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 prefere

'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 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 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 ,
 - o whether it is as good or better than medicines the NHS already uses to treat the medical condition, and
 - o 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 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 NHSGGC?

- 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 medicines to their formulary and advise the ADTC. Sometimes it is agreed that established medicines are a better choice than new medicines.

Medicine	Condition being treated	NHSGGC Decision	Date of decision

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Treatment of adult patients with diffuse large B-cell lymphoma (DLBCL) and high-grade B-cell lymphoma (HGBL) that relapses within 12 months	Not routinely available as local implementation plans are being developed or ADTC is waiting for	06/10/2025
from completion of, or is refractory to, first-line chemoimmunotherapy.	further advice from local clinical experts - Decision expected by:	
	16/02/2026	
in combination with bortezomib and dexamethasone for the treatment of adult patients with multiple myeloma who have received at least	Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical	06/10/2025
опе рпог шегару.	experts - Decision expected by:	
	08/12/2025	
in combination with pomalidomide and o dexamethasone for the treatment of adult patients with multiple myeloma who have received at least	Not routinely available as not recommended for use in NHSScotland	06/10/2025
one prior therapy including lenalidomide.		
Treatment of adult patients with advanced renal cell carcinoma (RCC) whose disease has progressed on or after treatment with a	Not routinely available as not recommended for use in NHSScotland	06/10/2025
programmed death receptor-1 (PD-1) /		
vascular endothelial growth factor tyrosine kinase inhibitor (VEGF-TKI).		
	lymphoma (DLBCL) and high-grade B-cell lymphoma (HGBL) that relapses within 12 months from completion of, or is refractory to, first-line chemoimmunotherapy. in combination with bortezomib and dexamethasone for the treatment of adult patients with multiple myeloma who have received at least one prior therapy. in combination with pomalidomide and dexamethasone for the treatment of adult patients with multiple myeloma who have received at least one prior therapy including lenalidomide. Treatment of adult patients with advanced renal cell carcinoma (RCC) whose disease has progressed on or after treatment with a programmed death receptor-1 (PD-1) / programmed death ligand (PD-L1) inhibitor and a vascular endothelial growth factor tyrosine kinase	lymphoma (DLBCL) and high-grade B-cell lymphoma (HGBL) that relapses within 12 months from completion of, or is refractory to, first-line chemoimmunotherapy. in combination with bortezomib and dexamethasone for the treatment of adult patients with multiple myeloma who have received at least one prior therapy. in combination with pomalidomide and dexamethasone for the treatment of adult patients with multiple myeloma who have received at least one prior therapy including lenalidomide. Treatment of adult patients with advanced renal cell carcinoma (RCC) whose disease has progressed on or after treatment with a programmed death ligand (PD-L1) inhibitor and a vascular endothelial growth factor tyrosine kinase

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blinatumomab	Treatment of adult patients with Philadelphia chromosome negative CD19-positive B-cell precursor acute lymphoblastic leukaemia (ALL) in	Not routinely available as local implementation plans are being developed or ADTC is waiting for	06/10/2025
Blincyto®	the consolidation phase.	further advice from local clinical experts - Decision expected by:	
SMC2808		08/12/2025	
brentuximab vedotin	Adult patients with previously untreated CD30+ Stage III or IV Hodgkin lymphoma (HL) in combination with doxorubicin, vinblastine and	Routinely available in line with local or regional guidance	06/10/2025
Adcetris®	dacarbazine (AVD).		
SMC2762			
cabozantinib	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:	06/10/2025
SMC2754		08/12/2025	
capivasertib	in combination with fulvestrant for the treatment of adult patients with hormone receptor (HR) positive, human epidermal growth factor receptor 2 (HER2)	Not routinely available as not recommended for use in NHSScotland	06/10/2025
Truqap	negative (defined as IHC 0 or 1+, or IHC 2+/ISH-) locally advanced or metastatic breast cancer with	Micostiana	
SMC2823	one or more PIK3CA/AKT1/PTEN-alterations following recurrence or progression on or after an endocrine-based regimen.		

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
durvalumab	in combination with carboplatin and paclitaxel for the first-line treatment of adults with primary advanced or recurrent endometrial cancer who are	Not routinely available as local implementation plans are being developed or ADTC is waiting for	06/10/2025
Imfinzi	candidates for systemic therapy, followed by maintenance treatment with:	further advice from local clinical experts - Decision expected by:	
SMC2797	•đurvalumab as monotherapy in endometrial cancer that is mismatch repair deficient (dMMR) •đurvalumab in combination with olaparib in endometrial cancer that is mismatch repair proficient (pMMR).	08/12/2025	
encorafenib	In combination with binimetinib for the treatment of adult patients with advanced non-small cell lung cancer with a BRAF V600E mutation.	Not routinely available as not recommended for use in NHSScotland	06/10/2025
Braftovi®			
SMC2865			
eplontersen	Treatment of hereditary transthyretin-mediated amyloidosis (ATTRv amyloidosis) in adult patients with Stage 1 and 2 polyneuropathy.	Not routinely available as local implementation plans are being developed or ADTC is waiting for	06/10/2025
Wainzua®	mar otago r ana 2 porynouropaary.	further advice from local clinical experts - Decision expected by:	
SMC2755		20/04/2026	
fruquintinib	treatment of adult patients with metastatic colorectal cancer (mCRC) who have been previously treated with available therapies,	Not routinely available as local implementation plans are being developed or ADTC is waiting for	06/10/2025
Fruzaqla	including fluoropyrimidine-, oxaliplatin-, and	further advice from local clinical	
SMC2858	irinotecan-based chemotherapy, with or without an anti-VEGF therapy, and if RAS wildtype and medically appropriate, an anti-EGFR therapy	experts - Decision expected by: 08/12/2025	

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
futibatinib	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	06/10/2025
Lytgobi®		further advice from local clinical experts - Decision expected by:	
SMC2661		08/12/2025	
linzagolix	in adult women of reproductive age for symptomatic treatment of endometriosis in women with a history of previous medical or surgical	Routinely available in line with local or regional guidance	06/10/2025
Yselty	treatment for their endometriosis		
SMC2841			
nivolumab	in combination with platinum-based chemotherapy as neoadjuvant treatment, and then continued as	Not routinely available as not recommended for use in NHSScotland	06/10/2025
Opdivo	monotherapy as adjuvant treatment after surgical resection, for the treatment of adults with resectable (tumours ≥4 cm or node positive) non-	NI 100cottanu	
SMC2874	small cell lung cancer and no known EGFR mutations or ALK rearrangements.		
nusinersen	for the treatment of 5q spinal muscular atrophy	Not routinely available as local clinical experts do not wish to add	06/10/2025
Spinraza		the medicine to the Formulary at this time or there is a local preference for alternative	
SMC2805		p. c. si citos for alternative	

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
osimertinib	In combination with pemetrexed and platinum- based chemotherapy for the first-line treatment of adult patients with advanced non-small cell lung	Not routinely available as local implementation plans are being developed or ADTC is waiting for	06/10/2025
Tagrisso®	cancer (NSCLC) whose tumours have epidermal	further advice from local clinical experts - Decision expected by: 08/12/2025	
SMC2736			
pembrolizumab	In combination with carboplatin and paclitaxel, for the first-line treatment of primary advanced or recurrent endometrial carcinoma in adults.	Routinely available in line with local or regional guidance	06/10/2025
Keytruda®			
SMC2767			
ripretinib	Treatment of adult patients with advanced gastrointestinal stromal tumour (GIST) who have received prior treatment with three or more kinase inhibitors, including imatinib.	Not routinely available as local implementation plans are being developed or ADTC is waiting for	06/10/2025
Qinlock®		further advice from local clinical experts - Decision expected by:	
SMC2821		08/12/2025	
rucaparib	Monotherapy for the maintenance treatment of adult patients with advanced (FIGO Stages III and IV) high-grade epithelial ovarian, fallopian tube, or	Not routinely available as local implementation plans are being developed or ADTC is waiting for	06/10/2025
Rubraca®	primary peritoneal cancer who are in response (complete or partial) following completion of first-	further advice from local clinical experts - Decision expected by:	
SMC2799	line platinum-based chemotherapy.	08/12/2025	

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
Semaglutide	An adjunct to a reduced-calorie diet and increased physical activity for weight management, including weight loss and weight maintenance, in adults with	Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical	06/10/2025
Wegovy	an initial Body Mass Index (BMI) of •≧30kg/m2 (obesity), or	experts - Decision expected by:	
SMC2497	•≥27kg/m2 to <30kg/m2 (overweight) in the presence of at least one weight-related comorbidity.	16/02/2026	
tirzepatide	For weight management, including weight loss and weight maintenance, as an adjunct to a reduced-calorie diet and increased physical activity in adults	Not routinely available as local implementation plans are being developed or ADTC is waiting for	06/10/2025
Mounjaro®	with an initial Body Mass Index (BMI) of ≥30 kg/m2 (obesity) or ≥27 kg/m2 to <30 kg/m2 (overweight)	further advice from local clinical experts - Decision expected by:	
SMC2653	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).	16/02/2026	
zanubrutinib	Monotherapy for the treatment of adult patients with mantle cell lymphoma (MCL) who have received at least one prior therapy	Not routinely available as local implementation plans are being developed or ADTC is waiting for	06/10/2025
Brukinsa®	,	further advice from local clinical experts - Decision expected by:	
SMC2819		08/12/2025	

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