

ADTC(M) 18/01  
Minutes: 01 - 13

NHS GREATER GLASGOW AND CLYDE

**Minutes of a Meeting of the  
Area Drugs and Therapeutics Committee  
held in the Boardroom, JB Russell House  
on Monday, 26<sup>th</sup> February 2018 at 2.00 p.m.**

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**P R E S E N T**

Dr S Muir (in the Chair)

Dr J Mackenzie	Mrs Y Semple
Dr A Taylor	Mr R Foot
Mrs A Campbell	Mrs Margaret Ryan
Dr J Burns	Mrs L Hillan
Dr G Forrest	Dr R Hardman
Dr K McAllister	Mr A Crichton
Dr A MacLaren	Mrs A Muir
Mrs J Watt	
Dr J Simpson	Dr A Seaton
Mr G Bryson	

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

Kim Donald	Secretariat Manager
Steven Fenton	SNF Project Manager
Anne Gilchrist	SNF Formulary Pharmacist
Simon Hurding	GP Advisor
Linsay McCallum	

**ACTION BY**

**01. CHAIR'S STATEMENT**

The Chair reminded Members that papers and proceedings relating to SMC advice were, in some cases, confidential and should not be disclosed before the relevant embargo dates stated in the agenda.

He also reminded Members that they should 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.

**02. APOLOGIES AND WELCOME**

Apologies for absence were intimated on behalf of Dr A Bowman, Prof G McKay and Dr C Harrow.

The Chair welcomed Mr G Bryson who will be replacing Mrs Margaret Ryan as Chair of the Therapeutics Sub-Committee.

**03. MINUTES**

The minutes of the meeting of the Area Drugs and Therapeutics Committee held on 11 December 2017 were approved as a correct record

**04. MATTERS ARISING**

PACS Tier 2

ADTC noted the response sent on behalf of GGC ADTC to express concerns regarding this new process. It was noted that other Boards had also raised concerns. Scottish Government has advised that the introduction is on hold pending further consultation; however, a revised implementation date of 1 June 2018 is expected.

Single National Formulary (SNF)

The Committee noted that members of the SNF team were joining the meeting later to give an update. In preparation for this, Mr Foot updated Members that the SNF team had held a few stakeholder events and workshops in 2017. There is still uncertainty on what the SNF will look like and how it will affect the GGC Formulary. There are ongoing discussions surrounding governance.

PMG Update

Mrs Campbell updated Members on recent PMG activities.

- PMG approved the financial projections for medicines expenditure for 2018/19 as an appropriate estimate of growth. This was separate from funding considerations which was a matter for the Board.
- Treatment of chronic Hepatitis C infection: The CMT have advised the MCN on the level of activity for 2018/19, taking account of revised ScotGov targets and financial considerations.
- FreeStyle Libre system - a national position statement from Diabetes MCNs to support fair and equitable implementation was considered. A final decision will be taken at CMT and outcome passed on to MCN for implementation.
- Low Molecular Weight Heparin: agreement to switch to biosimilar enoxaparin (Becat) for thromboprophylaxis

**05. PMG UPDATE**

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## 06 FORMULARY AND NEW DRUGS SUB-COMMITTEE

### (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.

Dr McAllister declared personal specific interest in Levonorgestrel (Kyleena) [1299/18] [Bayer]. Dr McAllister left the room when this medicine was being discussed.

*See Appendix 1 for summarised decisions*

## 07. FORMULARY APPEALS

### Moviprep® [Norgine Ltd.]

This appeal came from Dr Jack Winter, consultant gastroenterologist and clinical lead for endoscopy in North Glasgow. Previous appeals for Moviprep® have been presented to ADTC in the past when it cost significantly more than KleenPrep®. Moviprep® is now available at a lower acquisition cost to KleenPrep® and has a lower volume requirement for administration. The appeal is supported by Dr Winter's colleagues in South Glasgow and Clyde.

#### DECIDED:

The Committee agreed to support the request for Moviprep® to be added to the Formulary (Preferred List) and KleenPrep® would be removed from Formulary.

### Edoxaban (Lixiana) [Daichi Sankyo]

In light of the revised Atrial Fibrillation (AF) guidelines The NHSGGC Heart MCN has requested that edoxaban becomes the preferred DOAC of choice for AF requiring it to be moved to the preferred list from the Total Formulary

#### DECIDED:

The Committee agreed that edoxaban be moved to the preferred list for this indication.

## 08. FORMULARY & NEW DRUGS SUBCOMMITTEE

### Annual Report

- The Chair of the Formulary & New Drugs Sub-committee presented the annual report (Jan-Dec 2017) from the FND Sub-Committee. It was noted that the sub-committee has welcomed new members in 2017. The SMC has issued advice on 97 medicines/indications in 2017 of which 61% were accepted +/- restrictions and 39% were not recommended of which 25 (26%) were non-submissions.

- Prescribing Notes continue to be used to further clarify the place in therapy for new medicines
- The development of the Single National Formulary will have a bearing on the future development of the local Formulary.

The report was noted.

## 09. MEDICINES UTILISATION SUB-COMMITTEE

### Six Monthly Report

Mrs Semple presented a Six Monthly Report providing information for the Committee on the work undertaken by the Sub-Committee in the last six months. It was noted that Dr K O'Neill had resigned his role as Chair and that Mr Foot had stepped in to cover the role while nominations were being considered. Fifteen guidelines/protocols have been reviewed during the last six months. It was noted that an increasing number of guidelines are associated with complex implementation. ADTC agreed that MU should develop criteria to determine which guidelines could be supported through implementation by MU including an initial screening step. This will be piloted and incorporated into the framework if appropriate.

The committee acknowledged the breadth of work undertaken and / or supported by the clinical effectiveness team. Projects highlighted had a focus on safety (IV iron), process (home delivery medicines) and real world data (ivacaftor in cystic fibrosis). The Committee were invited to offer suggestions for further work. A summary of the medicines education workplan was provided which includes update to DOAC FAQ and patient booklet (as noted in Dec) plus updates for Parkinson's disease and QT prolongation information and a new bulletin covering diabetes.

It was noted the two yearly updates were now recommended for the Adult Therapeutics Handbook in line with guidelines. Approximately 70% of the 248 guidelines had been reviewed in the last 12 months. The GGC Medicines app was recently updated to work effectively with common mobile devices. User evaluation is planned.

The report was noted.

## 10. OTHER ADTC SUB-COMMITTEES

- Communication Sub Committee  
No update.
- Antimicrobial Sub Committee  
Dr Seaton highlighted the ongoing critical drug shortages to the Committee and noted that these are unpredictable and time consuming for the team.. Memos are issued to advise of any changes in guidance. This is expected to be an ongoing challenge.
- Therapeutics Sub Committee  
It was noted that Mr G Bryson was now chair of this group.

## 11. UPDATE RE THE SCOTTISH NATIONAL FORMULARY

The Committee welcomed Dr S Hurding, Ms A Gilchrist and Mr S Fenton from the SNF team. Mr Fenton presented an update of the SNF to the Committee which summarised:

- Governance
- Development of chapters
- Digital interface
- Communication

The SNF work is being led by the Effective Prescribing and Therapeutics Branch of the Scottish Government. A Governance Board, chaired by Dr Iain Wallace (MD, NHS Lanarkshire) will oversee this work and report to the Sustainability and Value Programme Board. Four chapters have been prioritised for early development (gastroenterology, respiratory, infections, endocrine). Dr Robert Boulton-Jones and Dr Andrew Seaton (NHS GGC) will chair the Gastroenterology and Infections sections respectively. For infection, Dr Seaton advised there was an aspiration to streamline clinical practice. A list of preferred products will emerge and the number included will vary by topic as appropriate. The IT infrastructure to support implementation is being developed in parallel. The SNF is being developed as a project: a longer term 'host' is yet to be determined. Options are in development for how to manage / incorporate advice from SMC on new medicines / indications.

The Committee asked for clarity regarding the membership of the chapter groups, and the Governance Board. Concern was raised regarding industry membership. The Committee also highlighted the uncertainty that the SNF places on local decision making.

There was a discussion surrounding ongoing maintenance of the SNF when the project has completed as well as Primary Care IT updates and ensuring that the SNF is compatible with various networks.

Dr Hurding noted that the SNF is still in development, that there will be a period of transition but for now it is business as usual for the ADTCs and their sub-committees. Mr Fenton will circulate memberships of groups as well as the SNF Governance Board terms of reference when approved. The Chair thanked the SNF team for attending and encouraged further interaction as the project develops.

## 12. ADTC COLLABERATIVE REPORT

### (a) ADTCC Update

An ADTCC update was provided, highlighting the upcoming National Chairs meeting scheduled in March 2018. Mr Foot noted that the ADTCC is considering producing a generic terms of reference that boards could adapt. The Committee did not express a strong desire for this and noted that there are differences in how ADTCs function across Health Boards.

### (b) Abiraterone Interim Guidance

A HIS report was presented to Members noting that the Off-Label Cancer Medicines (OLCM) Short Life Working Group are developing guiding principles and frameworks to be able to assess evidence and develop guidelines for off-label use of cancer medicines. A group convened by the OLCM group has issued interim abiraterone guidance. This recommends that until SMC advice

and national guidance on the off label use is available, access to abiraterone in this indication should remain subject to Peer Approved Clinical System (PACS) Tier 2 (for the licensed indication) or individual off label request process (off label use). While each case will be subject to individual local review the group recommends that only cases of high risk and low risk metastatic prostate cancer where there is an absolute contraindication to docetaxel should be considered.

(c) National Palliative Care Guidelines

Mr Foot highlighted that HIS is in the process of reviewing the guideline and that the updated guideline will be shared with the Medicines Utilisation Sub-Committee when available. It was noted that this is a very useful resource and that comments/suggestions to the national group should be pragmatic, given the workload involved in development and review.

**13. ANY OTHER BUSINESS**

Mrs Campbell shared a proposal from the Acute Services Prescribing Management Group regarding an initiative that was being considered as part of the Acute Division Medicines Efficiencies Plan. This aims to target a short list of high cost liquids and limit use by supporting the practice of crushing tablets or opening capsules. ADTC were asked for their support as this practice renders the products outside their licence. ADTC supported with the proviso that criteria for inclusion on the target list were developed: to include cost differential between solid dosage form and liquid and evidence for the alternate administration.. Mrs Campbell agreed to email Members with the top ten target list and criteria for inclusion

The Chair also noted Dr Ryan's pending retirement and on behalf of the Committee thanked her for her contribution to the ADTC.

**14. DATE OF NEXT MEETING**

Monday, 23 April 2018 – Boardroom, JB Russell House, Gartnavel Royal Hospital