

Drug and Therapeutics Committee – Minutes – Confirmed

Date / Time	Thursday 9 th April 2020 8:15am – 9:20am
Venue	Conference Call
Chair	Prof A Morice, Chair, Professor of Respiratory Medicine
Notes / Action Points	Mrs W Hornsby, Senior Pharmacy Technician
Quorate: Yes / No	Yes
Attendance	Dr O Ogunbambi, Consultant Rheumatologist Mr P O'Brien, Deputy Chief Pharmacist Dr S Raise, GP ER CCG Mr D Corral, Chief Pharmacist, Clinical Director Therapy & Therapeutics Mr K McCorry, Medicines Optimisation Pharmacist, NECS Dr B Ali, GP Hull CCG Prof M Lind, Vice Chair, Professor of Oncology Ms J Morgan, Professional Secretary, Senior Principal Pharmacist – Formulary
Apologies	Dr H Klonin, Consultant Paediatrician

Agenda No	Item	Discussion	Decision Made	Action	Lead	Due Date	Progress /Date Closed
2020.04.01	Apologies	As above					04.20
2020.04.02	Declarations of Interest	None					04.20
2020.04.03	Minutes of the previous meeting	Accepted as a true record					04.20
2020.04.04	Action Tracker	<p>New Product Request ML has written to interventional radiology. JM said there is still the issue over patients being transferred onto wards were nursing staff will be unfamiliar with the treatment, therefore ML will write back requesting a protocol for use be written and JM will share London protocol</p> <p>MHRA DSU AS has reiterated to ID team the risk of Hepatitis B reactivation</p> <p>New Product Requests AM has written to applicant</p> <p>New Product Requests AR has arranged meeting with dermatology regarding guidance compliance</p> <p>New Product Request AR has updated asthma guideline with AM and it was approved by HERPC</p> <p>New Product Request Brolucizumab is on agenda for discussion</p> <p>NICE Guidance TA153 Impetigo has discussed fucidic acid with LC</p> <p>NICE Guidance</p>	<p>Action complete</p> <p>Action complete</p> <p>Action complete</p> <p>Action complete</p> <p>Action complete</p> <p>Action complete</p> <p>Action complete</p>	<p>New Action: ML to write back requesting protocol be written</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>No further action</p>	<p>ML</p> <p>AS</p> <p>AM</p> <p>AR</p> <p>AR</p> <p>JM</p> <p>AR</p>	<p>05.20</p> <p>4.20</p> <p>4.20</p> <p>4.20</p> <p>4.20</p> <p>4.20</p> <p>4.20</p>	

		<p>TA622 Sotagliflozin AR has contacted endocrinology to ask if they wish to use but as yet has had no reply</p> <p>NICE Guidance TA 623 Patisirum NICE indication same as previous new product request application, so WH has added to formulary</p> <p>Aprotonin WH has added to June agenda for review</p> <p>Second Switching Biosimilars DC to ask improvement team to support HUTH pharmacists – WH to add to July agenda</p> <p>Remdesivir AR has had discussion with ID team regarding remdesivir, which is now available via clinical trial</p> <p>Correspondence Received JM has looked into which HUTH consultants have been prescribing they are Dr Tarafder and Dr Goorah. Sodium oxybate is on formulary as via IFR only</p> <p>Correspondence Received AR has forwarded sodium oxybate email to POB</p>	Action complete	No further action	AR		4.20
			Action complete	No further action	WH		4.20
			Action complete	No further action	WH		4.20
			Action complete	No further action	WH		4.20
			Action complete	No further action	WH		4.20
			Action complete	No further action	JM		4.20
			Action complete	No further action	AR		4.20
2020.04.05	New Product Requests	<p>Selexipag – PAH - Dr Faruqi Applied for use with joint service with Newcastle. NHSE approved/funded. It is currently only licensed drug available for this condition for patients who won't survive surgery</p> <p>Brolucizumab (Beovu) - nAMD - Miss L Downey Currently Lucentis and Eylea are used for this indication. In trials Brolucizumab was non-inferior to Eylea in terms of efficacy with less frequent dosing. One of the risks of the injection service is patients not receiving the injections at interval required to maintain sight. The less frequent dosing could help alleviate this risk. Novartis have undertaken surveillance study due to incidence of blindness being recorded but benefit still outweighs risk</p> <p>Liposomal cytarabine–daunorubicin for untreated acute myeloid leukaemia TA552 ARIA Form</p>	Approved	AM to write to applicant and WH to update formulary	AM/ WH	5.20	
			Approved with proviso ophthalmology will adhere to surveillance study				
			KMc to take to CCG		KMC	5.20	
			Approved				

		Dinoprostone from Alprostadil formulary update – Ann Kristensen Principal Pharmacist Request from neonatal team to extend to off license use in children with ductus arteriosus in line with BNFC. Leeds are already using for this indication.	Approved	JM to request D&T minutes from Leeds approving use	JM	5.20	
2020.04.06	NICE Guidance	<ul style="list-style-type: none"> • NG155 Tinnitus: assessment and management • TA625 Recombinant human parathyroid hormone for treating hypoparathyroidism (terminated appraisal) • NG156 Abdominal aortic aneurysm: diagnosis and management • NG158 Venous thromboembolic diseases: diagnosis, management and thrombophilia testing • NG 159 COVID-19 rapid guideline: critical care • NG160 COVID-19 rapid guideline: dialysis service delivery • NG161 COVID-19 rapid guideline: delivery of systemic anticancer treatments • NG88 Heavy menstrual bleeding: assessment and management 	<p>Noted</p> <p>Noted not on formulary</p> <p>Noted</p> <p>Noted</p> <p>All 3 relate to service delivery not relevant to D&T</p> <p>Noted</p>	No further action			4.20
2020.04.07	Intranasal Fentanyl in Children over 1 year in A&E	Request from Miss Hobson orthopaedics- children may be seen in fracture clinic for manipulation which would normally require sedation. Intranasal diamorphine is currently unavailable so would like to use Fentanyl injection off licence as intra nasal application via Mucosal Atomiser Device. Naloxone is available on the ward	<p>JM to discuss with Dr Herrievan and Dr Hobson and ensure all staff are trained in correct use</p> <p>JM to ask AK to discuss with consultants</p>		JM	5.20	
2020.04.08	MHRA Drug Safety Update	Esmya (ulipristal acetate): Suspension of the licence due to risk of serious liver injury Removed from formulary and removed from HERPC Website	KMc to contact practices and ensure treatment is stopped and bloods are monitored		KMc	5.20	

		<p>Tofacitinib: New Measure to minimise risk of venous thromboembolism and of serious fatal infections</p> <p>Baricitinib: Risk of venous thromboembolism</p> <p>SGLT2 inhibitors: monitor ketones in blood during treatment interruption for surgical procedures or acute serious medical illness</p> <p>Benzodiazepines and opioids: reminder of risk of potentially fatal respiratory depression</p>	<p>Noted</p> <p>Noted</p> <p>Noted</p>				
2020.04.09	Minutes SMPC	January 2020 minutes	Noted				4.20
2020.04.10	Minutes from HERPC	January 2020 minutes	Noted				4.20
2020.04.11	Hydroxy-chloroquine	<p>Can only be used to treat Covid patients as part of clinical trial, this has been agreed on, and is in Covid Ethics paper written by DC and AS</p> <p>HUTH have received two private prescriptions written for hydroxychloroquine but have declined to dispense both.</p> <p>POB explained that all research therapy relating to Covid would be done via trials. The process is being well coordinated with a single point of application and a quick turnaround time.</p> <p>POB said there were currently 5 trials for Covid treatments in the trust as well as a large one in primary care using hydroxychloroquine as a short course.</p> <p>DC said if there were any issues with obtaining hydroxychloroquine in primary care for established patients that HUTH would be happy to provide.</p> <p>POB said remdesivir trial would start today and AM said the interferon trial was going well.</p> <p>Tocilizumab will also be going live as an arm of one the trials.</p>	Noted				4.20
2020.04.12	Regional Medicines Optimisation Committees	None this month					4.20

2020.04.13	D&T Attendance 19-20	Dan Roper to be removed as BA now attends to represent Hull CCG DC has struggled trying to find lay member to attend, but will ask again	WH to remove Dr Roper from attendance list and ask DC to look into lay member		WH	5.20	
2020.04.14	Product Requests 19-20	Review postponed					
2020.04.15	Review Unlicensed List	Review postponed					
2020.04.16	Correspondence received	SGLT-2 inhibitors – Dr Patmore – Correspondence in response to MHRA DSU from March to state that endocrinology would be working in line with DSU recommendations	Noted				4.20
2020.04.17	Chairs approvals	Tocilizumab –Dr Baggely had written to AM regarding a young patient on ICU CHH with Acute Respiratory Distress who was not Covid positive requesting Tocilizumab on chairs approval. Veliparib –Breast Cancer – Kate Swain AM has requested minutes from Breast MDT were this treatment was approved without chairs approval.	Approved ML to take up with oncology dept.	AM to tell Dr Baggely committees decision	AM ML	5.20 5.20	
2020.04.18	Issues to escalate to OQC	None this month					
2020.04.19	Any Other Business	SR has seen increase in requests to switch warfarin patients onto DOAC in an attempt to decrease footfall BA has switched many patients from IM B12 to oral B12. POB asked if this was part of national guidance like the warfarin DOAC switch. BA said it was a clinical decision to decrease footfall and that 80% of patients had responded well. POB said the NHS Indemnity had been widened to include	Noted Noted	No further action No further action			

		<p>decisions made in light of the Covid pandemic</p> <p>On behalf of DC POB raised the issue of a 16yr old patient who had drug resistant XDR- B with a wide range of drug resistance. Known genotypic resistance to rifampicin, isoniazid, pyrazinamide, ethambutol, streptomycin and fluoroquinolones. Current Regimen: Bedaquiline, linezolid, moxifloxacin, cycloserine and clofazimine prior to these results. <u>Moxifloxacin resistance now known</u> so stopped and the next agent for addition according to WHO management of drug resistant TB is delamanid.</p> <p>Agreed by local MDT and BTS forum that delamanid should be added to bedaquiline, linezolid, cycloserine and clofazimine to establish a suitable 5-drug regimen.</p> <p>NHSE clinical Commissioning policy Does NOT commission the use of bedaquiline and delamanid together.</p> <p>but would require her to be admitted and receive on C7 Amikacin. Here we could safely introduce and monitor amikacin but in the current climate this is not feasible to bring her back three times a week and arrange proper monitoring.</p>	Approved	NHSE to be informed of committees decision	POB	5.20	
	Date and Time of Next Meeting	<p>Date: Thursday 14th 2020</p> <p>Time: 8.15-9.30am</p> <p>Venue: Conference Call</p>					