

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.

'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 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, which 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
 - 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 (NICE) Medicines Topic 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 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 advise the ADTC. Sometimes it is agreed that established medicines are a better choice than new medicines.

Medicine	Condition being treated	NHSGG&C Decision	Date of decision
----------	-------------------------	------------------	------------------

alectinib	Monotherapy as adjuvant treatment for adult patients with Stage IB (tumours ≥ 4 cm) to IIIA (7th edition of the UICC/AJCC-staging system) anaplastic lymphoma kinase (ALK)-positive non-small cell lung cancer (NSCLC) following complete tumour resection.	Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by: 18/08/2025	16/06/2025
Alecensa® SMC2749			
axicabtagene ciloleucel	Treatment of adult patients with diffuse large B-cell lymphoma (DLBCL) and high-grade B-cell lymphoma (HGBL) that relapses within 12 months from completion of, or is refractory to, first-line chemoimmunotherapy.	Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by: 18/08/2025	16/06/2025
Yescarta® SMC2695			
bempedoic acid	in adults with established or at high risk for atherosclerotic cardiovascular disease to reduce cardiovascular risk by lowering LDL-C levels, as an adjunct to correction of other risk factors: - in patients on a maximum tolerated dose of a statin with or without ezetimibe or, - alone or in combination with ezetimibe in patients who are statin-intolerant, or for whom a statin is contraindicated	Not routinely available as not recommended for use in NHSScotland	16/06/2025
Nilemdo® SMC2740			

Medicine	Condition being treated	NHSGGC Decision	Date of decision
bempedoic acid , ezetimibe Nustendi® SMC2741	Treatment of adults with established or at high risk for atherosclerotic cardiovascular disease to reduce cardiovascular risk by lowering LDL-C levels, as an adjunct to correction of other risk factors: - in patients on a maximum tolerated dose of a statin and not adequately controlled with additional ezetimibe treatment or, - in patients who are either statin-intolerant, or for whom a statin is contraindicated, and not adequately controlled with ezetimibe treatment or, - in patients already being treated with the combination of bempedoic acid and ezetimibe as separate tablets.	Not routinely available as not recommended for use in NHSScotland	16/06/2025
cabozantinib SMC2754	Monotherapy for the treatment of hepatocellular carcinoma (HCC) in adults who have previously been treated with sorafenib.	Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by: 18/08/2025	16/06/2025
cladribine Mavenclad® SMC2751	Treatment of adult patients with relapsing forms of multiple sclerosis (RMS) with active disease as defined by clinical or imaging features.	Routinely available in line with local or regional guidance	16/06/2025

Medicine	Condition being treated	NHSGGC Decision	Date of decision
<p>donanemab</p> <p>Kisunla®</p> <p>SMC2687</p>	<p>Treatment of mild cognitive impairment and mild dementia due to Alzheimer's disease (AD) in adult patients that are apolipoprotein E ε4 (ApoE ε4) heterozygotes or non-carriers.</p>	<p>Not routinely available as not recommended for use in NHSScotland</p>	<p>16/06/2025</p>
<p>durvalumab</p> <p>Imfinzi®</p> <p>SMC2734</p>	<p>In combination with etoposide and either carboplatin or cisplatin for the first-line treatment of adults with extensive-stage small cell lung cancer (ES-SCLC).</p>	<p>Routinely available in line with local or regional guidance</p>	<p>16/06/2025</p>
<p>durvalumab</p> <p>Imfinzi®</p> <p>SMC2735</p>	<p>In combination with tremelimumab for the first-line treatment of adults with advanced or unresectable hepatocellular carcinoma (HCC)</p>	<p>Not routinely available as not recommended for use in NHSScotland</p>	<p>16/06/2025</p>
<p>elvitegravir, cobicistat, emtricitabine, tenofovir alafenamide</p> <p>Genvoya®</p> <p>SMC2809</p>	<p>Treatment of human immunodeficiency virus-1 (HIV-1) infection without any known mutations associated with resistance to the integrase inhibitor class, emtricitabine or tenofovir in paediatric patients aged from 2 years and with body weight at least 14 kg to less than 25 kg.</p>	<p>Not routinely available as not recommended for use in NHSScotland</p>	<p>16/06/2025</p>

Medicine	Condition being treated	NHSGGC Decision	Date of decision
<p>eplontersen</p> <p>Wainzua®</p> <p>SMC2755</p>	<p>Treatment of hereditary transthyretin-mediated amyloidosis (ATTRv amyloidosis) in adult patients with Stage 1 and 2 polyneuropathy.</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: 06/10/2025</p>	<p>16/06/2025</p>
<p>erdafitinib</p> <p>Balversa®</p> <p>SMC2738</p>	<p>Monotherapy for the treatment of adult patients with unresectable or metastatic urothelial carcinoma (UC), harbouring susceptible FGFR3 genetic alterations who have previously received at least one line of therapy containing a PD-1 or PD-L1 inhibitor in the unresectable or metastatic treatment setting.</p>	<p>Routinely available in line with local or regional guidance</p>	<p>16/06/2025</p>
<p>etranacogene dezaparvovec</p> <p>Hemgenix®</p> <p>SMC2649</p>	<p>treatment of severe and moderately severe haemophilia B (congenital factor IX deficiency) in adult patients without a history of factor IX inhibitors.</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: 06/10/2025</p>	<p>16/06/2025</p>
<p>exagamglogene autotemcel</p> <p>Casgevy®</p> <p>SMC2709</p>	<p>Treatment of transfusion-dependent beta-thalassemia in patients 12 years of age and older for whom haematopoietic stem cell transplantation is appropriate and a human leukocyte antigen matched related haematopoietic stem cell donor is not available.</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: 06/10/2025</p>	<p>16/06/2025</p>

Medicine	Condition being treated	NHSGGC Decision	Date of decision
fruquintinib Fruzaqla® SMC2748	Treatment of adult patients with metastatic colorectal cancer (mCRC) who have been previously treated with available therapies, including fluoropyrimidine-, oxaliplatin-, and irinotecan-based chemotherapy, with or without an anti-VEGF therapy, and if RAS wildtype and medically appropriate, an anti-EGFR therapy.	Not routinely available as not recommended for use in NHSScotland	16/06/2025
futibatinib Lytgobi® SMC2661	Monotherapy for the treatment of adult patients with locally advanced or metastatic cholangiocarcinoma with a fibroblast growth factor receptor 2 (FGFR2) fusion or rearrangement that have progressed after at least one prior line of systemic therapy.	Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by: 18/08/2025	16/06/2025
mavacamten Camzyos® SMC2618	Treatment of symptomatic (New York Heart Association, NYHA, class II to III) obstructive hypertrophic cardiomyopathy (oHCM) in adult patients.	Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by: 18/08/2025	16/06/2025
mepolizumab Nucala® SMC2765	Add-on treatment for severe refractory eosinophilic asthma in adults, adolescents and children aged 6 years and older.	Routinely available in line with national guidance	16/06/2025

Medicine	Condition being treated	NHSGGC Decision	Date of decision
molnupiravir Lagevrio® SMC2556	Treatment of mild to moderate coronavirus disease 2019 (COVID-19) in adults with a positive SARS-COV-2 diagnostic test and who have at least one risk factor for developing severe illness.	Routinely available in line with local or regional guidance	16/06/2025
nirmatrelvir plus ritonavir Paxlovid SMC2557	Treatment of people with symptomatic coronavirus disease (COVID-19)	Routinely available in line with local or regional guidance	16/06/2025
Nivolumab, ipilimumab NCMAG121	Nivolumab in combination with ipilimumab for the neoadjuvant treatment of resectable stage III melanoma	Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by: 18/08/2025	16/06/2025
pegunigalsidase alfa Elfabrio® SMC2665	for long-term enzyme replacement therapy in adult patients with a confirmed diagnosis of Fabry disease (deficiency of alpha-galactosidase).	Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by: 06/10/2025	16/06/2025

Medicine	Condition being treated	NHSGGC Decision	Date of decision
<p>pegylated liposomal irinotecan</p> <p>Onivyde®</p> <p>SMC2812</p>	In combination with oxaliplatin, 5-fluorouracil (5-FU) and leucovorin (LV) for the first-line treatment of adult patients with metastatic adenocarcinoma of the pancreas.	Not routinely available as not recommended for use in NHSScotland	16/06/2025
<p>pegzilarginase</p> <p>Loargys®</p> <p>SMC2813</p>	Treatment of arginase 1 deficiency (ARG1-D), also known as hyperargininemia, in adults, adolescents and children aged 2 years and older.	Not routinely available as not recommended for use in NHSScotland	16/06/2025
<p>pembrolizumab</p> <p>NCMAG122</p>	For the neoadjuvant treatment of stage IIIB to IIID or oligometastatic resectable stage IV melanoma	Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by: 18/08/2025	16/06/2025
<p>ruxolitinib</p> <p>Jakavi®</p> <p>SMC2750</p>	Treatment of patients aged 12 years and older with acute graft versus host disease who have inadequate response to corticosteroids.	Routinely available in line with national guidance	16/06/2025

Medicine	Condition being treated	NHSGGC Decision	Date of decision
sarilumab Kevzara® SMC2810	Treatment of polymyalgia rheumatica (PMR) in adult patients who have had an inadequate response to corticosteroids or who experience a relapse during corticosteroid taper.	Not routinely available as not recommended for use in NHSScotland	16/06/2025
selpercatinib Retsevmo® SMC2732	Monotherapy for the treatment of adults and adolescents 12 years and older with advanced rearranged during transfection (RET)-mutant medullary thyroid cancer (MTC).	Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by: 18/08/2025	16/06/2025
Semaglutide Wegovy SMC2497	An adjunct to a reduced-calorie diet and increased physical activity for weight management, including weight loss and weight maintenance, in adults with an initial Body Mass Index (BMI) of • $\geq 30\text{kg/m}^2$ (obesity), or • $\geq 27\text{kg/m}^2$ to $<30\text{kg/m}^2$ (overweight) in the presence of at least one weight-related comorbidity.	Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by: 18/08/2025	16/06/2025
sodium thiosulfate Pedmarqsi® SMC2730	Prevention of ototoxicity induced by cisplatin chemotherapy in patients 1 month to <18 years of age with localised, non-metastatic, solid tumours.	Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by: 18/08/2025	16/06/2025

Medicine	Condition being treated	NHSGGC Decision	Date of decision
sumatriptan, naproxen Suvexx® SMC2756	treatment of the headache phase of migraine attacks with or without aura in adults where treatment with a mono-entity product has been insufficient.	Not routinely available as not recommended for use in NHSScotland	16/06/2025
talazoparib Talzena® SMC2753	In combination with enzalutamide for the treatment of adult patients with metastatic castration-resistant prostate cancer (mCRPC) in whom chemotherapy is not clinically indicated.	Routinely available in line with local or regional guidance	16/06/2025
tirzepatide Mounjaro® SMC2653	For weight management, including weight loss and weight maintenance, as an adjunct to a reduced-calorie diet and increased physical activity in adults with an initial Body Mass Index (BMI) of ≥ 30 kg/m ² (obesity) or ≥ 27 kg/m ² to < 30 kg/m ² (overweight) in the presence of at least one weight-related comorbid condition (e.g., hypertension, dyslipidaemia, obstructive sleep apnoea, cardiovascular disease, prediabetes, or type 2 diabetes mellitus).	Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by: 18/08/2025	16/06/2025