

## Drug and Therapeutics Committee – Minutes –Approved

<b>Date / Time</b>	10 <sup>th</sup> March 2016
<b>Venue</b>	The Board Room, Alderson House, HRI
<b>Chair</b>	Dr O Ogunbambi, Consultant Rheumatologist
<b>Notes / Action Points</b>	Mrs Wendy Hornsby, Senior Pharmacy Technician
<b>Quorate: Yes / No</b>	No - due to Junior Doctors strike – discussed with chairman and agreed to go ahead decisions to be ratified at next meeting

<b>Attendance</b>	Mr S Gaines, Professional Secretary, Senior Principal Pharmacist – Clinical Services Mr D Corral, Chief Pharmacist, Clinical Director Therapy & Therapeutics Mr P O'Brien, Deputy Chief Pharmacist Mr K McCorry, Medicines Management, East Riding CSU
-------------------	---

<b>Apologies</b>	Dr H Klonin, Consultant Paediatrician Mrs C Grantham, Medicines Management Nurse Prof A Morice, Chair, Professor of Respiratory Medicine Prof M Lind, Vice Chair, Professor of Oncology Dr F Umerah, Consultant Anaesthetist Dr D Roper, GP Prescribing Lead, Hull CCG
------------------	---

Agenda No	Item	Discussion	Decision Made	Action	Lead	Due Date	Progress /Date Closed
2016.03.01	<b>Apologies</b>	As above.					
2016.03.02	<b>Declarations of Interest</b>	None	Noted.	No further action			03/16
2016.03.03	<b>Minutes of the previous meeting</b>	The minutes were accepted as a true record.	Noted.	No further action			03/16
2016.03.04	<b>Action Tracker</b>	<p>Opioid Conversion Chart Awaiting amended version before adding to website.</p> <p>New Product Requests ML has written to applicants and formulary has been updated.</p> <p>NICE Guidance Hepatitis C medicines have been added to main body of formulary.</p> <p>NICE Guidance NG24 Blood Transfusion – FU not present to discuss if raised within surgery dept.</p> <p>Dalteparin/Tinzaparin Switch DC informed the committee that following discussions at relevant Trust committees and HERPC, the plans to switch from dalteparin to tinzaparin will no longer go ahead, mainly due to safety concerns.</p> <p>Correspondence Received ML has written to Mr Burnett regarding approval of tafluprost</p>	<p>WH to chase</p> <p>Action complete</p> <p>Action complete</p> <p>Discuss next time</p> <p>WH to remove from tracker</p> <p>Action complete</p>	<p>No further action</p> <p>No further action</p> <p>FU to feed back next time</p> <p>No further action</p> <p>No further action</p>	<p>WH</p> <p>FU</p>	<p>11/15</p> <p>01/16</p>	<p>03/16</p> <p>03/16</p> <p>03/16</p>

		<p>New Product Requests AM has written to applicants and WH has updated formulary.</p>	Action complete	No further action			03/16
		<p>New Product Requests WH has liaised with TV team regarding which Cutimed products should be added to formulary.</p>	Action complete	No further action			03/16
		<p>New Product Requests SG has discussed with MM the need to update the constipation guidelines</p>	Action complete	No further action			03/16
		<p>NICE Guidance NG28 Type II Diabetes – SG has discussed with endocrinology pharmacist</p>	Action complete	No further action			03/16
		<p>NICE Guidance Apremilast – WH has added “for existing patients only” to formulary. POB confirmed that existing patients would continue to receive free product, as per the signed agreement with the manufacturer.</p>	Action complete	No further action			03/16
		<p>Correspondence Received – CCG representation on D&amp;TC AM has written to Dr Roper again expressing the need for a Hull CCG GP representative to attend D&amp;T. Dr Roper has responded saying that due to other commitments he will be unable to attend D&amp;T on a regular basis, however he will look at the papers and provide CCG input where he can.</p>	Action complete	No further action			03/16
		<p>Correspondence Received – CCG representation on D&amp;TC KMcC fed back that there is no ER GP available currently in the CCG who can regularly attend D&amp;T. A prescribing lead was in the process of being recruited.</p>	Noted	No further action			03/16
		<p>AOB SG has requested dermatology submit a paper recommending proposed changes to emollients.</p>	Action complete, on March agenda	No further action			03/16

2016.03.05	<b>New Product Requests</b>	<p>Natamycin Eye Drops – Mr Stewart Product is currently licensed in the US but not the UK, even though it is deemed to be currently the most appropriate treatment for fungal keratitis. The committee were happy with the application but would like a view from microbiology at the April meeting.</p> <p>Ivermectin Cream – Dr Zaman The committee had a long discussion comparing the product in efficacy and cost with metronidazole and agreed that the supporting evidence was good. The application was unclear as to where ivermectin would lie in the treatment pathway, would it completely replace metronidazole or be a second line treatment.</p> <p>Brimonidine Gel – Dr Zaman The committee reviewed the evidence and agreed that brimonidine gel was an effective and safe treatment. KMcC informed the committee that a previous CSU TAG had recommended brimonidine gel not be routinely commissioned. The committee then agreed to approve, but await feedback on the CCG commissioning position.</p> <p>Panobinostat – Dr Allsup Approved in line with NICE TA 380 Panobinostat for treating multiple myeloma after at least 2 previous treatments.</p>	<p>Approved subject to ratification at next meeting and input from microbiology</p> <p>Deferred - OO to write to Dermatology and request further clarification of treatment pathway</p> <p>Approved, but await decision on whether CCGs agree to commission</p> <p>Approved in line with NICE TA</p>	<p>All recommendations to be ratified at April meeting before information applicants and updating formulary – WH to add to agenda</p> <p>OO to write to Dr Zaman for clarification</p> <p>KMcC to feed back next time regarding commissioning</p> <p>Ratify in April, as above</p>	<p>WH</p> <p>OO</p> <p>KMcC</p>	<p>04/16</p> <p>04/16</p> <p>04/16</p>	
2016.03.06	<b>NICE Guidance</b>	<p><b>NICE Guidance</b></p> <p><u>January 2016</u></p> <ul style="list-style-type: none"> <li>TA381 Olaparib for maintenance treatment of relapsed, platinum-sensitive, BRCA mutation-positive ovarian, fallopian tube and peritoneal cancer after response to second-line or subsequent platinum-based chemotherapy</li> </ul>	<p>Not on formulary, need application</p>	<p>SG to request application</p>	<p>SG</p>	<p>04/16</p>	

		<ul style="list-style-type: none"> <li>TA378 Ramucirumab for treating advanced gastric cancer or gastro-oesophageal junction adenocarcinoma previously treated with chemotherapy</li> </ul>	Not recommended, not on formulary	No further action			03/16
		<ul style="list-style-type: none"> <li>TA 379 Nintedanib for treating idiopathic pulmonary fibrosis (TA379)</li> </ul>	On formulary	No further action			03/16
		<ul style="list-style-type: none"> <li>TA377 Enzalutamide for treating metastatic hormone relapsed prostate cancer with bone metastases</li> </ul>	On CDF list, need application	SG to request application	SG	04/16	
		<ul style="list-style-type: none"> <li>TA376 Radium-223 dichloride for treating hormone-relapsed prostate cancer with bone metastases</li> </ul>	On CDF list, need application	SG to request application	SG	04/16	
		<ul style="list-style-type: none"> <li>TA380 Panobinostat for treating multiple myeloma after at least 2 previous treatments</li> </ul>	Approved as above	No further action			03/16
		<ul style="list-style-type: none"> <li>TA382 Eltrombopag for treating severe aplastic anaemia refractory to immunosuppressive therapy (terminated appraisal)</li> </ul>	Terminated appraisal	No further action			03/16
		<ul style="list-style-type: none"> <li>TA375 Adalimumab, etanercept, infliximab, certolizumab pegol, golimumab, tocilizumab and abatacept for rheumatoid arthritis not previously treated with DMARDs or after conventional DMARDs only have failed</li> </ul>	All agents on formulary	No further action			03/16
		<ul style="list-style-type: none"> <li>NG33 Tuberculosis – agreed to add list of all TB drugs to formulary, so they could be found if searched for</li> </ul>	Formulary to be updated	WH to update formulary	WH	04/16	
		<ul style="list-style-type: none"> <li>NG19 Diabetic foot problems: prevention and management</li> </ul>	Noted – no issues	No further action			03/16
		<p><u>February 2016</u></p> <ul style="list-style-type: none"> <li>CG137 Epilepsies – Diagnosis &amp; Management (Update)</li> </ul>	Both updated to include new information regarding valproate use in pregnancy	No further action			03/16
		<ul style="list-style-type: none"> <li>CG185 Bipolar disorder – Assessment &amp; Management (Update)</li> </ul>		No further action			03/16

		<ul style="list-style-type: none"> <li>• NG33 Tuberculosis (Update)</li> </ul>	Noted	No further action			03/16
		<ul style="list-style-type: none"> <li>• NG34 Sunlight Exposure Risks &amp; Benefits</li> </ul>	Noted	No further action			03/16
		<ul style="list-style-type: none"> <li>• NG35 Myeloma – Diagnosis &amp; Management</li> </ul>	All agents on formulary	No further action			03/16
		<ul style="list-style-type: none"> <li>• NG36 Cancer of the upper aerodigestive tract assessment and management in people aged 16 and over</li> </ul>	Noted	No further action			03/16
		<ul style="list-style-type: none"> <li>• NG 37 Fractures (complex): assessment and management</li> </ul>	Noted	No further action			03/16
		<ul style="list-style-type: none"> <li>• NG38 Fractures (non-complex): assessment and management</li> </ul>	All agents on formulary	No further action			03/16
		<ul style="list-style-type: none"> <li>• NG39 Major trauma: assessment and initial management</li> </ul>	All agents on formulary	No further action			03/16
		<ul style="list-style-type: none"> <li>• NG40 Major trauma: service delivery</li> </ul>	Noted	No further action			03/16
		<ul style="list-style-type: none"> <li>• NG41 Spinal injury: assessment and initial management</li> </ul>	All agents on formulary	No further action			03/16
		<ul style="list-style-type: none"> <li>• TA384 Nivolumab for treating advanced (unresectable or metastatic) melanoma</li> </ul>	Not on formulary, need application	SG to request application	SG	04/16	
		<ul style="list-style-type: none"> <li>• NG 42 Motor neurone disease: assessment and management</li> </ul>	All agents on formulary	No further action			03/16
		<ul style="list-style-type: none"> <li>• NG 43 Transition from children's to adults' services for young people using health or social care services</li> </ul>	Noted	No further action			03/16
		<ul style="list-style-type: none"> <li>• TA385 Ezetimibe for treating primary heterozygous-familial and non-familial hypercholesterolaemia</li> </ul>	On formulary	No further action			03/16

		<ul style="list-style-type: none"> <li>TA383 TNF-alpha inhibitors for ankylosing spondylitis and non-radiographic axial spondyloarthritis</li> <li>CG72 Attention deficit hyperactivity disorder: diagnosis and management (updated)</li> </ul>	All agents on formulary	No further action			03/16
			Noted	No further action			03/16
2016.03.07	<b>MHRA Drug Safety update</b>	<p><u>January 2016</u> Nicorandil – 2<sup>nd</sup> line for angina risk of ulcer complications.</p> <p>IUD – recommend prescribe by brand name. HEY currently use Mirena brand only and will continue.</p> <p><u>February 2016</u> Valproate – risk of abnormalities in pregnancy Pharmacy should issue warning card as requested</p> <p>Spironolactone – risk of potentially fatal hyperkalaemia</p>	OO to highlight to EAU and AMU.	OO to write to AMU & EAU	OO	04/16	
			Noted	No further action			03/16
			Noted	WH to ask JR to add to pharmacy governance agenda	WH	04/16	
			Noted	No further action			03/16
2016.03.08	<b>Minutes from Hull &amp; East Riding Prescribing Committee</b>	<p>KMcC updated the committee on recent ER CCG decisions.</p> <ul style="list-style-type: none"> <li>Amantadine for retarded ejaculation – not for routine commissioning</li> <li>AREDs &amp; AREds2 – not for routine commissioning – current patients to be reviewed with a view to stopping treatment.</li> <li>Ulipristal – ER CCG would like a SCF to be produced</li> </ul> <p>These products still need to be discussed by Hull Planning and Commissioning Committee and feedback will be given at the next HERPC meeting.</p>	Noted	No further action at present			03/16
2016.03.09	<b>Correspondence Received</b>	Dermatology submitted a paper requesting changes to chapter 13 of the formulary. This was agreed in principle but will be	Approved subject to	No further action (will be added to			03/16

		ratified next time.  Dermatology requested that Timodine and Trimovate be added to formulary, as individual components are formulary items but these two combination products have not been listed by brand name. Committee agreed to list them on formulary by brand, for completeness.	ratification at next meeting	April agenda)  WH to amend formulary	WH	05/16	
2016.03.10	<b>Chairs Approvals</b>	None this month					03/16
2016.03.11	<b>Issues to escalate to OQC</b>	None this month					03/16
2016.03.12	<b>Any other Business</b>	POB mentioned that Boehringer have offered some free stock of Praxbind (idarucizumab) which will be kept in the emergency cupboard. A new product request for this product has just been submitted and will be discussed at the next D&T meeting. The committee agreed to receipt and holding of the stock in Pharmacy until the April meeting.  KMc mentioned that a locum consultant Immunologist has been requesting GPs prescribe Dymista, which is non formulary. SG will liaise with MM to request this be stopped.	Noted  SG to pass query onto MM	No further action	SG	04/16	03/16
2016.03.13	<b>Date and Time of Next Meeting</b>	Thursday 14 <sup>th</sup> April 2016, 8.15am – 9.30am. The Board Room, Alderson House, HRI					