WoSF - Endocrine: Changes compared to GGC chapter

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Drug additions compared to existing GGC adult formulary

Drug	Pathway(s)	Prescribing flag*	Comments
Glimepiride	Diabetes Mellitus - type 2	None	Alternative choice to gliclazide
Testosterone mixed ester (Sustanon®)	Gender dysphoria or incongruence. Masculinising endocrine treatment	SI	Roxadin® has been added as an alternative testosterone injection formulation. Roxadin® is more cost-effective than Sustanon®.
	Treatment of hypogonadism	SR	
Testosterone undecanoate (Roxadin®)	Gender dysphoria or incongruence. Masculinising endocrine treatment	SI and UI	
	Treatment of hypogonadism	SR	
Cinacalcet	Treatment of primary hyperparathyroidism where parathyroidectomy is inappropriate Treatment of secondary hyperparathyroidism in patients with end stage renal disease on dialysis	SR	Previously not recommended by SMC but now available as a generic. Agreed to add to the West of Scotland Formulary for the stated indications.
Tolvaptan	Syndrome of Inappropriate Secretion of Anti-Diuretic Hormone (SIADH)	SI	Previously not recommended by SMC for the treatment of SIADH but now available as a generic. Agreed to add to the West of Scotland Formulary for SIADH.

Note: Other drugs have been added to the WoS endocrine chapter that are currently only in non-endocrine chapters of GGC formulary, e.g. propranolol, spironolactone, octreotide.

***WoSF Prescribing flags:**

SR	**Specialist Recommendation**: may be initiated in primary care on the recommendation of a consultant or specialist practitioner working with a multidisciplinary team.
SI	**Specialist Initiation**: to be initiated by a consultant or specialist practitioner working with a multidisciplinary team. Ongoing prescribing can be continued in primary care; for example, following initial prescription or once the patient has been stabilised on the medication. This may involve initial and/or ongoing monitoring and review by the specialist. Refer to individual prescribing notes and local arrangements.
SUO	**Specialist Use Only**: to be prescribed by a consultant or specialist practitioner in this therapeutic area with treatment remaining under their direct supervision. Not to be prescribed in primary care.
UI	**Unlicensed Indication**: a licensed medicine being used outside the terms of its licence.
UM	**Unlicensed Medicine**: a medicine with no UK marketing authorisation.

Drug deletions compared to GGC adult formulary

Drug	Current GGC formulary location/position		Comments
Insulin glulisine (Apidra®)	6.1.1.1. Short-acting insulins	TF	Remaining formulary short-acting insulins are Actrapid®, Humulin S®. Insulin detemir due to be discontinued by the manufacturer by the end of 2026.
Insulin detemir (Levemir®)	6.1.1.1. Short-acting insulins	TF	
Canagliflozin/empagliflozin/ ertugliflozin	6.1.2.2. SGLT2 Inhibitors	TF	Formulary SGLT2i is dapagliflozin
Canagliflozin/ empagliflozin/ dapagliflozin + metformin	6.1.2.2. SGLT2 Inhibitors	TF	Combination products not included as formulary choices
Empagliflozin + linagliptin	6.1.2.2. SGLT2 Inhibitors	TF	Combination products not included as formulary choices
Pioglitazone + metformin	6.1.2.5. Thiazolidinediones	TF	Combination products not included as formulary choices.
Alogliptin; Alogliptin + metformin; Linagliptin + metformin; Saxagliptin; Saxagliptin + dapagliflozin; Sitagliptin + metformin; Vildagliptin; Vildagliptin + metformin	6.1.2.6. Dipeptidylpeptidase-4 Inhibitors	TF	Formulary choice DPP4-inhibitors are sitagliptin and linagliptin. Combination products are not included as formulary choices.
Acarbose	6.1.2.7. Other Antidiabetic Drugs	TF	No longer considered a formulary choice for the treatment of Type 2 diabetes.
Betamethasone; Budesonide; Triamcinolone acetonide	6.3.2. Glucocorticoid therapy	TF	Formulary choice glucocorticoids are prednisolone,

			dexamethasone, hydrocortisone, methylprednisolone, methylprednisolone sodium succinate, methylprednisolone acetate

Note: Other drugs currently listed in the GGC endocrine chapter will be considered as part of the Genito-urinary chapter review, the Obstetrics & Gynaecology chapter review (drugs used for the menopause) and the musculoskeletal chapter review (drugs used in bone metabolism/osteoporosis).

In addition, the following specialist groups of drugs are currently not listed in the WoS Formulary infections chapter. Please refer to formulary choices listed in the GGC Formulary until the West of Scotland Formulary choices are agreed:

- Sex hormones
- Hypothalamic and pituitary hormones and anti-oestrogens
- Drugs affecting bone metabolism

Prescribing restriction changes compared to GGC formulary

Drug	GGC	WoS	Comments
Methylprednisolone (inj)	SI	SUO	
Desmopressin	None	SR/SUO	(Pathway: Treatment of Arginine vasopressin deficiency). WoSF has restricted to SR for oral and nasal sprays and the injection as SUO.

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