

# EAST LANCASHIRE HEALTH ECONOMY MEDICINES MANAGEMENT BOARD

#### MINUTES OF THE TEAMS MEETING 17th DECEMBER 2021

PRESENT:

Dr L Rogan (LR) Strategic Director of Medicines, Research and

Clinical Effectiveness NHS EL CCG

Dr S Ramtoola (SR) Consultant Physician, ELHT (Chairperson)

Mr V Goodey (VG)
Dr S Jackson (SJ)
Mr J Vaughan (JV)
Assistant Director of Pharmacy, Clin Service ELHT
Clinical Commissioning Group MM Lead, GP EL
Senior Medicines Commissioning Pharmacist

NHS EL/BwD

Ms F Iqbal (FI) Senior Pharmacist NHS BwD CCG
Mr U Akram (UA) Deputy Lead Pharmacist, LSCFT

IN ATTENDANCE:

Ms L Prince Medicines Management Technician, EL CCG

Chintan Sanghvi Consultant Ophthalmologists Lead Diabetic

Screening & DMO lead ELHT

Lateefah Khan Pharmacist, ELHT John Eatough Pharmacist, ELHT

M Aslam Clinical Pharmacist East Lancashire CCG

2021/143: APOLOGIES:

Ms Ana Batista Medicines Information Pharmacist ELHT

Neil Fletcher Director of Pharmacy ELHT

2021/144: DECLARATION OF INTEREST – None declared

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## 2021/145: MINUTES OF NOVEMBER Teams MEETING:

Amendment to Page 2 – 2021/133: Guidance/Position Statement will be prepared by Dermatology and Pharmacy department at ELHT, to determine place in therapy. VG to follow up with dermatology colleagues.

**2021/146: MATTERS ARISING:** 

**2021101b**: ELMMB Membership update – deferred to January 2022

**2021/123**: **Fidaxomicin** supply options: update — VG updated that antimicrobial pharmacists will be able to prescribe Fidaxomicin through the hospital. The supply will be required over 7 days and concerns were raised as to whether prescribing/supply would be available at weekends from the hospital. A clear pathway will be developed with input from antimicrobial pharmacists Sean Morgan [ELHT] and Jane Hylands [ELCCG].

**2021/133**: **Klisyri** – clear Guidance/Position Statement for GPs to be developed by dermatology and ELHT pharmacy.

**2021/137b**: **Trazodone 50mg/5ml oral solution** Currently RED traffic light, with a proposal to change to AMBER. It was agreed to consider switching to 'GREEN restricted' to facilitate lower dose requirements and for those with swallowing difficulties in a small cohort of patients. Item deferred to January meeting to allow for more data to be obtained.

**2021/147** item a: NEW PRODUCT REQUEST: Utrogestan (Oral 100mg Capsules) Requested by Mohammad Shakeel Aslam, GP Practice Clinical Pharmacist East Lancashire CCG, for adjunctive use with Oestrogen in postmenopausal women with an intact uterus as HRT.

Utrogestan is a natural micronized progesterone. Combined products have been in short supply recently. Many patients report preferring not to take the progesterone element of combined products which puts them at risk of endometrial cancer and have requested Utrogestan to be prescribed. LSCMMG are currently developing HRT guidelines that will be available in February 2022.

Resolved: Decision to add to formulary will be considered when HRT guidelines are available.

**2021/147** item b: NEW PRODUCT REQUEST: Oestrogel 17β-estradiol Pump Pack 0.06% gel. Requested by Mohammad Shakeel Aslam, GP Practice Clinical Pharmacist East Lancashire CCG, as HRT therapy for oestrogen deficiency symptoms in post-menopausal women and prevention of osteoporosis in postmenopausal women at high risk of future fractures who are intolerant of, or contraindicated for, other medicinal products approved for the prevention of osteoporosis.

This is a topical oestrogen considered safer to use than oral options. It is mentioned in the British Menopausal Guidelines as an alternative regime.

Concerns were raised that if approved the product may not be included in the expected HRT guidelines expected in February.

Resolved: Decision to add to formulary will be considered when HRT guidelines are available.

# 2021/147 item c: NEW PRODUCT REQUEST: Ozurdex 700 micrograms intravitreal implant in applicator.

Requested by Miss Chintan Sanghvi for adult diabetic macular oedema phakic eyes as a second line treatment when there is no significant effectiveness and response of the diabetic macular oedema to previous Anti VEGF

It's should reduce the number of hospital appointments, addressing the current waiting list and backlog of diabetic patients.

Traffic Light: RED

Blueteg will need updating via CSU for re-charge to CCG: VG to action.

**Resolved:** approved for use CCG Commissioned [Blueteg required]

## 2021/148 FORMULARY UPDATES:

# **Eosinophilic oesophagitis treatment options:**

Request to add fluticasone propionate [Flovent® mdi] to formulary as maintenance treatment in primary care [off label use]. Initial treatment to induce remission is currently commenced in secondary care with the used of Jorveza®, as per NICE TA708. [RED Traffic Light]. ELHT will provide supporting guidance including length of use and information on how to use for patients and practitioners.

**ACTION:** Flovent® mdi to be included in formulary for this indication when guidance available. **Traffic Light:** AMBER

Trametinib use via compassionate scheme for use in Histiocytosis Resolved: acknowledged by ELMMB

#### DOACs - Edoxaban - National Procurement Award

NHSE/I have nationally procured edoxaban as part of a rebate scheme that would offer more savings than current scheme across Pennine Lancashire. PL have acknowledged the national agreement and request for this to be the preferred product of choice. Existing rebates will not be available. ELHT policy will need to be updated and cardiologists informed. New patients will be initiated on Edoxaban. VG to encourage pharmacists to challenge any prescriptions.

Resolved: Acknowledged by ELMMB

**Hydrocortisone 0.5% ointment** – dermatology has stopped using hydrocortisone 0.5% ointment and 2.5% ointment and cream due to increasing costs. It was acknowledged that the 0.5% ointment was useful in young children: agreed that the 1% ointment could be used as a replacement advising use on alternative days.

**Resolved:** Hydrocortisone 0.5% ointment and 2.5% ointment and cream to be removed from formulary. An Optimize Rx message will be added to advise use of Hydrocortisone 1% on alternative days for children

Compassionate Use Nivolumab in Squamous Cell Carcinoma of the Vulva: Resolved: acknowledged by ELMMB

# 2021/149: LSCMMG CONSULTATIONS (for January LSCMMG)

- a) Primary care PPI review guideline No comments.
- b) Testosterone (transdermal) for postmenopausal women: There are still safety concerns associated with this product, as with previous testosterone products that were withdrawn, i.e. increase in blood pressure,

reduction in HDL cholesterol, weight gain – all factors to heart disease. The risks associated with use of this product outweigh the benefits. There may also be potential dosing errors associated with the different products available. NICE guidance only mentions this product as 'off-license' use and hasn't approved its use for the indication. NICE also suggests that its use should only be initiated if HRT has not been effective. Initiation would require a specialist consultation and we express concern as to whether this would be an appropriate use of NHS funding when other people are in more need of seeking specialist advice.

c) Rheumatoid Arthritis High-Cost Drugs Pathway No comments

## Comments to be fed back to LSCMMG

# 2021/150: LSCMMG RECOMMENDATIONS (from November LSCMMG)

a) Antihyperglycemic Therapy in adults with type 2 diabetes – Updated Previous comments have not been addressed by LSCMMG and include: Page 3 – statement reads 'Despite the lower acquisition cost of sulfonylureas, the actual cost of treating patients with sulfonylureas will be higher due to the need for blood glucose monitoring. Review patients taking glibenclamide and tolbutamide to establish whether patients could be switched to gliclazide/glimepiride.'

Previous submitted comments questioned why the statement needs to be included as most patients do not need to monitor Blood Glucose.

Page 4 – table reads 'Sulfonylurea – associated with increased risk of CV events'

## Further comments to be sent to LSCMMG

# b) Sativex Prescribing Information Sheet – New

Most GPs would not be comfortable prescribing Sativex as there is a potential for abuse and specialist input to support its use.

Appropriate guidance is required recommending specialist initiation and follow up review at 4 weeks by the specialist to see if there has been an effective response.

The manufacturer provides the first 3 vials free of charge for secondary care if prescribing is continued. [GP practices do not qualify for the FOC element]

Guidance needs to be clear that prescribing remains with the specialist for the first 3 vials [effectively 10 weeks] to allow for a review at 4 weeks, to ensure 20% reduction in spasticity. After which the prescribing can move to primary care as AMBER traffic light.

Further comments to be sent to LSCMMG

c) Varenicline (Champix®) shortage and alternative management options position statement – New

Resolved: item acknowledged and Accepted by ELMMB

# 2021/151 Strategic Commissioning Committee (SCC) Decisions – November 2021

- a) Idarucizumab adult patients treated with Pradaxa (dabigatran etexilate)
  when rapid reversal of its anticoagulant effects is required for emergency
  surgery/urgent procedures or in life-threatening or uncontrolled bleeding. RED, CCG commissioned
- b) **Glycopyrronium bromide oral solution** for hypersalivation/ sialorrhoea in adults with Parkinson's Disease AMBER 0, CCG (HRG included)

Resolved: items acknowledged and accepted by ELMMB

**2021/152: Dapagliflozin Drug Safety Update** – for information

2021/153: Adrenaline auto-injectors Drug Safety Update - form information

2021/154: Suggested Monitoring Requirements of High-Risk Drugs in Primary Care June 2021 v1 - updated

**Resolved:** items acknowledged by ELMMB

2021/155: NICE Guidance - November 2021

**Fever in under 5s: assessment and initial management** (NG143) last updated 26<sup>th</sup> November 2021 (published 7<sup>th</sup> November 2019)

**Type 2 diabetes in adults: management** (NG28) last updated 24<sup>th</sup> November 2021 (published 2<sup>nd</sup> December 2015)

**Acute heart failure: diagnosis and management** (CG187) last updated 17<sup>th</sup> November 2021 (published 8<sup>th</sup> October 2014)

Resolved: items acknowledged by ELMMB

#### 2021/156: NICE RECOMMENDATIONS from November

Selpercatinib for treating advanced thyroid cancer with RET alterations (TA742) is recommended as an option by NICE. Approved in line with NICE.

Cancer Drugs Fund

Traffic Light: RED

Crizanlizumab for preventing sickle cell crises in sickle cell disease is recommended as an option by NICE Approved in line with NICE. (TA743)

## NHS England Commissioned

Upadacitinib for treating moderate rheumatoid arthritis is recommended as an option by NICE [TA744] Approved in line with NICE.

CCG Commissioned [Blueteq required] Traffic Light: RED

NBTXR-3 for treating advanced soft tissue sarcoma (terminated appraisal) (TA745)

Traffic Light: BLACK

Traffic Light: RED

**Traffic Light: RED** 

**Traffic Light: RED** 

Nivolumab for adjuvant treatment of resected oesophageal or gastro-oesophageal junction cancer is recommended as an option by NICE. (TA746) Approved in line with NICE.

NHS England Commissioned

Nintedanib for treating progressive fibrosing interstitial lung diseases is recommended as an option by NICE (TA747). Approved in line with NICE.

NHS England Commissioned Traffic Light: RED

# 2021/157: NICE Highly Specialised Technologies – November 2021

Givosiran for treating acute hepatic porphyria (HST16) Acknowledged NHS England Commissioned

## **STANDING ITEMS**

2021/158: FOR ACTION/INFORMATION: LANCASHIRE & SOUTH CUMBRIA MEDICINES MANAGEMENT GROUP (LSCMMG) MINUTES – November 2021 Minutes acknowledged [draft version]

## AOB:

# LSCMMG draft minutes 11th November 2021:

Item 2021/183 Dual RAG ratings on LSCMMG website – this refers to suggesting that naltrexone and methadone could be made AMBER traffic light. SJ highlighted that most GPs have no experience of prescribing methadone and that prescribing should remain with the specialist service. LR has flagged with LSCMMG that some prescribers use different community services across the Lancashire footprint and that the traffic light status needs to reflect that it is prescribed through a specialist service. It was acknowledged that some GPs do prescribe in Lancashire e.g. Central Lancashire CCG

DATE OF NEXT MEETING – Wednesday 19<sup>th</sup> January 2022 12.45pm via 'Microsoft Teams'

# ACTION SHEET FROM EAST LANCASHIRE HEALTH ECONOMY MEDICINES MANAGEMENT BOARD

# **WEDNESDAY 17th DECEMBER 2021**

MINUTE NUMBER	DESCRIPTION	ACTION	DATE
2021/101b	VG to approach Divisional directors to be asked to review their members and suggest a nominated person to attend future meetings.	VG	Jan 22
2021/123	<b>Fidaxomicin</b> – supply options/pathway to be explored.	VG/JH/SM	Jan 22
2021/133	Klisyri – draft Guidance/Position Statement to be brought to next meeting. VG to follow up with dermatology colleagues	VG	Jan 22
2021/137	Trazodone 50mg/5ml oral solution Deferred to next meeting for discussion. More data relating to areas prescribed and from what areas.	All	Jan 22
2021/147 (a,b)	Utrogestan® & Topical Oestrogen p Products - await HRT guidelines to determine inclusion/position of Utrogestan® and topical oestrogen products in formulary.	All	Feb 22
2021/147 (c)	Ozurdex 700mcg – VG to contact CSU colleagues to update Blueteq.	VG	Jan 22
2021/148	Eosinophilic oesophagitis: Supporting guidance/PIL required for use of Flovent in Primary Care. To be developed by ELHT.	JE	Feb 22