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
 - o 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 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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Abemaciclib	in combination with endocrine therapy for the	Routinely available in line with local	12/12/2022
tablets	adjuvant treatment of adult patients with hormone receptor (HR)-positive, human epidermal growth	or regional guidance	
Verzenios®	factor receptor 2 (HER2)-negative, node-positive early breast cancer at high risk of recurrence. In		
SMC2494	pre- or perimenopausal women, aromatase inhibitor endocrine therapy should be combined with a luteinising hormone-releasing hormone (LHRH) agonist.		
Alpelisib	In combination with fulvestrant for the treatment of	Not routinely available as not	12/12/2022
tablets	postmenopausal women, and men, with hormone receptor (HR)-positive, human epidermal growth	recommended for use in NHSScotland	
Piqray®	factor receptor 2 (HER2)-negative, locally advanced or metastatic breast cancer with a		
SMC2481	PIK3CA mutation after disease progression following endocrine-based therapy.		
Asciminib	Treatment of adult patients with Philadelphia	Routinely available in line with local	12/12/2022
tablet	chromosome-positive chronic myeloid leukaemia in chronic phase (Ph+ CML-CP), previously treated	or regional guidance	
Scemblix®	with two or more tyrosine kinase inhibitors (TKIs), and without a known T315I mutation.		
SMC2482			
Belimumab	Add-on therapy in adult patients with active,	Routinely available in line with	12/12/2022
pre-filled pen/ syringe	autoantibody-positive systemic lupus erythematosus (SLE) with a high degree of disease	national guidance	
Benlysta®	activity (e.g. positive anti-dsDNA and low complement) despite standard therapy.		
SMC2530	completion, adopted diamana indiapy.		

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
Belimumab	Add-on therapy in patients aged 5 years and older with active, autoantibody-positive systemic lupus erythematosus (SLE) with a high degree of disease activity (e.g., positive anti-dsDNA and low complement) despite standard therapy.	Routinely available in line with national guidance	12/12/2022
infusion			
Benlysta®			
SMC2477			
Brolucizumab injection	In adults for the treatment of visual impairment due to diabetic macular oedema.	Routinely available in line with local or regional guidance	12/12/2022
Beovu®			
SMC2508		12/12/2022	
Buprenorphine with Naloxone sublingual tablet	Substitution treatment for opioid drug dependence, within a framework of medical, social and psychological treatment. Treatment is intended for use in adults and adolescents over 15 years of age who have agreed to be treated for addiction.	Not routinely available as local clinical experts do not wish to add the medicine to the Formulary at this time or there is a local preference for alternative	12/12/2022
Zubsolv®			
SMC2123			
Esketamine	Co-administered with oral antidepressant therapy, in adults with a moderate to severe episode of Major Depressive Disorder, as acute short-term treatment, for the rapid reduction of depressive symptoms, which according to clinical judgement constitute a psychiatric emergency.	Not routinely available as not recommended for use in NHSScotland	12/12/2022
nasal spray			
Spravato®			
SMC2539			

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
Faricimab injection	Treatment of adult patients with visual impairment due to diabetic macular oedema (DMO)	Routinely available in line with national guidance	12/12/2022
Vabysmo®			
SMC2499			
Faricimab injection	Treatment of adult patients with neovascular (wet) age-related macular degeneration (nAMD).	Routinely available in line with national guidance	12/12/2022
Vabysmo®			
SMC2512			
Finerenone tablet	Treatment of chronic kidney disease (stage 3 and 4 with albuminuria) associated with type 2 diabetes in adults.	Routinely available in line with national guidance	12/12/2022
Kerendia®			
SMC2486			
Levofloxacin with Dexamethasone eye drops	Prevention and treatment of inflammation, and prevention of infection associated with cataract surgery in adults. Consideration should be given to official guidance on the appropriate use of antibacterial agents.	Routinely available in line with national guidance	12/12/2022
Ducressa®			
SMC2511			

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
Micronised Progesterone capsule	Adjunctive use with oestrogen in post-menopausal women with an intact uterus, as hormone replacement therapy (HRT).	Routinely available in line with national guidance	12/12/2022
Utrogestan®			
SMC2529			
Sodium zirconium cyclosilicate suspension	Treatment of hyperkalaemia in adult patients	Routinely available in line with national guidance	12/12/2022
Lokelma®			
SMC2515			
Upadacitinib	Treatment of active ankylosing spondylitis (AS) in adult patients who have responded inadequately to	Routinely available in line with national guidance	12/12/2022
tablet Rinvoq®	conventional therapy.	G	
SMC2480			
Upadacitinib tablet	Treatment of moderate to severe active rheumatoic arthritis (RA) in adult patients who have responded inadequately to, or who are intolerant to one or more disease-modifying anti-rheumatic drugs (DMARDs). Upadacitinib may be used as		12/12/2022
Rinvoq®			
SMC2495	monotherapy or in combination with methotrexate.		

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
Venetoclax	In combination with low-dose cytarabine for the treatment of adult patients with newly-diagnosed	Not routinely available as not recommended for use in	12/12/2022
tablet	acute myeloid leukaemia (AML) who are ineligible for intensive chemotherapy.	NHSScotland	
Venclyxto®			
SMC2509			
Zanubrutinib	Monotherapy for the treatment of adult patients	Routinely available in line with local	12/12/2022
capsule	with Waldenström's macroglobulinaemia (WM) who have received at least one prior therapy, or in	or regional guidance	
Brukinsa®	first line treatment for patients unsuitable for chemo-immunotherapy.		
SMC2528	• •		

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