



EAST LANCASHIRE HEALTH ECONOMY MEDICINES MANAGEMENT BOARD

MINUTES OF THE TEAMS MEETING 20th April 2022

PRESENT:

Dr L Rogan (LR)	Strategic Director of Medicines, Research and Clinical Effectiveness NHS EL CCG
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)	Senior Medicines Commissioning Pharmacist NHS EL/BwD
Ms Ana Batista (AB)	Medicines Information Pharmacist ELHT
Mr Neil Fletcher (NF)	Director of Pharmacy ELHT
Mr U Akram (UA)	Deputy Lead Pharmacist, LS CFT
Dr T McKenzie (TMC)	GP East Lancashire
Ms F Iqbal (FI)	Senior Pharmacist NHS BwD CCG
Dr F Mohamed (FM)	Consultant Acute Physician
Dr A Sibley (AS)	Paediatrics Consultant

IN ATTENDANCE:

Mr W Price (WP)	Dermatology Specialist Pharmacist
Ms B Clarke (BC)	Principal Optometrist, Moorfields Eye Hospital
Dr A MacPherson (AM)	Consultant in Palliative Medicine
Mr A Elmetwally (AE)	Vascular Consultant

2022/055: APOLOGIES:

Dr S Ramtoola (SR)	Consultant Physician, ELHT (Chairperson)
Mr C Woods (CW)	Head of Contracting and Costing, Finance
Dr D Sebastian (DS)	Consultant Intensivist and Deputy DMD for SAS
Ms L Prince (LP)	Medicines Management Technician, EL CCG
Dr F Shah (FS)	GP/Consultant MFOP & Diabetes
Dr S Bhattacharya (SB)	ED Consultant
Mrs H. Robinson (HR)	Divisional Lead Pharmacist – MEC

2022/056: DECLARATION OF INTEREST

None

2022/057: MINUTES OF MARCH TEAMS MEETING:

March 2022 Minutes Accepted



2022/058: MATTERS ARISING:

2021/101b: ELMMB Membership:

VG and LR unable to meet but the membership has been reviewed and updated internally for now. A review will be required to decide how ELMMB links with the ICS and ICB in the future and the policy for introduction of new drugs will required review because of that.

Action: Deferred to September.

2021/147(a,b): Utrogestan® & Topical Oestrogen products

Products approved Feb 2022. LSCMMG putting guidance together with a list of products.

Resolved: Close item

2022/006a: Zonisamide liquid

VG and LP have met with IMOT team but were unable to agree on course of action. VG and LR will meet again to discuss.

Action: Deferred to May.

Current Traffic Light: RED

2022/006c: Ethosuximide liquid:

Comments as above

Action: Deferred to May

2022/026: Bedaquiline

Funding Request approved

Resolved: Close item

2022/027: BP targets post CVA

Updated NICE NG136 guidance issued in March has answered this issue.

Resolved: Close item

2022/059: New Product Request

a. Quattro Multifunctional Solution

b. Ote Clean 40

c. Lens Plus OcuPure Saline

Requested by Bronagh Clarke, Optometrist at Moorfield Eye Hospital. All the products listed above are available to purchase over the counter and are considered as part of the self-care agenda. Clarified that request was made due to patient's circumstances as they cannot afford treatment; the request was not aimed at including these products in the formulary. An Individual Funding Request would be the best route to address this.

Action: AB to forward Ms Clarke the IFR form.

d. Betesil plasters

Resolved: Approved for use by ELMMB

Traffic Light: AMBER



e. Parecoxib (40mg powder for solution for injection/ 40mg powder and solvent for injection)

Parecoxib seems to be better tolerated by patients in terms of side-effects than Ketorolac. Item will not be used on many patients. Requested as amber traffic light. The proposed administration route would be subcutaneously, once or twice a day or via syringe pump. This stock will be available only at certain pharmacies. Syringe pump policy will be updated to provide guidance on how to deal with administration. There are 15 pharmacies across the region that hold palliative care medicines and 3 that hold additional drugs, such as alfentanil. Parecoxib will need to be stocked in the 3 pharmacies for urgent access.

Action: Dr A MacPherson to forward AB the extra page for the syringe pump policy for ELMMB approval

Approved for use by ELMMB

Traffic Light: RED

f. Enoxaparin injections

Requested by Mr Elmetwally, Vascular Consultant, for VTE treatment as twice daily dose for prevention of re-thrombosis in patients treated with venous stenting after deep venous thrombolysis. Heparin infusion used in these patients is either not effective or causes bleeding in some patients. St Thomas, the lead hospital in the treatment of venous insufficiency, has a specific protocol using enoxaparin twice a day which is effective, and Mr Elmetwally would like to implement it at ELHT. Only a small cohort of patients would receive this treatment, which would be for 6 weeks post intervention. VG pointed out that evidence base is very limited, mentioning that we use Tinzaparin as the LMWH of choice for treatment in the Trust and not enoxaparin. VG asked for time to look into it and will feedback to Mr Elmetwally directly.

Resolved: Close item

2022/060 Formulary Updates

a. Cefradine injection 1gram

Resolved: to remove from ELMMB website as preparation is not available

b. Melatonin 2mg MR tabs

Used for insomnia in Critical Care only.

Resolved: To be added to section 4.1 *Hypnotics and anxiolytics* of formulary

Traffic Light: RED

c. Levothyroxine oral solution

Requested to use on a named patient basis in exceptional circumstances.

Chair's approval given prior to meeting.

Resolved: Approved only for requested patient, keep same traffic light.

d. Otigo 40 mg/10 mg/g ear drops

For acute otitis media

Resolved: Approved for use by ELMMB

Traffic Light: GREEN



- e. Bevespi Aerosphere**
For COPD as per Strategic Commissioning Committee (SCC) Decision
Resolved: Approved for use by ELMMB **Traffic Light: GREEN**
- f. Trixeo Aerosphere**
For COPD as per Strategic Commissioning Committee (SCC) Decisions
Resolved: Approved for use by ELMMB **Traffic Light: GREEN Restricted**
- g. Diflucortolone 0.3% oily cream**
Branded product was discontinued in the past; this preparation is now available. To be returned to chapter 13 of the formulary with red traffic light until a new brand becomes available, then traffic light can be reviewed. (Previous branded version was green).
Resolved: Approved for use by ELMMB **Traffic Light: RED**
- h. Canagliflozin**
ELMMB website to reflect its indication as monotherapy and dual therapy.
Resolved: Website will be reviewed and updated if required
- i. Pantoprazole and Rabeprazole**
To extend the range of PPIs available. Due to shortage of H₂Antagonists, use of nizatidine and famotidine has increased which has resulted on higher spending. Patients will be able to try other PPIs if intolerant to lansoprazole and omeprazole before moving on to the more expensive H₂Antagonists.
- j. Resolved:** Pantoprazole and Rabeprazole to be added to Formulary

2022/061 LSCMMG Consultations - April 2022

- a. Axial Spondyloarthritis pathway**
No comments/concerns raised
Action: AB to feedback on behalf of ELHE
- b. Testosterone Shared Care Guideline female sexual dysfunction**
-Concerns regarding dosing (on page 2 a fixed dose of one squirt on alternate days is suggested but later on the guidance titrating dose is mentioned which is confusing)
-Concerns regarding capacity for a 12-month review in Secondary Care
-Concerns regarding effect vs safety profile of the drug
-Is it possible to clarify how long a tube lasts once opened (as using 1 squirt every other day would mean it should last 240days)
Action: AB to feedback on behalf of ELHE



c. Tapentadol New Medicine Assessment

Proposed Red traffic light. This was requested by Palliative care team at ELHT. Need to clarify what are the expectations regarding community access to this medication, whether it needs to be accessed via the group of special pharmacies. If approved as Red then it would not need community access but it is anticipated that they would prefer community access.

Action: AB to respond to consultations on behalf of ELHE and clarify with Dr MacPherson whether they would like community access via the special cohort of pharmacies.

2022/062 Strategic Commissioning Committee (SCC) Decisions – March 2022

- a. Triexo Aerosphere - a maintenance treatment in adult patients with moderate to severe chronic obstructive pulmonary disease (COPD) who are not adequately treated by a combination of an inhaled corticosteroid and a long-acting beta2-agonist or combination of a long-acting beta2-agonist and a long-acting muscarinic antagonist.
- b. Bevespi Aerosphere - a maintenance bronchodilator treatment to relieve symptoms in adult patients with chronic obstructive pulmonary disease (COPD)

Resolved: Recommendations acknowledged and approved by ELMMB with recommended traffic light

2022/063 Other items

- a. Tralokinumab FOC application
- b. Upadacitinib FOC application

Requests submitted by the Dermatology Directorate. These two items have a NICE TA coming out later in the year. Estimated less than 10 patients and only when all the other options have been exhausted.

Action: AB to forward both FOC applications to LSCMMG requesting that they are added to the workplan to be reviewed as soon as possible as they sit hand in hand with the development of the Blueteq. Copy in LR.

2022/064 Other items

Dosulepin patients to be reviewed

Currently BLACK traffic light but some patient still coming into hospital on it.

Action: Medicines team in primary care to look at how many patients there are on it and flag for review.

2022/065 Other items

Oxazepam patients to be reviewed

Similar case as mentioned above on item 2022/064.



Action: Medicines team in primary care to look at how many patients there are on it and flag for review.

2022/066 Other items

Request to update definition of amber traffic light

-Request to update the Amber traffic light definition to “*Medicines which should only be prescribed on the recommendation of specialists but which may be passed to primary care prescribers for prescribing*”. This would allow primary care to issue the first prescription for patients having remote consultations rather than attending face to face. This would benefit the patients as would reduce travel, parking, time, inconvenience and cost just to collect a first prescription.

-Request to update Amber Shared definition to “*Medicines which should only be prescribed on the recommendation of specialists but which may be passed to primary care prescribers for prescribing provided the terms of a locally agreed shared care protocol (where available) are met.*”

It was discussed that amber shared care is aimed at high-risk drugs and these should be prescribed and monitored by secondary care for at least the first 3 months on average. The current definition of Amber on the website does already stipulate that amber medicines can be initiated by primary care.

Action: LR will review the definition and amend accordingly

2022/067 Other items

Edoxaban

Discussed if there is an active push to switch patients to edoxaban in the hospital. VG stated that the current position is to not actively switch as it wouldn't be appropriate, and it would be safer that the switch happens in primary care in a more constructive way. However, Cardiologists have fed back that they are already using it.

Resolved

2022/068 Other items

Differences in RAG

In preparation for the transition into the ICS, LSCMMG has been comparing the rag ratings for certain drugs across the different organisations trying to identify gaps. JV has reviewed the list of gaps flagged for our organisation and some Gaps highlighted by LSCMMG are not actual gaps. A discussion needs to happen regarding drugs that have different rag status and whether we want to align our rating with theirs.

Action: JV to get a list together of discrepancies to discuss at the next meeting

2022/069 NICE Guidance - March 2022

NG17 - Type 1 diabetes in adults: diagnosis and management: updated 31 March 2022



NG18 - Diabetes (type 1 and type 2) in children and young people: diagnosis and management: updated 31 March 2022

NG28 -Type 2 diabetes in adults: management: updated 31 March 2022

NG136 - Hypertension in adults: diagnosis and management: updated 18 March 2022

NG91 - Otitis media (acute): antimicrobial prescribing: updated 11 March 2022

Resolved: Items acknowledged by ELMMB

2022/070 NICE Recommendations – March 2022

Empagliflozin for treating chronic heart failure with reduced ejection fraction
Commissioner: ICS/CCG's **Traffic Light: AMBER**

Lenalidomide for relapsed or refractory mantle cell lymphoma (terminated appraisal)
Traffic Light: BLACK

Dapagliflozin for treating chronic kidney disease
Commissioner: ICS/CCG's **Traffic Light: AMBER**

Pitolisant hydrochloride for treating excessive daytime sleepiness caused by obstructive sleep apnoea
Traffic Light: BLACK

Solriamfetol for treating excessive daytime sleepiness caused by obstructive sleep apnoea
Traffic Light: BLACK

Pegcetacoplan for treating paroxysmal nocturnal haemoglobinuria
Commissioner: NHSE **Traffic Light: RED**

Dostarlimab for previously treated advanced or recurrent endometrial cancer with high microsatellite instability or mismatch repair deficiency
Recommended for use within the Cancer Drugs Fund **Traffic Light: RED**

Nivolumab with ipilimumab for untreated advanced renal cell carcinoma
Commissioner: NHSE **Traffic Light: RED**

Sotorasib for previously treated KRAS G12C mutation-positive advanced non-small-cell lung cancer
Recommended for use within the Cancer Drugs Fund **Traffic Light: RED**



Tagraxofusp for treating blastic plasmacytoid dendritic cell neoplasm (terminated appraisal)

Traffic Light: BLACK

Resolved: Item acknowledged by ELMMB

2022/071 NICE Highly Specialised Technologies – March 2022

Atidarsagene autotemcel for treating metachromatic leukodystrophy

Resolved: item acknowledged by ELMMB

2022/072 EAMS (Early access to medicines scheme) – March 2022

Avalglucosidase alfa in the treatment of Pompe disease (Annex to Public Assessment Report First Renewal)

Resolved: Item acknowledged by ELMMB

Standing Items:

2022/073 For Action/Information: Lancashire & South Cumbria Medicines Management Group (LSCMMG)

DRAFT LSCMMG minutes 10.03.2022

Resolved: Minutes acknowledged.

2022/074 For Action/Information: Lancashire & South Cumbria FT Drugs and Therapeutics Committee

a. LSCFT Drugs and Therapeutics Committee minutes 24th March 2022

b. LSCFT Drugs and Therapeutics Committee action tracker 24th March 2022

Resolved: Minutes acknowledged.

2022/075 For Action/Information: Antimicrobial Stewardship Committee (ASC)

a. Antimicrobial Stewardship Committee (ASC) – December 2021 Minutes

b. Antimicrobial Stewardship Committee (ASC) – January 2022 Minutes

Resolved: Minutes acknowledged.

DATE OF NEXT MEETING – Wednesday 18th May 2022 12.45pm via ‘Microsoft Teams’



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

WEDNESDAY 20th April 2022

MINUTE NUMBER	DESCRIPTION	ACTION	DATE
2021/101b	ELMMB Membership A review will be required to decide how ELMMB links with the ICS and ICB in the future and the policy for introduction of new drugs will required review as a result of that	LR/VG	Sep 22
2022/006a	Zonisamide liquid: VG and LR will meet again to discuss.	VG/LR	May 22
2022/006c	Ethosuximide liquid: VG and LR will meet again to discuss.	VG/LR	May 22
2022/059(a,b,c)	Quattro Multifunctional Solution Ote Clean 40 Lens Plus OcuPure Saline AB to send IFR for to Bronagh Clarke	AB	May 22
2022/059e	Parecoxib Dr A MacPherson to forward AB the extra page for the syringe pump policy for ELMMB approval	AB	May 22
2022/063 (a,b)	Tralokinumab FOC application and Upadicitinib FOC application AB to forward both FOC applications to LSCMMG requesting that they are added to the workplan.	AB	May 22
2022/068	Differences in RAG JV to get a list together of discrepancies to discuss at the next meeting	JV	May 22