

Drug and Therapeutics Committee – Minutes –approved

Date / Time	14 th January 2016
Venue	The Board Room, Alderson House, HRI
Chair	Prof A Morice, Chair, Professor of Respiratory Medicine
Notes / Action Points	Mrs Wendy Hornsby, Senior Pharmacy Technician
Quorate: Yes / No	Yes

Attendance	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 Mrs J Lyon, Head of Medicines Management, North Yorks and Humber CSU Prof M Lind, Vice Chair, Professor of Oncology Mrs C Grantham, Medicines Management Nurse Dr H Klonin, Consultant Paediatrician Dr E Williamson, Consultant Microbiologist
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Apologies	Dr O Ogunbambi, Consultant Rheumatologist Mr P Renwick, Vascular Surgeon
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Agenda No	Item	Discussion	Decision Made	Action	Lead	Due Date	Progress /Date Closed
2016.01.01	Apologies	As above.					
2016.01.02	Declarations of Interest	None	Noted.	No further action			01/16
2016.01.03	Minutes of the previous meeting	The minutes were accepted as a true record.	Noted.	No further action			01/16
2016.01.04	Action Tracker	<p>Opioid Conversion Chart Awaiting amended version before adding to website.</p> <p>New Product Requests ML has not yet written to applicants but formulary has been updated.</p> <p>New Product Requests SG has asked endocrinology for their preferred first line option. They have responded with empagliflozin and the formulary has been amended to say this.</p> <p>NICE Guidance Vortioxetine has been added to formulary as via chairs approval, prior to discussion at HFT & HERPC.</p> <p>NICE Guidance Hepatitis C medicines list still to be added to main body of formulary. LC (Infectious Diseases Pharmacist) is updating format.</p> <p>NICE Guidance TA368 Apremilast - SG had checked - to be discussed on agenda under this month's NICE guidance.</p>	<p>WH to chase.</p> <p>ML to write.</p> <p>Action complete.</p> <p>Action complete.</p> <p>WH liaising with ID pharmacist.</p> <p>Action complete.</p>	<p>WH to chase</p> <p>ML to write</p> <p>No further action</p> <p>No further action</p> <p>WH to update formulary</p> <p>No further action</p>	<p>WH</p> <p>ML</p> <p></p> <p></p> <p>WH</p>	<p>11/15</p> <p>01/16</p> <p></p> <p></p> <p>01/16</p>	<p></p> <p></p> <p>01/16</p> <p>01/16</p> <p></p> <p>01/16</p>

		NICE Guidance NG 24 Blood Transfusion – SG has asked Dr Saleh to discuss at thrombosis committee.	Action complete.	No further action			01/16
		NICE Guidance NG24 Blood Transfusion – FU not present to discuss if raised within surgery dept.	FU not present.	FU to feed back next time	FU	01/16	
		MHRA DSU Vemurafenib – ML has discussed potentiation of radiation toxicity with Prof Maraveyas.	Action complete.	No further action			01/16
		Dalteparin/Tinzaparin Switch KMc had provided figures to HEY pharmacy on costs to primary care.	Action complete.	No further action			01/16
		Dalteparin /Tinzaparin Switch WH added to MMIG agenda for discussion.	Action complete.	No further action			01/16
		Dalteparin/Tinzaparin Switch DC had added to OGC agenda for discussion, but the meeting was cut short and therefore not discussed. This will be on the February agenda for discussion.	Discuss next time.	DC to feed back next time	DC	01/16	
		The committee further discussed issues surrounding the switch and agreed to discuss further once outcomes from OQC, HERPC and Safe Medication Practice Committee were known.					
		Guidelines for Acute Perioperative Pain Relief in Adults SG has meet with Caroline Weetman to make amend minor amendments to the guideline.	Action complete.	No further action			01/16
		Correspondence Received ML has not yet written to Mr Burnett about approval of Tafluprost, but it has been added to formulary.	ML to write.	ML to write	ML	01/16	
		Correspondence Received Nutilus switch to Nutilus clear was discussed at MMIG and it was agreed to switch at HEY and review the situation in 6 months'	Action complete.	No further action			01/16

		time.					
2016.01.05	New Product Requests	<p>Sucroferric oxyhydroxide (Velphoro) – Katherine Durrans (Highly Specialised Renal Dietician) The application was submitted with a view to phasing out lanthanum and swapping patients over to Velphoro. First line choices would still be calcium-based products and sevelamer as Sucroferric Oxyhydroxide has a higher rate of adverse effects compared to sevelamer.</p> <p>Cutimed Sorbact Gel – Karen Harrison/Angela Oswald This application was submitted by the Tissue Viability Team who have already discussed this at the wound group and recommended it for use. The dressing is interactive so will be sourced via pharmacy.</p> <p>Naloxegol – Dr Elaine Boland Application submitted in line with TA345. The committee agreed that the HERPC constipation guideline would need to be updated, and should include the reinforced message that prophylactic laxatives should always be considered for patients prescribed opioids.</p> <p>Lubiprostone – Prof G Duthie Application submitted in line with TA318. The committee agreed that the constipation guideline would need to emphasize that lubiprostone was available for short term treatment (2-4 weeks) via gastroenterology or GI surgery specialists only.</p>	<p>Approved.</p> <p>Approved.</p> <p>Approved for consultant use, to ensure it was used appropriately.</p> <p>Approved for specialist use as a red drug.</p>	<p>AM to write to applicants WH to update formulary</p> <p>WH to liaise with applicant over which size products from range are required.</p> <p>SG to liaise with MM over update of guidance</p> <p>SG to liaise with MM over guidance</p>	<p>AM/WH</p> <p>WH</p> <p>SG</p> <p>SG</p>	<p>02/16</p> <p>02/16</p> <p>02/16</p> <p>02/16</p>	
2016.01.06	NICE Guidance	<p>NICE Guidance</p> <ul style="list-style-type: none"> • NG27 Transition between inpatient hospital settings and community or care home settings for adults with social care needs • NG28 Type 2 Diabetes in adults: management. This guideline includes reference to repaglinide in note 3, page 20 but the Trust formulary includes nataglinide only. 	<p>Noted.</p> <p>Noted. SG to ask ML to discuss with endocrinology.</p>	<p>No further action</p> <p>SG to liaise with ML</p>	<p></p> <p>SG</p>	<p></p> <p>02/16</p>	<p>01/16</p>

		<p>Diabetes Pharmacist (ML) to discuss this with the endocrinology team.</p> <ul style="list-style-type: none"> NG29 Intravenous fluid therapy in children and young people in hospital HK advised the committee that the HEY guideline had just been updated but that she would be reviewing this again. NG30 Oral health promotion: general dental practice Fluoride toothpaste & mouthwash were already formulary. NG31 Care of dying adults in the last days of life SG had already asked MM to include Just In Case box prescribing on the next MMIG agenda for discussion. NG32 Older people: independence and mental wellbeing TA369 Ciclosporin for treating dry eye disease that has not improved despite treatment with artificial tears TA370 Bortezomib for previously untreated mantle cell lymphoma TA371 Trastuzumab emtansine (Kadcyla) for treating HER2-positive, unresectable locally advanced or metastatic breast cancer after treatment with trastuzumab and a taxane – not recommended by NICE, however ML commented that he currently had a patient in full remission who had received this treatment. TA 372 Apremilast for treating active psoriatic arthritis – not recommended by NICE. Will not be commissioned by the CCGs, so only available to new patients via IFR. 	<p>HK will discuss with paediatric Pharmacist (AK) outside of meeting.</p> <p>Noted.</p> <p>Noted.</p> <p>Noted.</p> <p>Noted, Ikervis 0.2% on formulary.</p> <p>Noted, on formulary.</p> <p>Was on CDF list. Current patients can continue with treatment.</p> <p>Was on Trust formulary.</p>	<p>No further action</p> <p>No further action</p> <p>No further action for D&T</p> <p>No further action</p> <p>No further action</p> <p>No further action</p> <p>WH to amend formulary to say for existing patients only</p>			<p>01/16</p> <p>01/16</p> <p>01/16</p> <p>01/16</p> <p>01/16</p> <p>01/16</p> <p>01/16</p> <p>02/16</p>
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2016.01.07	MHRA Drug Safety update December 2015	<ul style="list-style-type: none"> Thalidomide – decreased dose in patients >75yrs Mycophenolate not to be used in pregnancy Bisphosphonates risk of osteonecrosis 	Noted, all formulary	No further action required			01/16
2016.01.11	Correspondence Received	<p><u>CCG Representative at D&T Committee</u> AM has received a reply from Dr Dan Roper of the Hull CCG explaining that the job description for the new Hull GP prescribing lead has been altered to include their attendance at HERPC, only not D&TC. ER CCG was currently advertising for a GP prescribing lead, so the post was vacant. In spite of this, the committee still felt that GP attendance at D&T was valuable and AM agreed to respond to Dr Roper. JLy agreed that she would also discuss with the CCG's, although it is possible with the CSU restructuring this could be JLy's last meeting. The chair thanked JLy for her valuable contribution to D&T committee.</p>	<p>AM to write to Dr Roper.</p> <p>JLy to discuss with CCG's.</p>		<p>AM</p> <p>JLy</p>	<p>02/16</p> <p>02/16</p>	
2016.01.01	Chairs Approvals	<ul style="list-style-type: none"> Thiotepa – CNS Lymphoma – Dr James Bailey Deferiprone – Superficial Siderosis – Dr A Raman Tacrolimus SR (Envarsus Brand) – Prophylaxis of Organ Rejection – Dr M Edey Genvoya (Elvitegravir/Cobicistat/Emtricitabine/Tenofovir 	Noted.	No further action			01/16

		<p>Alafenamide Fumarate) – HIV – Dr Thaker</p> <ul style="list-style-type: none"> Natamycin Eye Drops – Fusarium Keratitis – Mr Stewart Recommended on Royal College Guidelines, so Mr Stewart will submit an full new drug application soon. 					
2016.01.13	Issues to escalate to OQC	Potential dalteparin to tinzaparin switch, as above.	Concerns to be discussed at OQC.	DC to discuss at OQC, as D&TC representative	DC	02/16	
2016.01.14	Any other Business	<p>SG informed the committee of a new product Idarucizumab Praxbind®, which is manufactured by Boehringer as a reversal agent for dabigatran. Boehringer have offered two free vials for treatment of the first patient. Thrombosis committee have discussed the product and expect that Haematology will submit a new product request to D&TC, as well as reviewing the reversal of anticoagulation guideline.</p> <p>SG informed the committee that a meeting had taken place between pharmacy, primary care and dermatology to discuss apremilast and emollients. The committee agreed that if dermatology wished to remove/add several emollients to the formulary it would be acceptable to submit a paper detailing the proposed changes, rather than a large number of new product requests for similar items.</p>	<p>Await new drug application from Haematology.</p> <p>SG to feedback to MM.</p>	No further action	SG	02/16	01/16
2016.01.01	Date and Time of Next Meeting	Thursday 11 th February 2016, 8.15am – 9.30am. The Board Room, Alderson House, HRI					