psychological	Routinely available in line with national guidance	12/08/2019
Buvidal®	treatment. Treatment is intended for use in adults and adolescents aged 16 years or over.		
SMC2169			
<b>Daratumumab</b> infusion	In combination with lenalidomide and dexamethasone, or bortezomib and dexamethasone, for the treatment of adult patients	Routinely available in line with local or regional guidance	12/08/2019
Darzalex®	with multiple myeloma who have received at least one prior therapy.		
SMC2180	one phor therapy.		
Darvadstrocel	treatment of complex perianal fistulas in adult	Not routinely available as not	12/08/2019
injection	patients with non-active / mildly active luminal Crohn's disease, when fistulas have shown an	recommended for use in NHSScotland	
Alofisel®	inadequate response to at least one conventional or biologic therapy.		
SMC2115	5. 5.5.5g/6 thorapy.		

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
Empagliflozin plus Linagliptin tablets Glyxambi® SMC 1236/17	in adults aged 18 years and older with type 2 diabetes mellitus:  - To improve glycaemic control when metformin and/or sulphonylurea (SU) and one of the monocomponents of Glyxambi® do not provide adequate glycaemic control  - When already being treated with the free combination of empagliflozin and linagliptin	Routinely available in line with national guidance	12/08/2019
Encorafenib capsules Braftovi® SMC2145	In combination with binimetinib for the treatment of adult patients with unresectable or metastatic melanoma with a BRAF V600 mutation.	Not routinely available as not recommended for use in NHSScotland	12/08/2019
Inotersen injection Tegsedi® SMC2188	Treatment of stage 1 or stage 2 polyneuropathy in adult patients with hereditary transthyretin amyloidosis (hATTR).	Routinely available in line with national guidance	12/08/2019
Lenalidomide capsules Revlimid® SMC2217	As combination therapy with bortezomib and dexamethasone for the treatment of adult patients with previously untreated multiple myeloma who are not eligible for transplant.	Not routinely available as not recommended for use in NHSScotland	12/08/2019

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
Lumacaftor and Ivacaftor tablets, granules Orkambi® SMC2182	Treatment of cystic fibrosis in patients aged 6 years and older (tablets) and aged 2 to 5 years (granules) who are homozygous for the F508del mutation in the cystic fibrosis transmembrane conductance regulator (CFTR) gene.	Not routinely available as not recommended for use in NHSScotland	12/08/2019
Nusinersen injection Spinraza® SMC 1318/18	Treatment of type II and III (later onset) 5q spinal muscular atrophy (SMA)	Routinely available in line with national guidance	12/08/2019
Palbociclib capsules Ibrance® SMC2149	Treatment of hormone receptor (HR)-positive, human epidermal growth factor receptor 2 (HER2)-negative locally advanced or metastatic breast cancer in combination with fulvestrant in women who have received prior endocrine therapy. In pre- or perimenopausal women, the endocrine therapy should be combined with a luteinizing hormone-releasing hormone (LHRH) agonist.	Routinely available in line with local or regional guidance	12/08/2019
Perampanel oral suspension Fycompa® SMC2172	for the adjunctive treatment of partial-onset seizures with or without secondarily generalised seizures in adult and adolescent patients from 12 years of age with epilepsy.	Routinely available in line with national guidance	12/08/2019

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
Perampanel oral suspension Fycompa® SMC2218	The adjunctive treatment of primary generalised tonic-clonic seizures in adult and adolescent patients from 12 years of age with idiopathic generalised epilepsy.	Not routinely available as not recommended for use in NHSScotland	12/08/2019
Pomalidomide capsules Imnovid® SMC2219	In combination with bortezomib and dexamethasone for the treatment of adult patients with multiple myeloma who have received at least one prior treatment regimen including lenalidomide.	Not routinely available as not recommended for use in NHSScotland	12/08/2019
Rucaparib tablets Rubraca®) SMC2221	as monotherapy treatment of adult patients with platinum sensitive, relapsed or progressive, BRCA mutated (germline and/or somatic), high-grade epithelial ovarian, fallopian tube, or primary peritoneal cancer, who have been treated with two or more prior lines of platinum based chemotherapy, and who are unable to tolerate further platinum based chemotherapy.	Not routinely available as not recommended for use in NHSScotland	12/08/2019

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
Tezacaftor and Ivacaftor	In a combination regimen with ivacaftor 150mg	Not routinely available as not	12/08/2019
tablets	tablets for the treatment of patients with cystic fibrosis (CF) aged 12 years and older who are	recommended for use in NHSScotland	
Symkevi	homozygous for the F508del mutation or who are heterozygous for the F508del mutation and have one of the following mutations in the cystic fibrosis transmembrane conductance regulator (CFTR) gene: P67L, R117C, L206W, R352Q, A455E, D579G, 711+3A→G, S945L, S977F, R1070W, D1152H, 2789+5G→A, 3272-26A→G, and 3849+10kbC→T.		
SMC2183			
Tildrakizumab injection	The treatment of adults with moderate to severe plaque psoriasis who are candidates for systemic	Not routinely available as local implementation plans are being	12/08/2019
llumetri®	therapy.	developed or ADTC is waiting for further advice from local clinical experts - Decision expected by: 31/12/2019	
SMC2167			
Venetoclax	in combination with rituximab for the treatment of adult patients with chronic lymphocytic leukaemia (CLL) who have received at least one prior therapy.	Routinely available in line with local	12/08/2019
tablets		or regional guidance	
Venclyxto®			
SMC2166			

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