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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anastrazole	primary prevention of breast cancer in post- menopausal people at moderate or high risk	Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by:	17/02/2025
NCMAG113		28/04/2025	
axicabtagene ciloleucel	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	17/02/2025
Yescarta®	from completion of, or is refractory to, first-line chemoimmunotherapy.	further advice from local clinical experts - Decision expected by:	
SMC2695		28/04/2025	
bictegravir, emtricitabine, tenofovir alafenamide	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	recommended for use in	17/02/2025
Biktarvy®	to the integrase inhibitor class, emtricitabine or tenofovir.		
SMC2760			

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
cabotegravir	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	Routinely available in line with national guidance	17/02/2025
Apretude®	adults and adolescents, weighing at least 35 kg. tablets: in combination with safer sex practices for		
SMC2718	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.		
cemiplimab	monotherapy for the treatment of adult patients with recurrent or metastatic cervical cancer and disease progression on or after platinum-based	Not routinely available as local implementation plans are being developed or ADTC is waiting for	17/02/2025
Libtayo®	chemotherapy.	further advice from local clinical experts - Decision expected by:	
SMC2719		28/04/2025	
ciclosporin	Treatment of moderate-to-severe Dry Eye Disease (keratoconjunctivitis sicca) in adult patients who have not responded adequately to artificial tears.	Routinely available in line with local or regional guidance	17/02/2025
Cequa®			
SMC2739			

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
crovalimab	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	Not routinely available as local implementation plans are being developed or ADTC is waiting for	17/02/2025
Piasky®	nocturnal haemoglobinuria (PNH):	further advice from local clinical experts - Decision expected by:	
SMC2728	 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. 	28/04/2025	
danicopan	Add-on to ravulizumab or eculizumab for the treatment of adult patients with paroxysmal nocturnal haemoglobinuria (PNH) who have	Not routinely available as local implementation plans are being developed or ADTC is waiting for	17/02/2025
Voydeya®	residual haemolytic anaemia.	further advice from local clinical experts - Decision expected by:	
SMC2675		28/04/2025	
dasatinib	Treatment of adult patients with newly diagnosed Philadelphia chromosome positive (Ph+) acute lymphoblastic leukaemia (ALL) integrated with chemotherapy	Routinely available in line with local or regional guidance	17/02/2025
NCMAG116			
dasatinib	Dasatinib for the treatment of adult patients with Philadelphia chromosome positive (Ph+) acute lymphoblastic leukaemia (ALL) with resistance or intolerance to prior therapy	Routinely available in line with local or regional guidance	17/02/2025
NCMAG117			

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
durvalumab	In combination with etoposide and either carboplatin or cisplatin for the first-line treatment of adults with extensive-stage small cell lung cancer	Not routinely available as local implementation plans are being developed or ADTC is waiting for	17/02/2025
Imfinzi®	(ES-SCLC).	further advice from local clinical experts - Decision expected by:	
SMC2734		28/04/2025	
elranatamab	Monotherapy for the treatment of adult patients with relapsed and refractory multiple myeloma, who have received at least three prior therapies,	Not routinely available as local implementation plans are being developed or ADTC is waiting for	17/02/2025
Elrexfio®	including an immunomodulatory agent, a proteasome inhibitor, and an anti-CD38 antibody	further advice from local clinical experts - Decision expected by:	
SMC2669	and have demonstrated disease progression on the last therapy.	28/04/2025	
etranacogene dezaparvovec	treatment of severe and moderately severe haemophilia B (congenital factor IX deficiency) in adult patients without a history of factor IX	Not routinely available as local implementation plans are being developed or ADTC is waiting for	17/02/2025
Hemgenix®	inhibitors.	further advice from local clinical experts - Decision expected by:	
SMC2649		28/04/2025	
fenfluramine	Treatment of seizures associated with Lennox- Gastaut syndrome as an add-on therapy to other anti-epileptic medicines for patients 2 years of age	Routinely available in line with local or regional guidance	17/02/2025
Fintepla®	and older.		
SMC2723			

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
fosdenopterin	Treatment of patients with molybdenum cofactor deficiency (MoCD) Type A	Routinely available in line with national guidance	17/02/2025
Nulibry®			
SMC2624			
iptacopan	Monotherapy in the treatment of adult patients with paroxysmal nocturnal haemoglobinuria (PNH) who have haemolytic anaemia.	Not routinely available as local implementation plans are being developed or ADTC is waiting for	17/02/2025
Fabhalta®	navo naomolydo anaomia.	further advice from local clinical experts - Decision expected by:	
SMC2676		28/04/2025	
ivosidenib	Monotherapy for the treatment of adult patients with locally advanced or metastatic cholangiocarcinoma with an isocitrate	Routinely available in line with local or regional guidance	17/02/2025
Tibsovo®	dehydrogenase-1 (IDH1) R132 mutation who were previously treated by at least one prior line of		
SMC2664	systemic therapy.		
lebrikizumab	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	Not routinely available as local implementation plans are being developed or ADTC is waiting for	17/02/2025
Ebglyss®	for systemic therapy.	further advice from local clinical experts - Decision expected by:	
SMC2707		28/04/2025	

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Medicine C	Condition being treated	NHSGGC Decision	Date of decision
de	reatment of mild cognitive impairment and mild lementia due to Alzheimer's disease in adult patients that are apolipoprotein Ε ε 4 (ΑροΕε4)	Not routinely available as not recommended for use in NHSScotland	17/02/2025
•	neterozygotes or non-carriers.	Wilderiand	
SMC2700			
	reatment of moderate to severe symptoms of sterine fibroids in adult women of reproductive age.	Not routinely available as local implementation plans are being developed or ADTC is waiting for	17/02/2025
Yselty®		further advice from local clinical experts - Decision expected by:	
SMC2631		28/04/2025	
A:	Treatment of symptomatic (New York Heart Association, NYHA, class II to III) obstructive hypertrophic cardiomyopathy (oHCM) in adult	Not routinely available as local implementation plans are being developed or ADTC is waiting for	17/02/2025
	patients.	further advice from local clinical experts - Decision expected by:	
SMC2618		28/04/2025	
ac	Reduction of elevated intraocular pressure (IOP) in adult patients with primary open-angle glaucoma or ocular hypertension for whom monotherapy with a	Routinely available in line with national guidance	17/02/2025
Roclanda® pr	prostaglandin or netarsudil provides insufficient OP reduction.		
SMC2720	C		

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
olaparib	Monotherapy for the treatment of adult patients with germline BRCA1/2-mutations, who have HER2 negative locally advanced or metastatic	Not routinely available as local implementation plans are being developed or ADTC is waiting for	17/02/2025
Lynparza®	breast cancer. Patients should have previously been treated with an anthracycline and a taxane in	further advice from local clinical experts - Decision expected by:	
SMC2737	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.	28/04/2025	
pegunigalsidase alfa	for long-term enzyme replacement therapy in adult patients with a confirmed diagnosis of Fabry disease (deficiency of alpha-galactosidase).	Not routinely available as local implementation plans are being developed or ADTC is waiting for	17/02/2025
Elfabrio®	alcoace (deficiency of alpha galacteoladee).	further advice from local clinical experts - Decision expected by:	
SMC2665		28/04/2025	
pembrolizumab	As monotherapy for the adjuvant treatment of adults with non-small cell lung carcinoma who are at high risk of recurrence following complete	Not routinely available as local implementation plans are being developed or ADTC is waiting for	17/02/2025
Keytruda	resection and platinum-based chemotherapy.	further advice from local clinical experts - Decision expected by:	
SMC 2689		28/04/2025	

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
pembrolizumab	in combination with fluoropyrimidine and platinum- containing chemotherapy, for the first-line treatment of locally advanced unresectable or	Not routinely available as local implementation plans are being developed or ADTC is waiting for	17/02/2025
Keytruda®	metastatic human epidermal growth factor 2 (HER2)-negative gastric or gastro-oesophageal	further advice from local clinical experts - Decision expected by:	
SMC2660	junction adenocarcinoma in adults whose tumours express programmed death-ligand 1 (PD-L1) with a combined positive score (CPS) ≥ 1.	28/04/2025	
quizartinib	In combination with standard cytarabine and anthracycline induction and standard cytarabine consolidation chemotherapy, followed by	Not routinely available as local implementation plans are being developed or ADTC is waiting for	17/02/2025
Vanflyta®	quizartinib single-agent maintenance therapy for adult patients with newly diagnosed acute myeloid	further advice from local clinical experts - Decision expected by:	
SMC2699	leukaemia (AML) that is FLT3-ITD positive.	28/04/2025	
raloxifene	Primary prevention of breast cancer in post- menopausal people at moderate or high risk who are not suitable for on-label alternatives.	Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by:	17/02/2025
NCMAG114		28/04/2025	
relugolix, estradiol, norethisterone acetate	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.	Routinely available in line with local or regional guidance	17/02/2025
Ryeqo®			
SMC2666			

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
risankizumab	treatment of adult patients with moderately to severely active ulcerative colitis who have had an inadequate response to, lost response to, or were	Routinely available in line with local or regional guidance	17/02/2025
Skyrizi®	intolerant to conventional therapy or a biologic therapy		
SMC2686	шелару		
rozanolixizumab	Add-on to standard therapy for the treatment of generalised myasthenia gravis (gMG) in adult patients who are anti-acetylcholine receptor	Not routinely available as not recommended for use in NHSScotland	17/02/2025
Rystiggo®	(AChR) or anti-muscle-specific tyrosine kinase (MuSK) antibody positive	THE TOTAL PROPERTY OF THE PROP	
SMC2761	(MuSK) antibody positive		
Selinexor	In combination with bortezomib and dexamethasone for the treatment of adult patients with multiple myeloma who have received at least	Routinely available in line with local or regional guidance	17/02/2025
Nexpovio	one prior therapy.		
SMC 2674			
Selinexor	In combination with dexamethasone for the treatment of multiple myeloma in adult patients who have received at least four prior therapies and	Routinely available in line with local or regional guidance	17/02/2025
Nexpovio	whose disease is refractory to at least two proteasome inhibitors, two immunomodulatory		
SMC 2673	agents and an anti-CD38 monoclonal antibody, and who have demonstrated disease progression on the last therapy.		

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Condition being treated	NHSGGC Decision	Date of decision
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	17/02/2025
•≥27kg/m2 to <30kg/m2 (overweight) in the	28/04/2025	
Treatment of facial angiofibroma associated with tuberous sclerosis complex in adults and paediatric patients aged 6 years and older.	Routinely available in line with national guidance	17/02/2025
Primary prevention of breast cancer in people at moderate or high risk	Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by:	17/02/2025
	28/04/2025	
Monotherapy for the treatment of adult patients with relapsed and refractory multiple myeloma, who have received at least three prior therapies.	Not routinely available as local implementation plans are being developed or ADTC is waiting for	17/02/2025
including an immunomodulatory agent, a	further advice from local clinical	
and have demonstrated disease progression on the last therapy.	28/04/2025	
	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. Treatment of facial angiofibroma associated with tuberous sclerosis complex in adults and paediatric patients aged 6 years and older. Primary prevention of breast cancer in people at moderate or high risk 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	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. Treatment of facial angiofibroma associated with tuberous sclerosis complex in adults and paediatric patients aged 6 years and older. Primary prevention of breast cancer in people at moderate or high risk Primary prevention of breast cancer in people at moderate or high risk 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 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

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
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	17/02/2025
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).	28/04/2025	
trametinib	Treatment of low grade serous ovarian cancer after at least one line of platinum-based chemotherapy	Routinely available in line with local or regional guidance	17/02/2025
NCMAG118			
ublituximab	Treatment of adult patients with relapsing forms of multiple sclerosis (RMS) with active disease defined by clinical or imaging features.	Routinely available in line with local or regional guidance	17/02/2025
Briumvi®	, , , , , , , , , , , , , , , , , , , ,		
SMC2731			
vamorolone	Treatment of Duchenne muscular dystrophy (DMD) in patients aged 4 years and older.	Routinely available in line with national guidance	17/02/2025
Agamree®			
SMC2721			

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
vibegron	Symptomatic treatment of adult patients with overactive bladder (OAB) syndrome.	Not routinely available as local implementation plans are being developed or ADTC is waiting for	17/02/2025
Obgemsa®		further advice from local clinical experts - Decision expected by:	
SMC2696		28/04/2025	
zanubrutinib	Monotherapy for the treatment of adult patients with marginal zone lymphoma (MZL) who have received at least one prior anti-CD20-based	Not routinely available as local implementation plans are being developed or ADTC is waiting for	17/02/2025
Brukinsa®	therapy.	further advice from local clinical experts - Decision expected by:	
SMC2684		28/04/2025	

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