ADTC (M) 24/06
Minutes 59 - 70

NHS GREATER GLASGOW AND CLYDE

Minutes of the Meeting of the
Area Drugs and Therapeutics Committee
held on Monday 9 December 2024 at 2.00pm
via Microsoft Teams

PRESENT

Dr Scott Muir (in the Chair)

Katie Adair	Mairi-Anne McLean
Ronnie Burns	Helen A Smith
Ysobel Gourlay	Aileen Muir
Stephanie Hart	Janice Watt
Kay McAllister	Faria Qureshi
Gerry McKay	Elaine Paton

IN ATTENDANCE

Roy Foot	Principal Pharmacist, SMC, Observer
Gillian McCafferty	Pharmacist, Observer
Louise Russell	Secretariat (Minute) (via recording)
Caroline Thomson	Medicines Information Pharmacist, Observer
Fiona Thomson	NHS Highland, Observer

			ACTION BY
59.	**CHAIR'S STATEMENT**		
	The Chair reminded members that papers and proceedings related to SMC advice were, in some cases, confidential, and should not be disclosed before the relevant embargo dates. Members were reminded to make relevant declarations of interest in line with Board policy. Members were advised not to speak with members of the press on ADTC business but to refer such enquiries to the Board Press Liaison Office. **NOTED**		

			ACTION BY
60.	**WELCOME AND APOLOGIES**		
	The Chair welcomed those present to the December meeting of the Area Drugs and Therapeutics Committee. Apologies for absence were noted on behalf of Maureen Byrne and Ishtiaq Mohammed. **NOTED**		
61.	**MINUTES OF PREVIOUS MEETING**		
	The Committee considered the minute of the meeting held on Monday, 7th October 2024 and were content to accept these as an accurate record of the meeting. **APPROVED**		
62.	**MATTERS ARISING**		
	2025 Dates The Committee accepted the 2025 meeting dates. **APPROVED**		
63.	**NEW MEDICINES FOR CONSIDERATION**		
(i)	**Report on SMC Product Assessments**		
	Members were asked to declare any interests specific or non-specific, personal or non-personal, on any of the drugs being discussed on an individual basis. No declarations of interest were made. **NOTED**		
(ii)	**WEST OF SCOTLAND CANCER NETWORK PRESCRIBING ADVISORY SUBGROUP REPORTS**		
	The Committee noted the summary of advice for October 2024. **NOTED**		
64.	**PAPER FROM MEDICINES UTILISATION FOR DECISION**		

			ACTION BY
	The Committee noted the paper presented for Botulinum Toxin A (Botox and Xeomin brands) to be included in the GGC Formulary for the treatment of lower limb spasticity received by the Stroke MCN. The Committee noted that this was not recommended for use within NHS Scotland by SMC for the use of lower limb spasticity due to non-submission by the company. NICE had recently reviewed this medicine and made the decision to not recommend use in their 2023 guideline. It was noted that currently Individual Patient Treatment Requests (IPTRs) were completed by clinicians in order to use this medicine to achieve treatment goals. The Committee noted that there was no new clinical efficacy or cost efficiency information for this indication, therefore there was insufficient evidence available to base an appropriate decision. **NOTED**		
65.	**ADTC SUMCOMMITTEE SIX MONTHLY REPORTS**		
a)	**Prescribing Interface Subcommittee**		
	Dr Roger Hardman presented the paper 'Prescribing Interface Subcommittee Six Monthly Report' [Paper 24/27] and highlighted the following: • There had been a change in membership with Dr Joanna Hall joining as an LMC Representative and Dr Christine Wilson resigning due to retirement. • A clinical guideline for Melatonin Prescription for Acute and Chronic insomnia in Adults had gone through PMG PC and was submitted to the Medicines Utilisation Subcomittee for consideration. This would supercede the Shared Care Agreement (SCA), however the existing SCA remained valid in the meantime. • The Subcommittee reviewed the policy on Supply of Medicines Following Specialist Service Review or Clinic Appointments, however there were potential governance issues raised with the use of the Clinical Portal eForm. It was noted that discussions remained ongoing and the existing policy remained valid in the meantime. The Committee were content to note the update. **NOTED**		

			ACTION BY
b)	**Patient Group Directive Subcommittee**		
	Ms Elaine Paton presented the paper 'Patient Group Directive Subcommittee Six Monthly Report' [Paper 24/28] and highlighted the following: • The membership had been reviewed and Nursing representatives had been nominated from MIU/ED. A new member would be appointed from the nominations received. • Other work included Ms Paton being part of a Task Group to discuss and support implementation of Pharmacy Technicians to work using a PDG. The Committee discussed nursing representation on ADTC and ADTC subcommittees including Medicines Utilisation and Safer Use of Medicines. This would be explored further. The Committee were content to note the update. **NOTED**		Ms Paton/Ms Qureshi
66.	**ADTC SUBCOMMITTEE UPDATES**		
	a) Safer Use of Medicine Prof Gerry McKay reported that the Subcommittee continued to meet regularly and there was a steady flow of work. In response to a question regarding the work that was taking place in relation to Sodium Valproate and Topiramate, the Committee noted that a significant amount of work had been carried out in relation to Sodium Valproate implementation. An action plan had been developed and implementation complete. It was noted that similar work would be carried out in relation to Topiramate, which was in the early stages of implementation. Further updates would be provided in due course. In relation to Sodium Valproate compliance rates, it was noted that audits were ongoing and an annual audit review process was in place, the results of which were presented to the Board Clinical Governance Forum. It was noted that compliance		

			ACTION BY
	rates in Mental Health were high, however Neurology were experiencing challenges with patients engaging, therefore further work would be carried out. A further update on compliance data could be provided at the next meeting in the Safer Use of Medicines Report. The Committee were content to note the update. **NOTED**		Prof McKay
	b) Antimicrobial Subcommittee • The Committee noted the retirement of Ysobel Gourlay. The Committee thanked Ysobel for her contribution to the Committee and the Antimicrobial Subcommittee and wished her well in her retirement. **NOTED**		
	c) Medicines Utilisation Subcommittee No update. **NOTED**		
	d) Non- Medicines Utilisation Subcommittee No specific update. **NOTED**		
67.	**WoS REGIONAL FORMULARY**		
	Ms Aileen Muir, Depute Director of Pharmacy, presented the paper 'WoS Formulary Programme Board Draft Minutes' [Paper 24/9]. Ms Muir reported that two meetings of the Programme Board had taken place to date. The Board was currently chaired by Graham Bryson, Director of Pharmacy, Lanarkshire, however a new chair would be sought. The main area of discussion was setting out governance, including the Terms of Reference. The importance of linking to the Therapeutics Handbook and cross referencing had been highlighted.		

			ACTION BY
	The Committee noted that there would be secondment opportunities, however the challenges within NHSGGC were recognised regarding capacity and availability. The Committee were content to note the update and noted that further updates would be provided as work progressed. **NOTED**		
68.	**ADTC COLLABORATIVE UPDATE**		
	Ms Helen A Smith reported on the recent ADTC Collaborative. The main topics of discussion included: • Migraine management, particularly use of Topiramate in light of the MHRA advice in relation to pregnancy. The ADTCC would help facilitate national discussion around this. • Managing menopausal women with sexual dissatisfaction and advice on testosterone prescribing. There had been an increase in the number of women attending the GP for this reason, which let to interest in developing a national pathway around prescribing and monitoring of testosterone gel. A draft pathway had been developed to amalgamate pathways. • A SMC Update was provided which included the antimicrobial products model in the UK. This would encourage companies to invest in order to tackle antimicrobial resistance. It had been agreed that SMC advice on antimicrobials would be paused over the next year while this was taking place. It was noted that SMC may issue outwith the remit position for Boards to make local decisions. • There was collaboration with NICE for Molnupiravir prescribing to treat COVID. • A brief update was provided from the Scottish Government. Medicines safety issues were being identified with weight loss medications eg counterfeit or medications being prescribed outwith the NHS. A response was being collated including promotion of the fake medicines website. • Two Quality Improvement presentations were provided. The Committee noted the ADTCC Newsletter would be circulated when available. The Committee noted that the ADTC		

			ACTION BY
	Collaborative meetings were recorded if members were interested in viewing the meetings. The Committee were content to note the update. **NOTED**		
69.	**ANY OTHER BUSINESS**		
	The Chair invited the Committee to raise any other business. No further business was raised. The Chair thanked Committee members for their participation and continued support this year. **NOTED**		
70.	**DATE OF NEXT SCHEDULED MEETING**		
	Monday, 17 February 2025 at 2pm, via Microsoft Teams		

Appendix 1:NHS Greater Glasgow and Clyde New Medicines Decisions

Date of ADTC Decisions: **09/12/2024**

bismuth, metronidazole, tetracycline

SMC2701

Pylera®

Indication:

In combination with omeprazole, for the eradication of Helicobacter pylori and prevention of relapse of peptic ulcers in patients with active or a history of H. pylori associated ulcers.

ADTC Discussion points

Update primary care and secondary care GGC H. pylori guidelines. For use in patients with H. pylori who have:
- penicillin allergy and contra-indication to macrolides,
or
- treatment resistant H. pylori with specialist advice.

ADTC Decision:

Routinely available in line with local or regional guidance

Local restrictions on use:

For use according to clinical guidelines in patients with H. pylori who have:
- penicillin allergy and contra-indication to macrolides,
or
- treatment resistant H. pylori with specialist advice

---

faricimab

SMC 2685

Vabysmo

Indication:

Treatment of adult patients with visual impairment due to macular oedema secondary to retinal vein occlusion (branch RVO or central RVO)

ADTC Discussion points

For this indication, faricimab for consideration by specialists after Eyela, and if dexamethasone (Ozurdex) is contrainidicated. GGC protocol should be updated to include faricimab.

ADTC Decision:

Routinely available in line with local or regional guidance

Local restrictions on use:

---

tenecteplase

SMC2697

Metalyse®

Indication:

In adults for the thrombolytic treatment of acute ischaemic stroke within 4.5 hours from last known well and after exclusion of intracranial haemorrhage.

ADTC Discussion points

For specialist use only. GGC Protocol in development and will accompany Medicines Update blog article to highlight the switch from alteplase.

ADTC Decision:

Routinely available in line with local or regional guidance

Local restrictions on use:

For use by stroke specialists

---

nivolumab, relatlimab

SMC2645

Opdualag®

Indication:

First-line treatment of advanced (unresectable or metastatic) melanoma in adults and adolescents 12 years of age and older.

ADTC Discussion points

Recommended for addition to Formulary by Regional Cancer Advisory Group. Regional protocol for use has been approved.

ADTC Decision:

Routinely available in line with local or regional guidance

Local restrictions on use:

---

quizartinib

SMC2699

Vanflyta®

Indication:

In combination with standard cytarabine and anthracycline induction and standard cytarabine consolidation chemotherapy, followed by quizartinib single-agent maintenance therapy for adult patients with newly diagnosed acute myeloid leukaemia (AML) that is FLT3-ITD positive.

ADTC Discussion points

Referred to RCAG for further advice

ADTC Decision:

Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by:

17/02/2024

Local restrictions on use:

---

trifluridine, tipiracil

SMC2654

Lonsurf®

Indication:

In combination with bevacizumab for the treatment of adult patients with metastatic colorectal cancer (CRC) who have received two prior anticancer treatment regimens including fluoropyrimidine-, oxaliplatin- and irinotecan-based chemotherapies, anti-VEGF agents, and/or anti-EGFR agents.

ADTC Discussion points

Recommended for addition to Formulary by Regional Cancer Advisory Group. Regional protocol for use has been approved.

ADTC Decision:

Routinely available in line with local or regional guidance

Local restrictions on use:

---

zanubrutinib

SMC2684

Brukinsa®

Indication:

Monotherapy for the treatment of adult patients with marginal zone lymphoma (MZL) who have received at least one prior anti-CD20-based therapy.

ADTC Discussion points

Referred to RCAG for further advice

ADTC Decision:

Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by:

17/02/2025

Local restrictions on use:

---

somapacitan

SMC2629

Sogroya®

Indication:

Replacement of endogenous growth hormone (GH) in children aged 3 years and above, and adolescents with growth failure due to growth hormone deficiency (paediatric GHD), and in adults with growth hormone deficiency (adult GHD).

ADTC Discussion points

Paediatric medicine - referred to paediatric specialist

ADTC Decision:

Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by:

Local restrictions on use:

---

enzalutamide

SMC2742

Xtandi®

Indication:

Monotherapy or in combination with androgen deprivation therapy for the treatment of adult men with high-risk biochemical recurrent (BCR) non-metastatic hormone-sensitive prostate cancer (nmHSPC) who are unsuitable for salvage radiotherapy.

ADTC Discussion points

ADTC Decision:

Not routinely available as not recommended for use in NHSScotland

Local restrictions on use:

---

durvalumab

SMC2677

Imfinzi®

Indication:

In combination with platinum-based chemotherapy as neoadjuvant treatment, followed by durvalumab as monotherapy after surgery, is indicated for the treatment of adults with resectable (tumours ≥ 4 cm and/or node positive) non-small cell lung cancer (NSCLC) and no known EGFR mutations or ALK rearrangements

ADTC Discussion points

ADTC Decision:

Not routinely available as not recommended for use in NHSScotland

Local restrictions on use:

---

levodopa, carbidopa, entacapone

SMC2507

Lecigon®

Indication:

Treatment of advanced Parkinson's disease with severe motor fluctuations and hyperkinesia or dyskinesia when available oral combinations of Parkinson medicinal products have not given satisfactory results.

ADTC Discussion points

ADTC Decision:

Not routinely available as not recommended for use in NHSScotland

Local restrictions on use:

---

pembrolizumab

SMC2688

Keytruda®

Indication:

In combination with platinum-containing chemotherapy as neoadjuvant treatment, and then continued as monotherapy as adjuvant treatment, for the treatment of resectable non-small cell lung carcinoma at high risk of recurrence in adults.

ADTC Discussion points

ADTC Decision:

Not routinely available as not recommended for use in NHSScotland

Local restrictions on use:

---

anastrazole

NCMAG113

Indication:

primary prevention of breast cancer in post-menopausal people at moderate or high risk

ADTC Discussion points

National discussions regarding implementation pathways in progress. Defer decision pending outcome of this.

ADTC Decision:

Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by:

17/02/2025

Local restrictions on use:

---

axicabtagene ciloleucel

SMC2695

Yescarta®

Indication:

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.

ADTC Discussion points

ADTC Decision:

Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by:

17/02/2025

Local restrictions on use:

---

elranatamab

SMC2669

Elrexfio®

Indication:

Monotherapy for the treatment of adult patients with relapsed and refractory multiple myeloma, who have received at least three prior therapies, including an immunomodulatory agent, a proteasome inhibitor, and an anti-CD38 antibody and have demonstrated disease progression on the last therapy.

ADTC Discussion points

Referred to RCAG for further advice

ADTC Decision:

Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by:

17/02/2025

Local restrictions on use:

---

etranacogene dezaparvovec

SMC2649

Hemgenix®

Indication:

treatment of severe and moderately severe haemophilia B (congenital factor IX deficiency) in adult patients without a history of factor IX inhibitors.

ADTC Discussion points

19/08/24 - Decision deferred pending clarification of service requirements and National Services Scotland risk share arrangements
09/12/24 - National discussions underway regarding funding streams.

ADTC Decision:

Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by:

17/02/2025

Local restrictions on use:

---

ivosidenib

SMC2664

Tibsovo®

Indication:

Monotherapy for the treatment of adult patients with locally advanced or metastatic cholangiocarcinoma with an isocitrate dehydrogenase-1 (IDH1) R132 mutation who were previously treated by at least one prior line of systemic therapy.

ADTC Discussion points

Referred to RCAG for further advice

ADTC Decision:

Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by:

17/02/2025

Local restrictions on use:

---

lebrikizumab

SMC2707

Ebglyss®

Indication:

Treatment of moderate-to-severe atopic dermatitis in adults and adolescents 12 years and older with a body weight of at least 40 kg who are candidates for systemic therapy.

ADTC Discussion points

Defer decision until implementation plan is in place.

ADTC Decision:

Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by:

28/04/2025

Local restrictions on use:

---

linzagolix

SMC2631

Yselty®

Indication:

Treatment of moderate to severe symptoms of uterine fibroids in adult women of reproductive age.

ADTC Discussion points

Awaiting further advice from specialists.

ADTC Decision:

Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by:

17/02/2025

Local restrictions on use:

---

mavacamten

SMC2618

Camzyos®

Indication:

Treatment of symptomatic (New York Heart Association, NYHA, class II to III) obstructive hypertrophic cardiomyopathy (oHCM) in adult patients.

ADTC Discussion points

17/06/24 - Decision deferred.
Genetic phenotyping service is currently unavailable nationally and. there are also local service implications for ongoing monitoring.
Defer until service provision has been agreed.

ADTC Decision:

Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by:
17/02/2025

Local restrictions on use:

---

pembrolizumab

SMC2660

Keytruda®

Indication:

in combination with fluoropyrimidine and platinum-containing chemotherapy, for the first-line treatment of locally advanced unresectable or metastatic human epidermal growth factor 2 (HER2)-negative gastric or gastro-oesophageal junction adenocarcinoma in adults whose tumours express programmed death-ligand 1 (PD-L1) with a combined positive score (CPS) ≥ 1.

ADTC Discussion points

19/08/24 - Referred to RCAG for advice
09/12/2024 - Awaiting RCAG advice.

ADTC Decision:

Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by:
17/02/2025

Local restrictions on use:

---

raloxifene

NCMAG114

Indication:

Primary prevention of breast cancer in post-menopausal people at moderate or high risk who are not suitable for on-label alternatives.

ADTC Discussion points

National discussions regarding implementation pathways in progress. Defer decision pending outcome of this.

ADTC Decision:

Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by:
17/02/2025

Local restrictions on use:

Selinexor

SMC 2674

Nexpovio

Indication:

In combination with bortezomib and dexamethasone for the treatment of adult patients with multiple myeloma who have received at least one prior therapy.

ADTC Discussion points

Referred to RCAG for further advice

ADTC Decision:

Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by:

17/02/2025

Local restrictions on use:

Selinexor

SMC 2673

Nexpovio

Indication:

In combination with dexamethasone for the treatment of multiple myeloma in adult patients who have received at least four prior therapies and whose disease is refractory to at least two proteasome inhibitors, two immunomodulatory agents and an anti-CD38 monoclonal antibody, and who have demonstrated disease progression on the last therapy.

ADTC Discussion points

Referred to RCAG for further advice

ADTC Decision:

Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by:

17/02/2025

Local restrictions on use:

Semaglutide

SMC2497

Wegovy

Indication:

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
•≥30kg/m2 (obesity), or
•≥27kg/m2 to <30kg/m2 (overweight) in the presence of at least one weight-related comorbidity.

ADTC Discussion points

22/04/24 - National SLWG looking at consensus statement regarding GLP1receptor agonists for weight management to help guide health boards. It was noted that there are significant local service implications and global supply issues ongoing. Further local implementation plans are needed. Decision on formular to be determined by product availability and service delivery.

ADTC Decision:

Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by:
17/02/2025

Local restrictions on use:

BMI of ≥30kg/m2* in the presence of at least one weight-related comorbidity. Patients should be treated in a specialist weight management service.
*A lower BMI cut-off may be more appropriate for members of minority ethnic groups known to be at equivalent risk of the consequences of obesity at a lower BMI than the white population.

---

tamoxifen

NCMAG115

Indication:

Primary prevention of breast cancer in people at moderate or high risk

ADTC Discussion points

National discussions regarding implementation pathways in progress. Defer decision pending outcome of this.

ADTC Decision:

Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by:
17/02/2025

Local restrictions on use:

---

teclistamab

SMC2668

Tecvayli®

Indication:

Monotherapy for the treatment of adult patients with relapsed and refractory multiple myeloma, who have received at least three prior therapies, including an immunomodulatory agent, a proteasome inhibitor, and an anti-CD38 antibody and have demonstrated disease progression on the last therapy.

ADTC Discussion points

Referred to RCAG for further advice.

ADTC Decision:

Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by:
17/02/2025

Local restrictions on use:

tirzepatide

SMC2653

Mounjaro®

Indication:

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/m2 (obesity) or ≥27 kg/m2 to <30 kg/m2 (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).

ADTC Discussion points

17/06/24 - Decision deferred until local implementation plans on service dleivery are agreed.

ADTC Decision:

Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by:
17/02/2025

Local restrictions on use:

---

trametinib

NCMAG118

Indication:

Treatment of low grade serous ovarian cancer after at least one line of platinum-based chemotherapy

ADTC Discussion points

Referred to RCAG for further advice

ADTC Decision:

Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by:
17/02/2025

Local restrictions on use:

---

vibegron

SMC2696

Obgemsa®

Indication:

Symptomatic treatment of adult patients with overactive bladder (OAB) syndrome.

ADTC Discussion points

Awaiting further advice from specialists

ADTC Decision:

Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by:
17/02/2025

Local restrictions on use:

---

birch bark extract

SMC2651

Filsuvez®

Indication:

treatment of partial thickness wounds associated with dystrophic and junctional epidermolysis bullosa (EB) in patients 6 months and older

ADTC Discussion points

19/08/24 - Decision deferred until Scottish Government notification that medicine has been included on the national ultra-oprhan risk share scheme

30/10/2024 Available via UO risk sharing scheme.

ADTC Decision:

Routinely available in line with local or regional guidance

Local restrictions on use:

---

pegunigalsidase alfa

SMC2665

Elfabrio®

Indication:

for long-term enzyme replacement therapy in adult patients with a confirmed diagnosis of Fabry disease (deficiency of alpha-galactosidase).

ADTC Discussion points

19/08/24 - Decision deferred until Scottish Government notification that medicine has been included on the national risk share scheme

ADTC Decision:

Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by:
17/02/2025

Local restrictions on use:
