

Drug and Therapeutics Committee – Minutes – Confirmed

Date / Time	Thursday 9th August 2018 8:15am – 9:30am
Venue	The Committee Room, Alderson House, HRI
Chair	Prof A Morice, Chair, Professor of Respiratory Medicine
Notes / Action Points	Mrs W Hornsby, Senior Pharmacy Technician
Quorate: Yes / No	Yes
Attendance	Mr S P Gaines, Professional Secretary, Senior Principal Pharmacist – Clinical Services Mr P O'Brien, Deputy Chief Pharmacist Mr D Corral, Chief Pharmacist, Clinical Director Therapy & Therapeutics Mr K McCorry, Medicines Optimisation Pharmacist, East Riding CCG (via speakerphone) Dr A Samson, Infectious Diseases Consultant
Apologies	Dr O Ogunbambi, Consultant Rheumatologist Dr S Raise, GP ER CCG Prof M Lind, Vice Chair, Professor of Oncology Dr H Klonin, Consultant Paediatrician

Agenda No	Item	Discussion	Decision Made	Action	Lead	Due Date	Progress /Date Closed
2018.08.01	Apologies	As above.					
2018.08.02	Declarations of Interest	None.					8/18
2018.08.03	Minutes of the previous meeting	On Page 7 – 2018.07.18 – “cardiology” to read “cardiothoracic surgery”. Otherwise, accepted as a true record.	SG to amend minutes.	Amend minutes	SG	9/18	
2018.08.04	Action Tracker	<p>D&T Attendance WH has spoken to lay member re attendance, who agreed to continue attending, but has not attended or sent apologies today. The committee agreed to see if Sue Phillips now attends and review in 3 months' time.</p> <p>Tracker All appropriate NICE cancer drugs have been added to the formulary, as shown in the document circulated in July.</p> <p>Fendix Media Campaign DC was collecting feedback. He will also ask for feedback from web services regarding number of hits and if the trust has benefitted in any way from these promotions.</p> <p>Tracker ML not present - awaiting atezolizumab TA 520 application.</p> <p>AOB WH has added RMOC to agenda again, as deferred in July.</p> <p>New Process for Oncology requests SS was implementing the new forms and would review in 6 months.</p>	<p>Action complete.</p> <p>Action complete.</p> <p>DC to ask for feedback for next month.</p> <p>Ongoing.</p> <p>Action complete.</p> <p>Review form & process.</p>	<p>Feedback next month</p> <p>ML to seek application</p> <p>Review</p>	<p>DC</p> <p>ML</p> <p>SS/SG</p>	<p>9/18</p> <p>8/18</p> <p>1/19</p>	<p>8/18</p> <p>8/18</p> <p>8/18</p>

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		New Product Requests AM has written to applicants and WH has updated formulary	Actions complete.				8/18
		New Product Requests KMcC has looked at prescribing figures in primary care and there is a significant amount of linagliptin prescribed in primary care, which supports the decision to allow continuation at HEY.	Action complete.				8/18
		NICE Guidance AM has written to Dermatology to ask if they are interested in making an application for guselkumab.	Action complete.				8/18
		NICE Guidance ML not present - awaiting atezolizumab TA525, arsenic trioxide TA526 and midostaurin TA523 applications.	Ongoing.	ML to seek applications	ML	9/18	
		NICE Guidance WH informed the committee that glatiramer was not listed on formulary, despite longstanding use. The committee agreed it should be added.	Action complete. WH to add to formulary.	Add to formulary	WH	9/18	8/18
		MHRA DSU ML not present to feed back about denosumab.	Discuss next time.	ML to discuss with colleagues	ML	9/18	
		E-cigs/vapes POB has discussed availability with Boots. They do not stock e-cigarettes in our HEY hospital outpatient Pharmacies. They have suggested that patients could order on line but they could also stock if required.	Action complete.				8/18
		POB will discuss change in processes/PGDs with smoking cessation team.	POB to discuss with smoking cessation team.	POB to liaise with smoking cessation	POB	9/18	
		It was noted that currently patients have difficulty accessing free					

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		<p>therapy in primary care. AM informed the committee that he was asking junior doctors on AMU to discuss smoking with patients and provide information on stopping.</p> <p>The committee noted that smoking cessation is currently a trust CQUIN and was being recorded on Lorenzo. POB agreed to ask AC - Senior Pharmacist, Respiratory Medicine to write a paper including E-cigs/smoking cessation/CQUIN and bring this back to D&TC.</p> <p>AOB Cardiothoracic governance meeting was delayed by one week, so feedback to be given next time on the use of the non formulary product levosimendan out of hours</p> <p>AOB Out-of-hours formulary flowchart to be updated.</p>	<p>POB to ask AC to write a summary briefing paper.</p> <p>Ongoing.</p> <p>Ongoing.</p>	<p>POB to ask AC to write a paper</p> <p>Escalate to CT governance meeting</p> <p>Update chart</p>	<p>POB</p> <p>POB</p> <p>POB/WH</p>	<p>9/18</p> <p>9/18</p> <p>8/18</p>	
2018.08.05	New Product Requests	<p>Eletriptan – Migraine – Dr F Ahmed</p> <p>Requested for use in a maximum of 10 patients/year as a second line triptan for neurologist initiation. KMcC raised concerns around the impact on primary care, but it was agreed this would be discussed at HERPC.</p> <p>Tezacaftor/Ivacaftor (Symdeco) – CF – Dr D Shiferaw</p> <p>Product is not licensed in the UK but is licensed in the USA. It was agreed Symdeco would be used second line, if patients don't tolerate Orkambi.</p> <p>DEKAS Plus/Essential – CF – Dr D Shiferaw</p> <p>There are 4 DEKAs preparations – liquid, soft gels, chewable tablets and capsules. All approved for use.</p> <p>Dupilumab – Moderate to severe atopic dermatitis – Dr R Zaman (TA534)</p>	<p>Approved for specialist use/ recommendation only.</p> <p>Approved for specialist use only.</p> <p>Approved.</p> <p>Approved in line with NICE TA.</p>	<p>AM to write to applicants</p> <p>WH to update formulary</p> <p>POB to ask AR to request</p>	<p>AM</p> <p>WH</p> <p>POB</p>	<p>9/18</p> <p>9/18</p> <p>9/18</p>	

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		<p>It was felt that dermatology would need to write a pathway flowchart for atopic dermatitis, showing the place of this agent.</p> <p>Vosevi (sofosbuvir, velpatasvir and voxilaprevir) – Chronic Hep C – Lorraine Cullen (TA507) <i>Approved on condition signed copy received</i></p> <p>Ocrelizumab – MS – Dr J Harley (TA 533)</p>	<p>Approved in line with NICE TA.</p> <p>Approved in line with NICE TA.</p>	<p>pathway from dermatology</p>			
2018.08.06	NICE Guidance - July 18	<p>NG99 Brain tumours (primary) and brain metastases in adults</p> <p>5-aminolevulinic acid (5-ALA) is not on formulary, but is recommended by NICE.</p> <p>NG100 Rheumatoid arthritis in adults: management</p> <p>Check if baricitinib and other items from D&T Jan 18 have been added to formulary, as baricitinib does not appear on formulary.</p> <p>NG101 Early and locally advanced breast cancer: diagnosis and management</p> <p>TA492 Atezolizumab for untreated PD-L1-positive locally advanced or metastatic urothelial cancer when cisplatin is unsuitable</p> <p>TA522 Pembrolizumab for untreated PD-L1-positive locally advanced or metastatic urothelial cancer when cisplatin is unsuitable</p> <p>NA528 Niraparib for maintenance treatment of relapsed, platinum-sensitive ovarian, fallopian tube and peritoneal cancer</p>	<p>5-ALA not on formulary.</p> <p>WH to check formulary</p> <p>All items on formulary.</p> <p>Not on formulary, pending application.</p> <p>On formulary.</p> <p>Not on formulary, pending application.</p>	<p>SG to contact Mr Achawal to request application</p> <p>WH to add baricitinib</p> <p>No further action</p> <p>ML to request application</p> <p>No further action</p> <p>ML to request application</p>	<p>SG</p> <p>WH</p> <p>ML</p> <p>ML</p>	<p>9/18</p> <p>9/18</p> <p>9/18</p> <p>9/18</p>	<p>8/18</p> <p>8/18</p>

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		<p>TA529 Crizotinib for treating ROS1-positive advanced non-small-cell lung cancer</p> <p>TA530 Nivolumab for treating locally advanced unresectable or metastatic urothelial cancer after platinum-containing chemotherapy</p> <p>TA531 Pembrolizumab for untreated PD-L1-positive metastatic non-small-cell lung cancer</p> <p>TA532 Cenegermin for treating neurotrophic keratitis</p> <p>TA533 Ocrelizumab for treating relapsing–remitting multiple sclerosis</p> <p>August 2018</p> <p>TA 534 Dupilumab for treating moderate to severe atopic dermatitis</p>	<p>On CDF list, but not formulary.</p> <p>On formulary.</p> <p>On formulary.</p> <p>Not NICE recommended.</p> <p>See new product requests above.</p> <p>See new product requests above.</p>	<p>Check if in use & if so, adopt on formulary</p> <p>No further action</p> <p>No further action</p> <p>No further action</p> <p>No further action</p> <p>No further action</p>	<p>WH</p>	<p>09/18</p>	<p>8/18</p> <p>8/18</p> <p>8/18</p> <p>8/18</p> <p>8/18</p>
2018.08.07	MHRA Drug Safety Update – July 2018	<p>Darunavir boosted with cobicistat: avoid use in pregnancy due to risk of treatment failure and maternal-to-child transmission of HIV-1 AS informed the committee that this combination was never prescribed in pregnancy and ID were aware of the alert.</p> <p>Pressurised metered dose inhalers (pMDI): risk of airway obstruction from aspiration of loose objects</p> <p>Eltrombopag (Revolade): reports of interference with bilirubin and creatinine test results</p> <p>Parenteral amphotericin B: reminder of risk of potentially fatal adverse reaction if formulations confused POB informed the committee that HEY had already changed to</p>	<p>Noted.</p> <p>Noted.</p> <p>AM will write to Haematology.</p> <p>Noted.</p>	<p>No further action</p> <p>No further action</p> <p>AM to write</p> <p>No further action</p>	<p>AM</p>	<p>9/18</p>	<p>8/18</p> <p>8/18</p> <p>8/18</p> <p>8/18</p>

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		<p>only use one formulation – Ambisome, to reduce this risk.</p> <p>Medicines taken during pregnancy: please report suspected adverse drug reactions, including in the baby or child, on a Yellow Card</p> <p>Yellow Card Reporting of ADRs AM informed the committee that many junior doctors are unaware of the reporting scheme. DC informed the committee that all ward pharmacists are aware of the scheme and would be able to help junior doctors with filling in reports. DC thought it would be a good idea to highlight the reporting system on Pattie.</p>	<p>Noted.</p> <p>DC will discuss with web services about highlighting on Pattie and ask JM to prepare.</p>	<p>No further action</p> <p>DC to ask web services about “advertising” yellow card scheme on Pattie</p>	DC	9/18	8/18
2018.08.08	Guidelines	<p>Guidance for use of Sodium Valproate and Valproic Acid in Females with child bearing potential</p> <p>Approved, but some typing errors to be corrected on page 1.</p>	Approved with minor amendments.	SG to ask JM to amend	SG	9/18	
2018.08.10	Minutes from SMPC - May 18	E prescribing, signing for medicines administration, valproate and pregnancy, and the removal of IV guides from wards after the introduction of MEDUSA were discussed.	Noted.	No further action			8/18
2018.08.11	Minutes from HERPC - May 18	DC informed the group that, along with POB, he had presented at Product Efficiency Board (PEB), which linked into decisions made at HERPC.	Noted.	No further action			8/18
2018.08.13	Correspondence Received	<p>SG raised two recent safety alert letters:</p> <p>Ulipristal acetate (Esmya) – new contraindication, liver monitoring and restricted indication (01/08/18) Mr Oboh led the trust work when the initial alert was published. Patients who have recently finished the course were to be called back by GPs for monitoring.</p> <p>Radium-223-Dichloride (Xofigo):new restrictions on use due to increased risk of fracture and trend for increased mortality (06/08/18) POB informed the committee that he had already liaised with</p>	<p>AM to write to Mr Oboh to check process</p> <p>Noted. WH to check if on trust formulary.</p>	<p>AM to write</p> <p>WH to check formulary</p>	<p>AM</p> <p>WH</p>	<p>9/18</p> <p>9/18</p>	

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		Andrew Beavis (Head of Radiation Physics) about this.					
2018.08.14	Regional Medicines Optimisation Committee	<p>Insulin: RMOG guidance on formulary decision making</p> <p>Adalimumab</p> <p>Antidotes position statement</p> <p>Free Style Libre</p> <p>FOC Medicines Schemes</p>	<p>To be used for any future application for insulin.</p> <p>In progress for HEY.</p> <p>Already in place.</p> <p>Already considered and in place.</p> <p>To be used if a future application is made, but thought to be in line with existing HEY D&T processes.</p>	No further specific actions at present			8/18
2018.08.16	Chairs approvals	<ul style="list-style-type: none"> • Dimethyl Fumarate – MS in paediatric patient – Dr J Harley • Cediranib – Alveolar Soft Part Sarcoma (ASPS) – Dr G Bozas • Doxycycline IV (unlicensed) - mesh repair of an incisional hernia, with seroma as a late complication – Mr J Tilsed (Previously approved for the use of tetracycline but that was not used, as no injectable form could be sourced. It was felt that doxycycline IV was a more suitable preparation.) 	Noted.				8/18
2018.08.17	Issues to escalate to OQC	None.					8/18
2018.08.18	Any Other	DC asked if “Religious beliefs” could be discussed next time, as	WH to add to next		WH	9/18	

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	Business	UKMI have issued some guidance. AM & AS gave apologies for September D&TC.	agenda. Noted.				
2018.08 19	Date and Time of Next Meeting	Thursday 11 th October – 8.15 – 9.30am, Committee Room, HRI.					