

**EAST LANCASHIRE HEALTH ECONOMY
MEDICINES MANAGEMENT BOARD**

MINUTES OF THE TEAMS MEETING 16th JUNE 2021

PRESENT:

Mr V Goodey (VG)	Assistant Director of Pharmacy, Clin Service ELHT
Dr S Jackson (SJ)	Clinical Commissioning Group MM Lead, GP EL
Mr J Vaughan (JV)	Commissioning Support Pharmacist NHS EL/BwD
Ms F Iqbal	Senior Pharmacist NHS BwD CCG
Dr S Ramtoola (SR)	Consultant Physician, ELHT (Chairperson)
Dr N Amir (NA)	Consultant Microbiologist, ELHT
Mr A Gray (AG)	Clinical Pharmacist, ELHT
Mr Jagdish Adiyodi	Consultant haematologist ELHT
Ms Ana Batista	Specialist Pharmacist ELHT
Mr U Akram (UA)	Pharmacist, Lancashire Care Foundation Trust

IN ATTENDANCE:

Ms L Prince	Medicines Management Technician, EL CCG
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2021/065: APOLOGIES:

Dr L Rogan (LR)	Strategic Director of Medicines, Research and Clinical Effectiveness NHS EL CCG
Dr T McKenzie (TM)	GP East Lancs
Mr N Fletcher (NF)	Director of Pharmacy ELHT

2021/066: DECLARATION OF INTEREST

SJ declared interest in item 073c in respect of impact on GP workload.

2021/056: MINUTES OF APRIL Teams MEETING:

Accepted as accurate

2021/057: MATTERS ARISING:

2021/044: NICE recommendations [from February] Filgotinib TA676. VG to circulate information regarding estimated numbers to JV/LR – item closed.

2021/057: Clinical/medical documents issues raised at regional meeting by VG – item closed.

2021/069 New product request – Methacholine chloride inhalation (Unlicensed)
Requested by Respiratory department for diagnosis of non-specific bronchial airway hyper-reactivity who do not have clinically apparent asthma but with a clinical history suggestive of the condition and with normal respiratory.

Resolved: Methacholine chloride [unlicensed use], included on formulary for use by respiratory department

Traffic Light: RED

2021/070 New product request – Phospo-soda® oral solution for Colon Capture Endoscopy

Requested for use by endoscopy dept at Rossendale who are a clinical pilot centre using Colon Capsule Endoscopy Phospo-soda® assists in the passage of the capsule through the gut.

Resolved: Phospo-soda® oral solution included on formulary for use in specified procedure only.
Traffic Light: RED

2021/071: LSCMMG CONSULTATIONS (FOR JUNE LSCMMG)

Antipsychotic Shared Care [item 71a] – updated with addition of NICE approved and new licensed indications.

Alkindi [hydrocortisone]: New Medicines Assessment – supportive of use in those children with swallowing difficulties.

Zonisamide for migraine prophylaxis: New Medicines Assessment - supportive of use [unlicensed indication].

Antipsychotic Shared Care [item 73c] - concerns raised regarding the inclusion of primary care taking over physical health checks and monitoring at 12 months. There is a lack of mental health services to support/signpost patients in primary care. Concerns raised that some of the wording is ambiguous – comments to be fed back to LSCMMG. Suggested that Items 71a and 73c to be considered as one consultation

Comments to be sent to LSCMMG

2021/072: LSCMMG Recommendations (from April LSCMMG)

None

2021/073: LSCMMG Recommendations (FOR JULY LSCMMG)

Sodium oxybate - New Medicines Assessment – for the treatment of narcolepsy with cataplexy. Supported by members of ELMMB.

Sativex® for moderate to severe spasticity due to multiple sclerosis – New Medicines Assessment – concerns raised of possible traffic light change to AMBER as there is a potential that its use will extend to a wider cohort of patients outside the listed indications. Prefer to remain RED traffic light

Antipsychotic Shared Care update May 2021 – comments as above

Chronic spontaneous urticaria and angioedema addition to shared care for ciclosporin – the use of ciclosporin for this condition is currently not on formulary in ELHE. A full evidence summary required before decision to inclusion in shared care. Members suggested that a RED traffic light for this indication would be more suitable.

Resolved: Comments to be sent to LSCMMG

2021/074: LSCMMG Recommendations (from May LSCMMG)

Liothyronine - as monotherapy for the chronic management of hypothyroidism in Primary Care
Traffic Light: Black

Liothyronine - as an add-on treatment for refractory hypothyroidism despite adequate monotherapy with levothyroxine in Primary Care

Traffic Light: Black

Liothyronine - for the treatment of acute conditions where thyroid replacement is needed rapidly, for a limited period and/or where a drug with shorter half-life is require

Traffic Light: Red

Liothyronine – commenced in private sector

Traffic Light: Black

Thyroid Extracts (unlicensed liothyronine & thyroid extract products) for hypothyroidism

Traffic light: Black

Erectile Dysfunction Guideline – acknowledged by ELMMB

The above items were accepted by ELMMB

Neuropathic Pain Guidance – document updated in line with NICE guidance. Comments raised included: the addition of duloxetine as 1st line choice and not pregabalin or gabapentin: suggestion to refer numerous patients to pain service is unrealistic: use of nortriptyline when it is BLACK traffic light on formulary: use of lower strength capsaicin when not licensed for use in neuropathic pain: offer of use of duloxetine [AMBER] when there is no evidence for use. Comments to be feedback and request information as to reasoning behind the decisions. As this is a final version, members suggested that the document be adapted for local use in ELHE.

2021/075: JOINT COMMITTEE OF CCGs COMMISSIONING DECISIONS

None

2021/076: FORMULARY UPDATES

ELHT/ELHE Switch to Dalteparin for VTE prophylaxis – Best Practice Guideline document amended to reflect appropriate weight banding.

Final document accepted for use.

Adapalene 0.3% / Benzoyl peroxide 2.5% (Epiduo 0.3%/2.5%) Gel – request from dermatology to add higher strength of Epiduo gel in addition to the standard strength (Epiduo 0.1%/2.5%)

Traffic Light: GREEN

Testosterone replacement therapy –Amber traffic light on formulary. Can be initiated in primary care on recommendation of specialist. **Traffic Light: AMBER**

Liraglutide for managing overweight & obesity (TA664) – requires Tier 3 weight management service to support use in primary care. Approved for use within specialist service.

Traffic Light: RED

2021/077: NICE RECOMMENDATIONS (from April)

Acalabrutinib for treating chronic lymphocytic leukaemia (TA689) is recommended as an option by NICE. Approved in line with NICE.

NHS England Commissioned

Traffic Light: RED

Teduglutide for treating short bowel syndrome (terminated appraisal) (TA690)

Traffic Light: BLACK

Avelumab for untreated metastatic Merkel cell carcinoma (TA691) is recommended as an option in adults who have not had chemotherapy for metastatic disease. Partially replaces TA517.

NHS England Commissioned

Traffic Light: RED

Pembrolizumab for treating locally advanced or metastatic urothelial carcinoma after platinum-containing chemotherapy (TA692)

Not recommended, within its marketing authorisation. Replaces TA519.

Traffic Light: BLACK

Olaparib plus bevacizumab for maintenance treatment of advanced ovarian, fallopian tube or primary peritoneal cancer (TA693) is recommended as an option by NICE. Approved in line with NICE.

Cancer Drugs Fund

Traffic Light: RED

Bempedoic acid with ezetimibe for treating primary hypercholesterolaemia or mixed dyslipidaemia (TA694) is recommended as an option by NICE. Approved in line with NICE.

CCG Commissioned

Traffic Light: RED

Carfilzomib with dexamethasone and lenalidomide for previously treated multiple myeloma (TA695) is recommended as an option by NICE. Approved in line with NICE.

NHS England Commissioned

Traffic Light: RED

2021/078: NICE RECOMMENDATIONS (from May)

Tafamidis for treating transthyretin amyloidosis with cardiomyopathy (TA696)

Not recommended within its marketing authorisation

Traffic Light: BLACK

Andexanet alfa for reversing anticoagulation from apixaban or rivaroxaban (TA697) is recommended as an option by NICE. Approved in line with NICE.

ICS/CCG Commissioned

Traffic Light: RED

Ravulizumab for treating paroxysmal nocturnal haemoglobinuria (TA698) is recommended as an option by NICE. Approved in line with NICE.

NHS England Commissioned

Traffic Light: RED

Ofatumumab for treating relapsing multiple sclerosis (TA699) is recommended as an option by NICE. Approved in line with NICE.

NHS England Commissioned.

Traffic Light: RED

Selinexor with low-dose dexamethasone for treating refractory multiple myeloma (terminated appraisal) (TA700)

Traffic Light: BLACK

Crisaborole for treating mild to moderate atopic dermatitis in people 2 years and older (terminated appraisal) (TA701)

Traffic Light: BLACK

Ibrutinib with obinutuzumab for untreated chronic lymphocytic leukaemia and small lymphocytic lymphoma (terminated appraisal) (TA702)

Traffic Light: BLACK

Ibrutinib with rituximab for untreated chronic lymphocytic leukaemia (terminated appraisal) (TA703)

Traffic Light: BLACK

Trastuzumab deruxtecan for treating HER2-positive unresectable or metastatic breast cancer after 2 or more anti-HER2 therapies (TA704) is recommended as an option by NICE. Approved in line with NICE.

Cancer Drugs Fund

Traffic Light: RED

STANDING ITEMS

2021/079: FOR ACTION/INFORMATION: LANCASHIRE & SOUTH CUMBRIA MEDICINES MANAGEMENT GROUP (LSCMMG) MINUTES – April 2021

Minutes acknowledged

2021/080: FOR ACTION/INFORMATION: LANCASHIRE & SOUTH CUMBRIA MEDICINES MANAGEMENT GROUP (LSCMMG) MINUTES – May 2021

Minutes acknowledged

2021/081: FOR ACTION/INFORMATION: LANCASHIRE & SOUTH CUMBRIA NHs FT D&T Minutes – May 2021

Minutes acknowledged

DATE OF NEXT MEETING – Wednesday 21st July 2021 12.45pm via ‘Microsoft Teams’

**ACTION SHEET FROM
EAST LANCASHIRE HEALTH ECONOMY
MEDICINES MANAGEMENT BOARD**

WEDNESDAY 21st APRIL 2021

MINUTE NUMBER	DESCRIPTION	ACTION	DATE
2019/131	Treatment Of Vitamin B12 Deficiency Draft – pathway to be developed.	LR/JV	Sept 21
2020/092	Drug Safety Update – Denosumab Directorate pharmacist to discuss with consultants.	AG/VG	July 21
2021/061	ELHT Paediatric PPI Guideline: pathway to be updated. Awaiting updated document.	VG	July 21
2021/061	Trimbow request for Asthma indication –Dr Hafeez to be informed of decision to refer to LSCMMG for consideration for inclusion in pathway.	VG	Pending new guidance from LSCMMG