



EAST LANCASHIRE HEALTH ECONOMY MEDICINES MANAGEMENT BOARD

MINUTES OF THE TEAMS MEETING 19th April 2023

PRESENT:

Dr L Rogan (LR)	Strategic Director of Medicines, Research and Clinical Effectiveness NHS EL ICB (acting chairperson)
Mr V Goodey (VG)	Assistant Director of Pharmacy, Clin Service ELHT
Mr J Vaughan (JV)	Senior Medicines Commissioning Pharmacist NHS EL/BwD ICB
Ms Ana Batista (AB)	Medicines Information Pharmacist ELHT
Mr U Akram (UA)	Deputy Lead Pharmacist, LS CFT
Ms L Prince (LP)	Senior Medicines Management Technician, EL ICB
Dr S Jackson (SJ)	GPwSI in therapeutics
Ms Victoria Simpson	Rheumatology and Homecare Lead Pharmacist

IN ATTENDANCE:

2023/53: APOLOGIES:

Dr S Ramtoola (SR)	Consultant Physician, ELHT (Chairperson)
Mrs H Robinson (HR)	Divisional Lead Pharmacist – MEC
Mr Neil Fletcher (NF)	Director of Pharmacy ELHT
Dr F Shah (FS)	GP/Consultant MFOP & Diabetes

2023/54: DECLARATION OF INTEREST

None declared.

2023/55: MINUTES OF MARCH TEAMS MEETING:

Accepted as accurate record.

2023/56: MATTERS ARISING:

2021/101b/ 2023/09: ELMMB Membership – to remain on action matrix as a standing item for feedback.

LR & VG have met and discussed transition of ELMMB. The formulary index is being compared with the LSCMMG formulary with a view to aligning across Lancashire and South Cumbria. Currently documents/guidelines are being reviewed and categorised into groups as follows:

- Retain/in need of review [to keep and move across to the sub-section of LSCMMG site]



- Old documents that can be retired/removed from website
- Retain specific ELMMB developed documents. These have been highlighted to LSCMMG to consider adopting for use across Lancashire and South Cumbria ICB. These will be prioritised for update and taken to the May LSCMMG meeting.
- ELHT guidelines have been identified for review, retention or remove. A list has been sent to VG.

ELMMB site will eventually be archived, with a caveat to explain the site is going through a transition process.

ELMMB meetings: The meetings have always achieved good clinical engagement and it was agreed that it would be helpful for them to continue. The terms of reference will be reviewed and brought to the next meeting.

ACTION: ELMMB terms of reference to be reviewed and brought to May meeting.

2023/26: GLT2i dosing considerations according to eGFR when treating T2D, HF or CKD – Draft version. Awaiting feedback. Document will come to next meeting in June for approval.

ACTION: to be brought to June meeting

2023/57: Formulary Updates

- Hydrocortisone modified-release hard capsules (Efmody®)** – approved by as AMBER for second line treatment of congenital adrenal hyperplasia (CAH) in adolescents aged 12 years and over and adults. **Traffic Light AMBER**
- Dailiport 3 mg prolonged-release hard capsules (tacrolimus).** The contract has changed in ELHT. They currently use Advagraf® which is significantly more expensive. Awaiting a response from Preston Hospital to confirm if they are switching to Dailiport for new patients. Decision was made to continue with Advagraf until confirmation received. The matter is also to be raised with LSCMMG.

ACTION: AB to send urgent email to Adam Grainger to ask if this item could be included on April's LSMMG meeting to discuss as an economy saving.

Resolved: ELMMB formulary will be updated accordingly

2023/58 LSCMMG Consultations – May 2023 [deadline 04/05/23]

- Trifarotene for acne (Aklief® 50 microgram/g cream):**
Recommendation: Green.
- Therabite (Jaw Rehabilitation Device):**
Recommendation: **Red** (specialist only) 2nd line treatment: awaiting comments from Max Fax.
- Budesonide M/R 9mg tabs RAG rating change (Cortiment®),**
Current Colour Classification: Red
Proposed Colour Classification: **Amber**



Currently ELMMB has budenofalk on formulary, further clarification is needed to identify the need for this product to switch to AMBER. GI consultant comments awaited.

d. Restless legs syndrome guideline – updated

Comments included adding information/clarification about the drugs that are dependence forming and that they are second line choice.

All documents have been circulated to appropriate directorate.

For Action: Comments to be sent to LSCMMG.

2023/59 LSCMMG Recommendations – March 2023

- a. **Prescribing of vitamins, minerals, supplements, herbal and homeopathic medicines without a product licence.** This Position statement has been retired and removed.
- b. **Antipsychotics shared care guideline – updated**
- c. **Gout guideline – updated.** SJ commented that on page 'chronic gout management' it says 'consider Febuxostat as an alternative': the serum uric acid should read 360 and not 300, as in NICE guidance. Further down there is also a mention of using a 'low dose corticosteroid e.g., prednisolone 10 – 20mg daily' This would not be considered low dose: NICE mentions low dose can be used but it does not actually specify a dose. Ref (3) says "*There is no research evidence to support the use of corticosteroids for flare prophylaxis.*" Ref (4) says corticosteroids can be used, off-label, but does not give a dose.
- d. **Cannabis-based medicinal products position statement – updated.** Comments here included why the position statement does not state BLACK traffic light, rather than do not prescribe.
- e. **ADHD shared care guideline – updated.** Comments raised with reference to there being no regulation in private prescribers initiating patients often on more expensive products and not being aware of the more cost-effective options. Once initiated privately the GP is often asked to continue prescribing, which is hard to refuse.

Resolved: items acknowledged by ELMMB. AB to feedback to LSCMMG points raised. Website will be updated accordingly.

2023/60 Other Items

Shared Care Guidance Document: Current shared care letter within shared care guideline is often not sent with the discharge to primary care notes.

VS said teams in dermatology, gastro and rheumatology may not use the LSCMMG example template however the letter/ template used at ELHT will include all the required information stipulated. It was agreed that the following statement would be used instead of waiting for a response from the GP to confirm:

"Unless we hear from you within 14 days, we will assume that the Shared Care agreement has been accepted."

Action: Standard letters to be removed from shared care guidelines VS will liaise with gastroenterology and dermatology departments to agree they use a similar format.

2023/61 NICE Guidance – March 2023

NG122 Lung cancer: diagnosis and management. Updated 14th March 2023



2023/62 NICE Recommendations –March 2023

Eptinezumab for preventing migraine recommended by **NICE TA871**
ICS Commissioned, Blueteq required **Traffic Light RED**

Cannabidiol for treating seizures caused by tuberous sclerosis complex is recommended as an option as by **NICE TA873**
NHS England Commissioned **Traffic Light RED**

Polatuzumab vedotin in combination for untreated diffuse large B-cell lymphoma is recommended as an option by **NICE TA874**
NHS England Commissioned **Traffic Light RED**

Semaglutide for managing overweight and obesity is recommended as an option by **NICE TA875**. ***It was noted that a position statement has been sent out to practices to advise that the product should not be prescribed until clear commissioning and clinical pathways are established. See [position statement](#)*
ICS Commissioned Blueteq may be required (Dependent upon agreed funding arrangements) ****RAG status GREY: 'Do not prescribe'**

Nivolumab with chemotherapy for neoadjuvant treatment of resectable non-small-cell lung cancer is recommended as an option by **NICE TA876**
NHS England Commissioned **Traffic Light RED**

Finerenone*** for treating chronic kidney disease in type 2 diabetes is recommended as an option by **NICE TA877**
ICS Commissioned **Traffic Light**
GREY
**** This recommendation is for moderate CKD which is potentially a large cohort of patients, which could mean a possible cost impact to the ICS. Await LSCMMG medicines review.*

2023/63 NICE Highly Specialised Technologies – March 2023

HST23 Asfotase alfa for treating paediatric-onset hypophosphatasia, updated 1st March 2023

2023/64 EAMS (Early access to medicines scheme) – March 2023

None this month

Standing Items:

2023/65 For Action/Information: Lancashire & South Cumbria Medicines Management Group (LSCMMG)

DRAFT LSCMMG minutes 09.03.23

Resolved: acknowledged

2023/66 For Action/Information: Lancashire & South Cumbria FT Drugs and Therapeutics Committee

Minutes and open action tracker from 30th March 2023 acknowledged



2023/67 For Action/Information: Antimicrobial Stewardship Committee (ASC)

ASC January 2023 minutes acknowledged.
March 2023 minutes not available yet

DATE OF NEXT MEETING – Wednesday 10th May 2023 12.30pm via ‘Microsoft Teams’

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

WEDNESDAY 22nd February 2023

MINUTE NUMBER	DESCRIPTION	ACTION	DATE
2021/101b	<p>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 require review as a result of that. Await full ICB structure.</p> <p>ELMMB Terms of reference to be reviewed to reflect future meetings.</p>	<p>LR/VG</p> <p>JV</p>	<p>May/Jun 23</p>
2023/26	<p>GLT2i dosing considerations according to eGFR when treating T2D, HF or CKD – Draft version To be brought to June meeting</p>	<p>AF</p>	<p>Jun 23</p>
2023/57b	<p>Formulary Updates: Dailiport 3 mg prolonged-release hard capsules (tacrolimus) – Advagraf® contract change, request to change to alternative cheaper option Dailiport for this strength.</p> <p>AB to send urgent email to Adam Grainger to ask if this item could be included on April's LSMMG meeting to discuss as an economy saving. – keep using Advagraf until LSCMMG decision</p>	<p>AB</p>	<p>May/Jun 23</p>