ADTC (M) 25/01
Minutes 01 - 13

NHS GREATER GLASGOW AND CLYDE

Minutes of the Meeting of the
Area Drugs and Therapeutics Committee
held on Monday 17 February 2025 at 2.00pm
via Microsoft Teams

PRESENT

Dr Roger Hardman (in the Chair)

Maureen Bryne	Elaine McIvor
Fiona Robb	Mairi-Anne McLean
Stephanie Hart	Janice Watt
Colin Mason	Faria Qureshi
Kay McAllister	Elaine Paton
Gerry McKay	Amit Verma
Colin Mason	

IN ATTENDANCE

Abbie Maxwell	Secretariat (Minute)
Rob Puckett	Lead HEPMA Pharmacist
Caroline Thomson	Senior Pharmacist - Medicines Information Services
Fiona Thomson	NHS Highland, Observer
Siobhan Carty	Antimicrobial Pharmacist

			ACTION BY
01.	**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
02.	**WELCOME AND APOLOGIES**		
	The Chair welcomed those present to the February 2025 meeting of the Area Drugs and Therapeutics Committee. Apologies for absence were noted on behalf of: • Scott Muir • Ronnie Burns • Aileen Muir • Katie Adair • Gail Caldwell • Ishtiaq Mohammed The Chair introduced new members to the Committee Fiona Robson, senior antimicrobial pharmacist, and Colin Mason, prescribing support pharmacist. Stepping down was Helen Smith. **NOTED**		
03.	**MINUTES OF PREVIOUS MEETING**		
a)	The Committee considered the minute of the meeting held on Monday, 9 December 2024 and were content to accept these as an accurate record. **APPROVED**		
b)	**Decisions Summary: 9 December 2024** The Committee were content to note the Decision Summary from 9 December 2024. **NOTED**		
04.	**MATTERS ARISING**		
	The Committee discussed Nursing representation within the Area Drug and Therapeutics Committee, and it was agreed that this would be followed up with the Chief Nurses Group. Further consideration would then be given to nursing representation on the ADTC Subcommittees at a future date.		Ms Paton

			ACTION BY
	The Committee noted that compliance data for Valproate use in Neurology would be raised at the next Safer Use of Medicines Subcommittee. An update on the data would be provided to the Committee at the April meeting. **NOTED**		Prof McKay
05.	**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. It was noted that there is currently no paediatric ADTC to discuss SMC paediatric medicines. The committee discussed that, if a paediatric ADTC is not re-established, an alternative would be to invite paediatric representation onto the main ADTC committee. It was agreed that contact would be made with the Chief of Medicine for Women and Children (Alan Mathers) regarding this. **NOTED**		Chair
06.	**WEST OF SCOTLAND CANCER NETWORK PRESCRIBING ADVISORY SUBGROUP REPORTS**		
	The Committee noted the summary of advice for December 2024. **NOTED**		
07.	**ADTC SUMCOMMITTEE SIX MONTHLY REPORTS**		
a)	**Communications Subcommittee**		
	Ms Elaine McIvor presented the paper 'Communications Subcommittee Six Monthly Report' [Paper 25/04]. Ms McIvor reported that Medicines Update blogs continued to be posted, however some blogs had stalled due to guideline issues. The Committee noted that "X" continued to be used as the main social media platform for engagement. Discussions were taking place to create a more formal plan for promotion.		

			ACTION BY
	A user survey had been carried out which had received some positive feedback. Instagram was being considered as an alternative platform and the results of the survey would be used when making a decision. The Committee were content to note the update. **NOTED**		
b)	**Safer Use of Medicines**		
	Professor Gerry McKay presented the paper 'Safer Use of Medicines Six Monthly Report' [Paper 25/05]. Professor McKay reported that the group continued to meet regularly. The Committee were content to note the paper. **NOTED**		
08.	**ADTC SUBCOMMITTEE UPDATES**		
	a) Prescribing Interface Subcommittee Dr Hardman advised the Committee that there was no further update since the Committee submitted its 6 monthly report. The Committee were content to note the update. **NOTED**		
	b) Patient Group Directive Ms Paton advised the Committee that the group continued to work on the vaccine PGD and there was nothing further to update at this time. The Committee were content to note the update. **NOTED**		
	c) Antimicrobial Subcommittee Ms Robb highlighted the reduced susceptibility of microorganisms when using Co-Amoxiclav compared with Gentamicin, and they		

			ACTION BY
	had been encouraging the use of Gentamicin, and minimise the use of Co-Amoxiclav. Ms Robb highlighted the importance of patients presenting with infections to have appropriate blood cultures after figures showed that only 1 in 3 patients were having appropriate blood cultures taken. A study had taken place in relation to the use of Oral Antibiotics, and the study had shown that only 53% of Oral Antibiotics had durations recorded in HEPMA. It was noted that this could lead to longer durations of Antibiotics which may then lead to Antibiotic resistance. Ms Robb reported that the Scottish Antimicrobial Prescribing Group were working with HEPMA Teams across Scotland to implement Antibiotic Prescribing by indication. It was noted that NHSGGC would be taking part in a pilot. The Committee were content to note the update **NOTED**		
	d) Medicines Utilisation Subcommittee Dr Verma reported that the group had been working on the remit to fully reflect the purpose of the Subcommittee. Dr Verma raised a query to the Committee regarding the use of Botox in Stroke patients for leg spasticity. The Committee reaffirmed its position, as discussed at the December 2024 ADTC meeting, that this use is not supported due to concerns regarding clinical precedence and cost-effectiveness. The Committee were content to note the update. **NOTED**		
	e) Non-Medicines Utilisation Update There was no specific update. **NOTED**		

			ACTION BY
09.	**WoS REGIONAL FORMULARY**		
	Ms Faria Qureshi, presented the papers 'WoS Formulary Programme Board Draft Minutes' Ms Qureshi reported that the Programme Board had agreed a definition for the Formulary and there had been no concerns raised regarding this. A workplan is being developed. Work is underway to develop clear pathways for formulary additions alongside the development of regional chapters. Local processes are still required whilst the chapters are being developed. Some funding has been allocated for a Medical Advisor / Programme Board Chair and pharmacy support. Pharmacist secondment posts have been advertised by the hosting board (NHS Lanarkshire), however recruitment may be challenging due to Health Boards recruitment policies (including GGC) making supporting secondments difficult. Local support for chapter reviews is still required but GGC has only a small resource related to formulary. It is hoped that nominations from interested professionals across GGC could be provided. A proposal to develop a Regional Paediatric Formulary in parallel with the Adult Formulary was noted. There were concerns about how realistic this would be and what the engagement would be in the absence of a GGC Paediatric ADTC Committee. Engagement with Women's and Children directorate would be important if a Paediatric Formulary was to go ahead. The Committee were content to note the update. **NOTED**		
10.	**ADTC COLLABORATIVE UPDATE**		
	The Committee noted that the next meeting would take place on 26th February 2025. **NOTED**		
11.	**HEPMA Six Month Progress Report**		
	Mr Rob Puckett, Lead HEPMA Pharmacist, highlighted the concerns surrounding business continuity and the need for a robust process to be in place if the system became unavailable.		

			ACTION BY
	He noted that work had been taking place with the eHealth Team to create a process. It was discussed that there had been some extra Pharmacist resources within Outpatient Services and were moving forward with Clozapine. Mr Puckett discussed the use of dashboards for clinical staff and the challenges with gathering users for these dashboards, however, he noted that work was progressing well. The Committee were content to note the update. **NOTED**		
12.	**Any Other Business**		
	The Chair noted a letter from now retired Chief Executive, Jane Grant, to the Scottish Government regarding the de-designation of the nationally commissioned CAR-T service in relation to the cost and the expanding numbers. The Committee were content to note the paper.		
13.	**Date and Time of Next Scheduled Meeting**		
	Monday, 28 April 2025 at 2pm, via Microsoft Teams		

Appendix 1:NHS Greater Glasgow and Clyde New Medicines Decisions

Date of ADTC Decisions: **17/02/2025**

cabotegravir

SMC2718

Apretude®

Indication:

injection: in combination with safer sex practices for pre-exposure prophylaxis (PrEP) to reduce the risk of sexually acquired HIV-1 infection in high-risk adults and adolescents, weighing at least 35 kg.
tablets: in combination with safer sex practices for short term pre-exposure prophylaxis (PrEP) to reduce the risk of sexually acquired HIV-1 infection in high-risk adults and adolescents, weighing at least 35 kg. Cabotegravir tablets may be used as:
- oral lead-in to assess tolerability of cabotegravir prior to administration of long acting cabotegravir injection.
- oral PrEP for individuals who will miss planned dosing with cabotegravir injection.

ADTC Discussion points

Accepted for specialist use only and as per national protocol (under development) which will lay out the eligibility criteria.
There are service implications but the Committee noted that discussions are underway within the specialist service around this.

ADTC Decision:

Routinely available in line with national guidance

Local restrictions on use:

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danicopan

SMC2675

Voydeya®

Indication:

Add-on to ravulizumab or eculizumab for the treatment of adult patients with paroxysmal nocturnal haemoglobinuria (PNH) who have residual haemolytic anaemia.

ADTC Discussion points

PNH is managed as part of national service. In Scotland outreach clinic at Monkland's Hospital.
Defer decision pending response from experts.

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:

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fenfluramine

SMC2723

Fintepla®

Indication:

Treatment of seizures associated with Lennox-Gastaut syndrome as an add-on therapy to other anti-epileptic medicines for patients 2 years of age and older.

ADTC Discussion points

Accepted for specialist use. Local experts regard it as an additional treatment option in the management of the condition.
Monitoring is required: regular cardiac monitoring (echocardiogram) and monitoring for weight loss.

ADTC Decision:

Routinely available in line with local or regional guidance

Local restrictions on use:

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iptacopan

SMC2676

Fabhalta®

Indication:

Monotherapy in the treatment of adult patients with paroxysmal nocturnal haemoglobinuria (PNH) who have haemolytic anaemia.

ADTC Discussion points

PNH is managed as part of national service. In Scotland outreach clinic at Monkland's Hospital.
Defer decision pending response from experts.

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:

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netarsudil, latanoprost

SMC2720

Roclanda®

Indication:

Reduction of elevated intraocular pressure (IOP) in adult patients with primary open-angle glaucoma or ocular hypertension for whom monotherapy with a prostaglandin or netarsudil provides insufficient IOP reduction.

ADTC Discussion points

Accepted for specialist initiation as a therapeutic option further down the treatment pathway when alternatives are either not tolerated or suitable.

ADTC Decision:

Routinely available in line with national guidance

Local restrictions on use:

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relugolix, estradiol, norethisterone acetate

SMC2666

Ryeqo®

Indication:

In adult women of reproductive age for symptomatic treatment of endometriosis in women with a history of previous medical or surgical treatment for their endometriosis.

ADTC Discussion points

Accepted for specialist initiation. The GGC protocol should be updated to clarify that monitoring, specifically DXA scans, is the responsibility of the acute care sector.

ADTC Decision:

Routinely available in line with local or regional guidance

Local restrictions on use:

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sirolimus

SMC2710

Hyftor®

Indication:

Treatment of facial angiofibroma associated with tuberous sclerosis complex in adults and paediatric patients aged 6 years and older.

ADTC Discussion points

Licensed treatment for this condition. Apply a stop-and-start rule: discontinue sirolimus gel after 12 weeks if no effect is observed.

ADTC Decision:

Routinely available in line with national guidance

Local restrictions on use:

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vamorolone

SMC2721

Agamree®

Indication:

Treatment of Duchenne muscular dystrophy (DMD) in patients aged 4 years and older.

ADTC Discussion points

Accepted for specialist use only.
Local expert regards it as a useful therapeutic option in paediatric patients.

ADTC Decision:

Routinely available in line with national guidance

Local restrictions on use:

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ciclosporin

SMC2739

Cequa®

Indication:

Treatment of moderate-to-severe Dry Eye Disease (keratoconjunctivitis sicca) in adult patients who have not responded adequately to artificial tears.

ADTC Discussion points

Add to GGC Formulary. For specialist initiation.

ADTC Decision:

Routinely available in line with local or regional guidance

Local restrictions on use:

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crovalimab

SMC2728

Piasky®

Indication:

Monotherapy for the treatment of adult and paediatric patients 12 years of age or older with a weight of 40 kg and above with paroxysmal nocturnal haemoglobinuria (PNH):

- In patients with haemolysis with clinical symptom(s) indicative of high disease activity.
- In patients who are clinically stable after having been treated with a complement component 5 (C5) inhibitor for at least the past 6 months.

ADTC Discussion points

PNH is managed as part of national service. In Scotland outreach clinic at Monkland's Hospital.
Defer decision pending response from experts.

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:

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risankizumab

SMC2686

Skyrizi®

Indication:

treatment of adult patients with moderately to severely active ulcerative colitis who have had an inadequate response to, lost response to, or were intolerant to conventional therapy or a biologic therapy

ADTC Discussion points

Experts see this as an additional therapeutic option for inclusion further down the pathway in the GGC treatment guideline.

ADTC Decision:

Routinely available in line with local or regional guidance

Local restrictions on use:

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ublituximab

SMC2731

Briumvi®

Indication:

Treatment of adult patients with relapsing forms of multiple sclerosis (RMS) with active disease defined by clinical or imaging features.

ADTC Discussion points

Accepted for specialist use only.

ADTC Decision:

Routinely available in line with local or regional guidance

Local restrictions on use:

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cemiplimab

SMC2719

Libtayo®

Indication:

monotherapy for the treatment of adult patients with recurrent or metastatic cervical cancer and disease progression on or after platinum-based chemotherapy.

ADTC Discussion points

Referred to RCAG for expert 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:

28/04/2025

Local restrictions on use:

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dasatinib

NCMAG116

Indication:

Treatment of adult patients with newly diagnosed Philadelphia chromosome positive (Ph+) acute lymphoblastic leukaemia (ALL) integrated with chemotherapy

ADTC Discussion points

Add to Total Formulary

ADTC Decision:

Routinely available in line with local or regional guidance

Local restrictions on use:

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dasatinib

NCMAG117

Indication:

Dasatinib for the treatment of adult patients with Philadelphia chromosome positive (Ph+) acute lymphoblastic leukaemia (ALL) with resistance or intolerance to prior therapy

ADTC Discussion points

Add to Total Formulary

ADTC Decision:

Routinely available in line with local or regional guidance

Local restrictions on use:

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durvalumab

SMC2734

Imfinzi®

Indication:

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).

ADTC Discussion points

Referred to RCAG for expert 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:

28/04/2025

Local restrictions on use:

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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

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:

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olaparib

SMC2737

Lynparza®

Indication:

Monotherapy for the treatment of adult patients with germline BRCA1/2-mutations, who have HER2 negative locally advanced or metastatic breast cancer. Patients should have previously been treated with an anthracycline and a taxane in the (neo)adjuvant or metastatic setting unless patients were not suitable for these treatments. Patients with hormone receptor (HR)-positive breast cancer should also have progressed on or after prior endocrine therapy, or be considered unsuitable for endocrine therapy.

ADTC Discussion points

Referred to RCAG for expert 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:
28/04/2025

Local restrictions on use:

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pembrolizumab

SMC 2689

Keytruda

Indication:

As monotherapy for the adjuvant treatment of adults with non-small cell lung carcinoma who are at high risk of recurrence following complete resection and 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:
28/04/2025

Local restrictions on use:

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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:
28/04/2025

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

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:

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

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:

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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:

28/04/2025

Local restrictions on use:

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trametinib

NCMAG118

Indication:

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

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:

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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:

28/04/2025

Local restrictions on use:

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bictegravir, emtricitabine, tenofovir alafenamide

SMC2760

Biktarvy®

Indication:

treatment of human immunodeficiency virus-1 (HIV-1) infection in paediatric patients at least 2 years of age and weighing at least 14 kg to less than 25 kg without present or past evidence of viral resistance to the integrase inhibitor class, emtricitabine or tenofovir.

ADTC Discussion points

ADTC Decision:

Not routinely available as not recommended for use in NHSScotland

Local restrictions on use:

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rozanolixizumab

SMC2761

Rystiggo®

Indication:

Add-on to standard therapy for the treatment of generalised myasthenia gravis (gMG) in adult patients who are anti-acetylcholine receptor (AChR) or anti-muscle-specific tyrosine kinase (MuSK) antibody positive

ADTC Discussion points

ADTC Decision:

Not routinely available as not recommended for use in NHSScotland

Local restrictions on use:

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lecanemab

SMC2700

Leqembi®

Indication:

Treatment of mild cognitive impairment and mild dementia due to Alzheimer's disease in adult patients that are apolipoprotein E ε 4 (ApoEε4) heterozygotes or non-carriers.

ADTC Discussion points

ADTC Decision:

Not routinely available as not recommended for use in NHSScotland

Local restrictions on use:

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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:

28/04/2025

Local restrictions on use:

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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

Awaiting further advice from RCAG.

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:

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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:

28/04/2025

Local restrictions on use:

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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:

28/04/2025

Local restrictions on use:

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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:

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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:

28/04/2025

Local restrictions on use:

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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:

28/04/2025

Local restrictions on use:

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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

Referred to RCAG for 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:

28/04/2025

Local restrictions on use:

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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:

28/04/2025

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 formulary 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:

28/04/2025

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.

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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:

28/04/2025

Local restrictions on use:

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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:

28/04/2025

Local restrictions on use:

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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:

28/04/2025

Local restrictions on use:

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fosdenopterin

SMC2624

Nulibry®

Indication:

Treatment of patients with molybdenum cofactor deficiency (MoCD) Type A

ADTC Discussion points

Available via the Ultra Orphan Pathway with a final assessment by SMC following 3 years of data collection. Appropriate paperwork needs completing before prescribing to ensure registration on the national risk sharing scheme.

ADTC Decision:

Routinely available in line with national guidance

Local restrictions on use:

Managed via the Inherited Metabolic Disorders (IMD) Service.

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pegunigalsidase alfa

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:

28/04/2025

Local restrictions on use: