

## Drug and Therapeutics Committee – Minutes – Confirmed

### Confirmed

**Date / Time** Thursday 14<sup>th</sup> January 2021 8:15am – 9:30am  
**Venue** Webex  
**Chair** Prof A Morice, Chair, Professor of Respiratory Medicine

**Notes / Action Points** Mrs W Hornsby, Senior Pharmacy Technician  
**Quorate: Yes / No** Yes

**Attendance** Mr P O'Brien, Deputy Chief Pharmacist  
Dr S Raise, GP ER CCG  
Mr K McCorry, Medicines Optimisation Pharmacist, NECS  
Dr B Ali, GP Hull CCG  
Ms J Morgan, Professional Secretary, Principal Pharmacist – Formulary  
Dr A Samson, Consultant Infectious Diseases  
Mr D Corral, Chief Pharmacist, Clinical Director Therapy & Therapeutics  
Mr A Dawood, Consultant Anaesthetist  
Prof M Lind, Vice Chair, Professor of Oncology

**Apologies** Dr O Ogunbambi, Consultant Rheumatologist  
Dr H Klonin, Consultant Paediatrician

Agenda No	Item	Discussion	Decision Made	Action	Lead	Due Date	Progress /Date Closed
2021.01.01	<b>Apologies</b>	As above					
2021.01.02	<b>Declarations of Interest</b>	None this month					
2021.01.03	<b>Minutes of the previous meeting</b>	<b>Approved</b>					
2021.01.04	<b>Action Tracker</b>	<p><b>NICE Guidance</b> JM has chased ARIA form for TA643 and TA644 Entrectinib and TA 649 Polatuzamab vedotid with rituximab and bendamustine and they are on agenda for approval</p> <p><b>NICE Guidance</b> TA 651 Naldemedine for treating opioid induced constipation JM still in discussions with palliative care and gastro to submit application</p> <p><b>New Product Requests</b> WH has updated formulary and AM has written to applicants</p> <p><b>New Product Requests</b> JM has updated migraine guideline which will go to neurology governance for discussion and then come back to D&amp;T.</p> <p><b>New Product Requests</b> Diabetes team has updated T2DM guideline; endocrinology team wish to submit updated guideline with new product request next month.</p> <p><b>NICE Guidance</b> JM has chased ARIA forms</p> <p><b>RMOC</b> WH has added Insulin Glargine toolkit to HERPC agenda</p>	<p>Action complete</p> <p>Ongoing</p> <p>Action complete</p> <p>Action complete</p> <p>Action complete</p> <p>Action complete</p> <p>Action complete</p>	<p>No further action</p> <p>Update next time</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>JM</p> <p>JM</p> <p>WH</p> <p>WH</p> <p>JM</p> <p>JM</p> <p>WH</p>	<p></p> <p>11/20</p> <p></p> <p></p> <p></p> <p></p> <p></p>	<p>01/21</p> <p></p> <p>01/21</p> <p>01/21</p> <p>01/21</p> <p>01/21</p> <p>01/21</p>

		<p><b>Clinical Guidelines</b> JM has discussed Tocilizumab guideline with pharmacy lead for surgery and has circulated the final version</p> <p><b>Chairs Approval</b> Levosimendan is on agenda for discussion</p>	Action complete	No further action	JM		01/21
			Action complete	No further action	AM		01/21
2021.01.05	<b>New Product Requests</b>	<p>Upadacitinib – Rheumatoid Arthritis – Dr Ogunbambi Signed application now received in line with NICE TA665. HUTH can procure for £1 a pack for 90 days from TA publication. Committee previously agreed that patients with a clinical need could receive via chairs approval until Upadactinib is approved by commissioners.</p> <p>Levosimendan – Weaning off ECMO – Dr S May AM pointed out that this application would actually be for weaning off cardiopulmonary bypass not ECMO as stated on the application The committee agreed that the evidence presented was not convincing on face value therefore agreed that AM would study evidence in depth and if he felt that the evidence was still poor then the decision would be to reject.</p> <p>Liraglutide (Saxenda®) TA664 – Managing Overweight and Obesity – Dr K Mohammed TA states that Saxenda can only be supplied via NICE TA664 as part of commercial agreement and this was only open to HUTH unfortunately it is CHCP who provide the Tier 3 Obesity service and they are not eligible for the discount. The committee agreed that the first step would be for this TA to be discussed at CHCP D&amp;T meeting.</p> <p>ARIA FORMS</p> <ul style="list-style-type: none"> <li>• TA653 and TA654 Osimertinib</li> <li>• TA643 Entrectinib for treating ROS1 positive advanced NSCLC</li> <li>• TA649 Polatuzumab vedotin with rituximab and bendamustine for treating relapsed or refractory diffuse large B cell lymphoma</li> <li>• TA655 Nivolumab for advanced squamous NSCLC after chemotherapy</li> </ul>	Continue providing via chairs approval	KM to feedback commissioning decision next time	KMc	02/21	
			AM to study evidence to support decision	AM to feedback to committee next time	AM	02/21	
			JM to speak to CHCP and request discussion at their D&T meeting		JM	02/21	
			Approved				

		<ul style="list-style-type: none"> <li>• TA658 Isatuximab with pomalidomide and dexamethasone for treating relapsed and refractory multiple myeloma</li> </ul>					
2021.01.06	<b>NICE Guidance</b>	<ul style="list-style-type: none"> <li>• TA663 Venetoclax with obinutuzumab for untreated chronic lymphocytic leukaemia</li> <li>• TA664 Liraglutide for managing overweight and obesity</li> <li>• TA665 Upadacitinib for treating severe rheumatoid arthritis</li> <li>• TA666 Atezolizumab with bevacizumab for treating advanced or unresectable hepatocellular carcinoma</li> <li>• TA667 Caplacizumab with plasma exchange and immunosuppression for treating acute acquired thrombotic thrombocytopenic purpura</li> <li>• NG59 Low back pain and sciatica in over 16s: assessment and management</li> <li>• CG177 Osteoarthritis: care and management</li> <li>• CG147 Peripheral arterial disease: diagnosis and management</li> <li>• NG187 COVID-19 rapid guideline: vitamin D</li> <li>• NG 104 Pancreatitis</li> <li>• NG69 Eating disorders: recognition and treatment</li> <li>• NG28 Type 2 diabetes in adults: management</li> <li>• NG17 Type 1 diabetes in adults: diagnosis and management</li> <li>• NG18 Diabetes (type 1 and type 2) in children and young people: diagnosis and management</li> <li>• NG3 Diabetes in pregnancy: management from preconception to the postnatal period</li> <li>• NG188 COVID-19 rapid guideline: managing the long-term effects of COVID-19</li> </ul> <p>AM took this opportunity to congratulate the trials team on their hard work throughout the pandemic and on their many accomplishments regarding pioneering new treatments.</p>	Noted				01/21
2021.01.07	<b>MHRA Drug Safety Update</b>	<p>December 2020 Systemic and Inhaled fluoroquinolones: Small risk of heart valve regurgitation; consider other therapeutic options first in patients at risk</p> <p>Erythromycin:update on known risk of infantile hypertrophic pyloric stenosis</p>	Noted				
			Noted				

		<p>Erythromycin: caution required due to cardiac risks (QT Interval prolongation); drug interaction with rivaroxaban</p> <p>The committee agreed this interaction needed to be highlighted to the ICU team due to use as pro-kinetic; AM commented that Azithromycin would be a suitable alternative to Erythromycin and that Dr Michael Crooks had written a paper comparing the two. JM will ask the lead pharmacist for critical care to review the two and discuss with critical care.</p>	<p>AM to send chapter to AD</p> <p>JM to ask critical care pharmacist to take to critical care meeting for discussion</p>		<p>AM</p> <p>JM</p>	<p>02/21</p> <p>02/21</p>	
2021.01.08	<b>Minutes SMPC</b>	None this month	No further action				01/221
2021.01.09	<b>Minutes from HERPC</b>	None this month	No further action				01/21
2021.01.10	<b>Regional Medicines Optimisation Committees</b>	None this month	No further action				01/21
2021.01.11	<b>Clinical Guidelines</b>	<p>Remdesivir Clinical Commissioning Policy including poster and prescription. Documents were circulated to committee members and approved via email to avoid delay in critical treatment.</p> <p>POB mentioned that HUTH had been approached to share stock of remdesivir with other areas that were struggling to obtain and would move this forward as HUTH currently have enough stock to treat patient numbers.</p>	Approved	No further action			01/21
2021.01.12	<b>CMO COVID 19 Therapeutic Alerts</b>	<p>Azithromycin in the Management of COVID-19 (SARS-CoV-2) Positive Patients</p> <p>Azithromycin is not recommended in the treatment of COVID 19</p> <p>Interleukin-6 inhibitors (tocilizumab or sarilumab) for patients admitted to ICU with COVID-19 pneumonia (adults) Guideline has been updated. Recovery trial is ongoing and should be recruiting as many patients as possible, the committee agreed that trials should be the first port of call for clinicians</p>	Noted				01/21

		wishing to try these two treatments, followed by respiratory and ID. AM said there were enough processes in place to ensure treatment was not prescribed inappropriately. POB pointed out that there was no excess sarilumab stock within the trust and that Tocilizumab is available via a managed system and there is currently enough available within the trust to meet demand. AS pointed out that as Tocilizumab has an anti-inflammatory effect there was a possibility of Hepatitis B reactivation and if this occurred Tenofovir should be prescribed. POB agreed to add this to the guidance.	POB to update guidance		POB	02/21	
2021.01.13	<b>Correspondence received</b>	None this month	No further action				
2021.01.14	<b>Chairs approvals</b>	None this month	No further action				
2021.01.15	<b>Issues to escalate to OQC</b>	None this month	No further action				
2021.01.16	<b>Any Other Business</b>	None this month					
	<b>Date and Time of Next Meeting</b>	<b>Date:</b> Thursday 11th February 2021 <b>Time:</b> 8.15-9.30am <b>Venue:</b> Webex					