ADTC(M) 19/05
Minutes: 60-76

NHS GREATER GLASGOW AND CLYDE

Minutes of a Meeting of the
Area Drugs and Therapeutics Committee
held in the Board Room, JB Russell House
on Monday 7th October 2019

P R E S E N T

Dr Scott Muir (in the Chair)

Mrs Alison Campbell	Ms Yvonne Clark
Dr Andrew Fitchett	Mr Roy Foot
Dr Roger Hardman	Dr Alister Maclaren
Mr Fergus Maclean	Dr Kay Mcallister
Mrs Elaine McIvor	Mrs Aileen Muir
Dr Judith Simpson	Dr Alastair Taylor
Mrs Audrey Thompson	Ms Anne Thomson

I N A T T E N D A N C E

Ms Gillian Duncan	Corporate Services
Ms Kathrin Greschner	Medicines Information Team

ACTION BY

60. Chairman's Statement

Dr Muir reminded Members that they should make relevant declarations of interest in line with Board policy.

61. Apologies and Welcome

Apologies for absence were recorded on behalf of Mr Alexander Crighton, Dr G Forrest, Mrs Linda Hillan, Prof Gerard McKay, Ms Lynne Watret and Dr Elizabeth White.

62. Minutes of Previous Meeting

The minute was approved as a correct record subject to the following amendments:

- The date on the header needed to be updated to reflect that this was the minute of the August meeting.
- Item 50. Appendix 1 had not been circulated with the papers. Mr Foot would provide this. R Foot

ACTION BY

- Item 55. The Prescribing Interface Committee update had not been recorded.

- Item 55 (b). A written report on the Medicines Utilisation Sub Committee had been provided.

63. Matters Arising

(1) Relapsing-Remitting Multiple Sclerosis (RR-MS) Clinical Guideline

Ms Muir reported that this had been approved by the Prescribing Management Group subject to clinical approval and a letter outlining this had been sent to the Chair of the ADTC.

Mr Foot advised that this would be discussed at the Medicines Utilisation Sub Committee meeting in November when final clarifications would be made per the PMG discussion then this could be added to the Formulary.

It was agreed that the Clinical Effectiveness Team would support data collection and bring this back to the February PMG. Dr Muir would write to Stewart Webb in this regard. S Muir

It was noted that ocrelizumab would be further discussed as there was now an indication for its use for primary progressive multiple sclerosis and a guideline for that would need to be developed.

64. New Medicines for Consideration

(1) 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.

Summarised decisions would be provided as an Appendix to the minute.

(2) Medicines for Cystic Fibrosis: Orkambi® & Symkevi®

The letter which set out the Scottish Government intentions and arrangements was noted by the Committee.

There was no requirement to add this to the Formulary.

65. Medicines Utilisation Sub Committee

Formulary Appeals

(a) Sacubitril-Valsartan

ACTION BY

This was supported subject to clarification in the Formulary on who can initiate the prescribing.

(b) Levonorgestrel IUD

Mr Foot would link with Dr Mcallister on the revised wording for the Formulary which would clarify that the intended primary use would determine which preparation should be used. — R Foot/ K Mcallister

This was approved by the Committee.

(c) Paravit CF®

This was approved by the Committee.

66. Prescribing Interface Sub Committee

The Committee noted the update from the Prescribing Interface Sub Committee.

67. Therapeutics Sub Committee

It was noted that the Therapeutics Sub Committee was due to update its terms of reference and these would come to a future meeting of the ADTC.

68. Safer Use of Medicines Sub Committee

It was reported that the supplier decision on HEPMA had been reached and the business case was going through due process. It was agreed that the business case would come to a future ADTC meeting.

It was reported that there were ongoing issues with Immediate Discharge Letter information and although the new system should be more intuitive these concerns needed to be identified and addressed.

This would be further discussed at the next meeting.

69. Other ADTC Sub Committee Updates

(a) Communications Sub-Committee

No update was provided.

(b) Antimicrobial Utilisation Sub-Committee

This was rolled over to the next meeting.

70. Combined Oral Contraception(COC) tailored use regimens

The Committee supported the recommendation in the report provided by Dr McAllister.

ACTION BY

71. Update on Single National Formulary

Noted.

72. Unlicensed Medicines Policy (Acute Sector)

Kathrin Greschner, Medicines Information Team, updated the Committee on the main changes that had been made to the protocol.

Following discussion of these changes, the Committee ratified the protocol.

73. ADTC Collaborative Update

Noted.

74. PMG Update

This had been picked up in earlier discussions.

75. Any Other Business
Request for Medicines Not Routinely Available: Choice of Process (Which Form Flowchart)

Mr Foot drew the Members' attention to the flowchart at Item 13 of the papers and asked for any comments to be sent to him.

76. Date of Next Meeting

Monday 9th December 2019, 2pm, Boardroom, JB Russell House

Appendix 1:NHS Greater Glasgow and Clyde New Medicines Decisions

Date of ADTC Decisions: **07/10/2019**

Dapagliflozin

SMC2185

Forxiga® tablets

Indication:

In adults for the treatment of insufficiently controlled type 1 diabetes mellitus as an adjunct to insulin in patients with BMI ≥27kg/m2, when insulin alone does not provide adequate glycaemic control despite optimal insulin therapy.

ADTC Discussion points

Use of this medicine in type 1 diabetes is likely to be used in a distinct patient population who have a BMI >27 where there is some off-label metformin use.

ADTC Decision:

Routinely available in line with national guidance

Local restrictions on use:

Use for this indication is restricted to initiation by, or on the advice of, consultant diabetologists for use in patients with BMI ≥27kg/m2

Ospemifene

SMC2170

Senshio® tablets

Indication:

Treatment of moderate to severe symptomatic vulvar and vaginal atrophy (VVA) in post-menopausal women who are not candidates for local vaginal oestrogen therapy.

ADTC Discussion points

ADTC Decision:

Routinely available in line with national guidance

Local restrictions on use:

Restricted to initiation by, or on the advice of a specialist.

Dolutegravir + lamivudine

SMC2205

Dovato® tablet

Indication:

treatment of human immunodeficiency virus type 1 (HIV-1) infection in adults and adolescents above 12 years of age weighing at least 40kg, with no known or suspected resistance to the integrase inhibitor class, or lamivudine

ADTC Discussion points

New combination which is cost-neutral compared with separate components. Seen as a useful addition by the service. This will also be referred to Paediatric D&T for consideration in the Paediatric Formulary.

ADTC Decision:

Routinely available in line with national guidance

Local restrictions on use:

Restricted to use by HIV specialists

Axicabtagene ciloleucel

SMC2189

Yescarta® infusion

Indication:

Treatment of adult patients with relapsed or refractory diffuse large B cell lymphoma (DLBCL) and primary mediastinal large B cell lymphoma (PMBCL), after two or more lines of systemic therapy.

ADTC Discussion points

This is the second CAR-T treatment option for large B cell lymphoma in adults. Service development is currently ongoing.

ADTC Decision:

Routinely available in line with local or regional guidance

Local restrictions on use:

Restricted to specialist use only as part of thenational service. Patients must be identified via the national MDT.

Dacomitinib

SMC2184

Vizimpro® tablets

Indication:

Monotherapy, for the first-line treatment of adult patients with locally advanced or metastatic non-small cell lung cancer (NSCLC) with epidermal growth factor receptor (EGFR)-activating mutations.

ADTC Discussion points

This has been referred to RCAG for development of regional protocols.

ADTC Decision:

Routinely available in line with local or regional guidance

Local restrictions on use:

Restricted to specialist use in accordance with regional protocol.

Pembrolizumab

SMC2187

Keytruda® infusion

Indication:

In combination with carboplatin and either paclitaxel or nab-paclitaxel, for the first-line treatment of metastatic squamous non-small cell lung cancer (NSCLC) in adults.

ADTC Discussion points

This has been referred to RCAG for development of regional protocols.

ADTC Decision:

Routinely available in line with local or regional guidance

Local restrictions on use:

Restricted to specialist use in accordance with regional protocol.

Pembrolizumab

SMC2207

Keytruda® infusion

Indication:

In combination with pemetrexed and platinum chemotherapy, for the first-line treatment of metastatic non-squamous non-small cell lung carcinoma (NSCLC) in adults whose tumours have no EGFR or ALK positive mutations.

ADTC Discussion points

This has been referred to RCAG for development of regional protocols.

ADTC Decision:

Routinely available in line with local or regional guidance

Local restrictions on use:

Restricted to specialist use in accordance with regional protocols only in patients whose tumours express programmed death ligand 1 (PD-L1) with a <50% tumour proportion score (TPS), or in those whom it has not been possible to evaluate PD-L1 TPS. Treatment with pembrolizumab is subject to a two-year clinical stopping rule.

Tisagenlecleucel

SMC2200

Kymriah® infusion

Indication:

Adult patients with relapsed or refractory diffuse large B-cell lymphoma (DLBCL) after two or more lines of systemic therapy.

ADTC Discussion points

ADTC Decision:

Routinely available in line with local or regional guidance

Local restrictions on use:

Restricted to specialist use only as part of thenational service. Patients must be identified via the national MDT.

Triptorelin

SMC2186

Decapeptyl SR sustained-release injection

Indication:

As adjuvant treatment in combination with tamoxifen or an aromatase inhibitor, of endocrine responsive early stage breast cancer in women at high risk of recurrence who are confirmed as premenopausal after completion of chemotherapy.

ADTC Discussion points

This has been referred to RCAG for development of regional protocols.

ADTC Decision:

Routinely available in line with local or regional guidance

Local restrictions on use:

Restricted to specialist intiation in accordance with regional protocols

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Eculizumab

SMC2236

Soliris® infusion

Indication:

Treatment of adults with refractory generalised myasthenia gravis who are anti-acetylcholine receptor antibody-positive

ADTC Discussion points

ADTC Decision:

Not routinely available as not recommended for use in NHSScotland

Local restrictions on use:

Eribulin

SMC2231

Halaven® injection

Indication:

Treatment of adult patients with unresectable liposarcoma who have received prior anthracycline containing therapy (unless unsuitable) for advanced or metastatic disease.

ADTC Discussion points

ADTC Decision:

Not routinely available as not recommended for use in NHSScotland

Local restrictions on use:

Glibenclamide

SMC2237

Amglidia® oral suspension

Indication:

Treatment of neonatal diabetes mellitus, for use in newborns, infants and children.

ADTC Discussion points

ADTC Decision:

Not routinely available as not recommended for use in NHSScotland

Local restrictions on use:

Enzalutamide

SMC2195

Xtandi® capsules

Indication:

The treatment of adult men with high-risk non-metastatic castration-resistant prostate cancer (CRPC).

ADTC Discussion points

ADTC Decision:

Not routinely available as not recommended for use in NHSScotland

Local restrictions on use:

Melatonin

SMC2168

Slenyto® prolonged-release tablets

Indication:

Treatment of insomnia in children and adolescents aged 2 to 18 years with autism spectrum disorder and / or Smith-Magenis syndrome, where sleep hygiene measures have been insufficient.

ADTC Discussion points

ADTC Decision:

Not routinely available as not recommended for use in NHSScotland

Local restrictions on use:

Osimertinib

SMC2171

Tagrisso® tablet

Indication:

Monotherapy for the first-line treatment of adult patients with locally advanced or metastatic non-small cell lung cancer (NSCLC) with activating epidermal growth factor receptor (EGFR) mutations

ADTC Discussion points

ADTC Decision:

Not routinely available as not recommended for use in NHSScotland

Local restrictions on use:

Pertuzumab

SMC2197

Perjeta® infusion

Indication:

For use in combination with trastuzumab and chemotherapy in the adjuvant treatment of adult patients with HER2-positive early breast cancer at high risk of recurrence.

ADTC Discussion points

ADTC Decision:

Not routinely available as not recommended for use in NHSScotland

Local restrictions on use:

Tocilizumab

RoActemra® subcutaneous injection

Indication:

The treatment of Giant Cell Arteritis (GCA) in adult patients

ADTC Discussion points

ADTC were reassured that a diagnostic/management pathway for Giant Cell Arteritis was under review and agreed that it would be useful to defer addition to Formulary until this review was complete. The principle of restricting prescribing to consultants within rheumatology was supported.
Oct 2019: Following completion of protocol, this medicine was added to Formulary

ADTC Decision:

Routinely available in line with local or regional guidance

Local restrictions on use:

Use for the treatment of Giant Cell Arteritis (GCA) in adults is restricted to use in accordance with local guidelines and is subject to a 12-month clinical stopping rule.