

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 NHS Scotland 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 NHSGG&C?

- This is usually because the medicine is not recommended for use in NHS Scotland 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 gqc.medicines@ggc.scot.nhs.uk

| Medicine | Condition being treated | NHSGGC Decision | Date of decision |
|----------|-------------------------|-----------------|------------------|
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|--|---|--|-------------------|
| <p>Axicabtagene ciloleucel infusion Yescarta® SMC2189</p> | <p>Treatment of adult patients with relapsed or refractory diffuse large B cell lymphoma (DLBCL) and primary mediastinal large B cell lymphoma (PMBCL), after two or more lines of systemic therapy.</p> | <p>Routinely available in line with local or regional guidance</p> | <p>07/10/2019</p> |
| <p>Dacamitinib tablets Vizimpro® SMC2184</p> | <p>Monotherapy, for the first-line treatment of adult patients with locally advanced or metastatic non-small cell lung cancer (NSCLC) with epidermal growth factor receptor (EGFR)-activating mutations.</p> | <p>Routinely available in line with local or regional guidance</p> | <p>07/10/2019</p> |
| <p>Dapagliflozin tablets Forxiga® SMC2185</p> | <p>In adults for the treatment of insufficiently controlled type 1 diabetes mellitus as an adjunct to insulin in patients with BMI $\geq 27\text{kg/m}^2$, when insulin alone does not provide adequate glycaemic control despite optimal insulin therapy.</p> | <p>Routinely available in line with national guidance</p> | <p>07/10/2019</p> |
| <p>Dolutegravir + lamivudine tablet Dovato® SMC2205</p> | <p>treatment of human immunodeficiency virus type 1 (HIV-1) infection in adults and adolescents above 12 years of age weighing at least 40kg, with no known or suspected resistance to the integrase inhibitor class, or lamivudine</p> | <p>Routinely available in line with national guidance</p> | <p>07/10/2019</p> |
| <p>Eculizumab infusion Soliris® SMC2236</p> | <p>Treatment of adults with refractory generalised myasthenia gravis who are anti-acetylcholine receptor antibody-positive</p> | <p>Not routinely available as not recommended for use in NHSScotland</p> | <p>07/10/2019</p> |

| Medicine | Condition being treated | NHSGGC Decision | Date of decision |
|---|--|---|------------------|
| Enzalutamide capsules Xtandi® SMC2195 | The treatment of adult men with high-risk non-metastatic castration-resistant prostate cancer (CRPC). | Not routinely available as not recommended for use in NHSScotland | 07/10/2019 |
| Eribulin injection Halaven® SMC2231 | Treatment of adult patients with unresectable liposarcoma who have received prior anthracycline containing therapy (unless unsuitable) for advanced or metastatic disease. | Not routinely available as not recommended for use in NHSScotland | 07/10/2019 |
| Glibenclamide oral suspension Amglidia® SMC2237 | Treatment of neonatal diabetes mellitus, for use in newborns, infants and children. | Not routinely available as not recommended for use in NHSScotland | 07/10/2019 |
| Melatonin prolonged-release tablets Slentyto® SMC2168 | Treatment of insomnia in children and adolescents aged 2 to 18 years with autism spectrum disorder and / or Smith-Magenis syndrome, where sleep hygiene measures have been insufficient. | Not routinely available as not recommended for use in NHSScotland | 07/10/2019 |

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|--|---|---|------------------|
| Osimertinib tablet Tagrisso® SMC2171 | Monotherapy for the first-line treatment of adult patients with locally advanced or metastatic non-small cell lung cancer (NSCLC) with activating epidermal growth factor receptor (EGFR) mutations | Not routinely available as not recommended for use in NHSScotland | 07/10/2019 |
| Ospemifene tablets Senshio® SMC2170 | Treatment of moderate to severe symptomatic vulvar and vaginal atrophy (VVA) in post-menopausal women who are not candidates for local vaginal oestrogen therapy. | Routinely available in line with national guidance | 07/10/2019 |
| Pembrolizumab infusion Keytruda® SMC2207 | In combination with pemetrexed and platinum chemotherapy, for the first-line treatment of metastatic non-squamous non-small cell lung carcinoma (NSCLC) in adults whose tumours have no EGFR or ALK positive mutations. | Routinely available in line with local or regional guidance | 07/10/2019 |
| Pembrolizumab infusion Keytruda® SMC2187 | In combination with carboplatin and either paclitaxel or nab-paclitaxel, for the first-line treatment of metastatic squamous non-small cell lung cancer (NSCLC) in adults. | Routinely available in line with local or regional guidance | 07/10/2019 |

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|---|--|---|-------------------|
| <p>Pertuzumab infusion Perjeta® SMC2197</p> | <p>For use in combination with trastuzumab and chemotherapy in the adjuvant treatment of adult patients with HER2-positive early breast cancer at high risk of recurrence.</p> | <p>Not routinely available as not recommended for use in NHSScotland</p> | <p>07/10/2019</p> |
| <p>Risankizumab injection Skyrizi® SMC2196</p> | <p>The treatment of moderate to severe plaque psoriasis in adults who are candidates for systemic therapy.</p> | <p>Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by: 31/12/2019</p> | <p>07/10/2019</p> |
| <p>Tisagenlecleucel infusion Kymriah® SMC2200</p> | <p>Adult patients with relapsed or refractory diffuse large B-cell lymphoma (DLBCL) after two or more lines of systemic therapy.</p> | <p>Routinely available in line with local or regional guidance</p> | <p>07/10/2019</p> |
| <p>Tocilizumab subcutaneous injection RoActemra® SMC2014</p> | <p>The treatment of Giant Cell Arteritis (GCA) in adult patients</p> | <p>Routinely available in line with local or regional guidance</p> | <p>07/10/2019</p> |

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|---|--|--|-------------------|
| <p>Triptorelin sustained-release injection</p> <p>Decapeptyl SR®</p> <p>SMC2186</p> | <p>As adjuvant treatment in combination with tamoxifen or an aromatase inhibitor, of endocrine responsive early stage breast cancer in women at high risk of recurrence who are confirmed as premenopausal after completion of chemotherapy.</p> | <p>Routinely available in line with local or regional guidance</p> | <p>07/10/2019</p> |