

## Drug and Therapeutics Committee – Minutes –approved

<b>Date / Time</b>	Thursday 9 <sup>th</sup> February 2017
<b>Venue</b>	The Committee Room, Alderson House, HRI
<b>Chair</b>	Prof A Morice, Chair, Professor of Respiratory Medicine
<b>Notes / Action Points</b>	Mrs Susan Greene, Senior Pharmacy Technician (SG) & Wendy Hornsby

**Quorate: Yes / No** Yes

<b>Attendance</b>	Mr S P Gaines, Professional Secretary, Senior Principal Pharmacist – Clinical Services (SPG) Mr P O'Brien, Deputy Chief Pharmacist Dr A Sampson, Infectious Diseases Consultant Dr H Klonin, Consultant Paediatrician Mr K McCorry, Medicines Management, East Riding Dr O Ogunbambi, Consultant Rheumatologist Mr D Corral, Chief Pharmacist, Clinical Director Therapy & Therapeutics Prof M Lind, Vice Chair, Professor of Oncology Dr F Umerah, Consultant Anaesthetist Mrs S Phillips, Lay Member
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<b>Apologies</b>	Dr Roper, Chair, Hull CCG Caroline Grantham, Medicines Management Nurse, HEY
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Agenda No	Item	Discussion	Decision Made	Action	Lead	Due Date	Progress /Date Closed
2017.02.01	<b>Apologies</b>	As above. Mrs S Phillips was welcomed as the new D&T Committee Lay Member.					
2017.02.02	<b>Declarations of Interest</b>	None.					
2017.02.03	<b>Minutes of the previous meeting</b>	The minutes were accepted as a true record.					02/17
2017.02.04	<b>Action Tracker</b>	<b>NICE Guidance – July 16</b>  TA392 Adalimumab for treating moderate to severe hidradenitis suppurativa. “Dermatology” to be added to formulary.	Action complete				02/17
2017.02.04	<b>Action Tracker</b>	<b>NICE Guidance November 16</b> TA 417-Nivolumab for previously treated advance renal cell carcinoma – ML to request application.  ML informed the committee that a new chairperson would be appointed to the chemotherapy committee and once in post the committee would look at all positive NICE TA’s requiring applications.  <b>MHRA Drug Safety Update – October 2026</b>  OO has discussed etoricoxib with Rheumatology colleagues.  <b>Bisphosphonates as supportive therapy for Breast Cancer</b>  ML had assessed the San Antonio Breast Cancer Symposium paper but felt that the data from this study was insufficient, as the difference between groups was not statistically significant.	Action complete  SG to send list of TA’s requiring applications to ML  Action complete  Action complete	SG to prepare and send list	SG	03/17	02/17   02/17  02/17

		<p>POB has liaised with Leeds and was awaiting a reply about what they do.</p> <p>Once Leeds replied, ML would write a local protocol - to be sent to HERPC for further discussion.</p> <p><b>New Product Request</b>  Ferracru (Ferric Maltol) - Dr S Sebastian  ML has written to Dr Sebastian regarding follow up and stopping treatment and is awaiting a reply.</p> <p><b>NICE Guidance</b>  TA420 Ticagrelor – Guideline had been reviewed regarding duration of treatment &amp; sent to HERPC.</p> <p>TA421/422/423/424 – ML had asked for new product applications.</p> <p><b>Correspondence Received</b>  Management of High Output Stoma and Enterocutaneous Fistulae in Adults guideline was discussed at HERPC.</p>	<p>Action complete</p> <p>ML to write protocol</p> <p>Action complete</p> <p>Action complete</p> <p>Action complete</p>	<p>ML to send to SG for HERPC</p>	<p>ML</p>	<p>03/17</p>	<p>02/17</p> <p>02/17</p> <p>02/17</p> <p>02/17</p> <p>02/17</p>
2017.02.05	<b>New Product Requests</b>	<p><b>Mepolizumab – Dr M Crooks</b>  Approved in line with NICE TA431, but NHSE have not yet commissioned, therefore awaiting this. Mepolizumab will be a red drug and require Blueteq entry, following regional MDT discussions.</p> <p><b>Fluticasone furoate and vilanterol (Relvar Ellipta) – Dr S Faruqi</b>  Approved for patients with severe asthma who are on DOT, to determine if they improve on regular supervised treatment. Proposed as a red drug for HERPC and not for primary care use. AM is awaiting evidence papers from AstraZeneca on Symbicort, as this is also licensed as a once daily dose as “Symbicort maintenance and reliever therapy”.  POB is to discuss &amp; clarify commissioning DOT with the respiratory service manager.</p> <p><b>Cabozantinib – Prof A Maraveyas</b>  Approved subject to NICE. Approved as free of charge (FOC) use, prior to NICE TA due in June/17.</p>	<p>Approved, in line with TA431 &amp; future NHSE commissioning</p> <p>Approved for DOT only, prescribed by HEY</p> <p>POB to clarify commissioning</p> <p>Approved for FOC use</p>	<p>AM to write applicants and SG will update formulary</p> <p>POB to ask service manager</p> <p>POB to check FOC status</p>	<p>AM/SG</p> <p>POB</p> <p>POB</p>	<p>03/17</p> <p>03/17</p> <p>03/17</p>	

2017.02.06	NICE Guidance	<p><b>NICE Guidance January 2017</b></p> <p><b>NG62 - <a href="#">Cerebral palsy in under 25s: assessment and management   Guidance and guidelines   NICE</a></b></p> <p><b>NG 63 - <a href="#">Antimicrobial stewardship: changing risk-related behaviours in the general population   Guidance and guidelines   NICE</a></b></p> <p><b>TA427 - <a href="#">Pomalidomide for multiple myeloma previously treated with lenalidomide and bortezomib   Guidance and guidelines   NICE</a></b></p> <p><b>TA428 - <a href="#">Pembrolizumab for treating PD-L1-positive non-small-cell lung cancer after chemotherapy   Guidance and guidelines   NICE</a></b></p> <p><b>TA429 - <a href="#">Ibrutinib for previously treated chronic lymphocytic leukaemia and untreated chronic lymphocytic leukaemia with 17p deletion or TP53 mutation   Guidance and guidelines   NICE</a></b></p> <p><b>TA430 - <a href="#">Sofosbuvir–velpatasvir for treating chronic hepatitis C   Guidance and guidelines   NICE</a></b></p> <p><b>TA431 - <a href="#">Mepolizumab for treating severe refractory eosinophilic asthma   Guidance and guidelines   NICE</a></b></p> <p><b>CG62 - <a href="#">Antenatal care for uncomplicated pregnancies (update)</a></b></p>	<p>Noted - No formulary issues.</p> <p>Noted – not for acute hospitals</p> <p>Non-formulary</p> <p>Non-formulary</p> <p>On CDF List only</p> <p>Sofosbuvir on formulary but velpatasvir is not</p> <p>Approved as above</p> <p>Noted - No formulary issues.</p>	<p>ML to seek Application</p> <p>ML to seek Application</p> <p>ML to seek Application</p> <p>POB to seek Application</p>	<p>ML</p> <p>ML</p> <p>ML</p> <p>POB</p>	<p>03/17</p> <p>03/17</p> <p>03/17</p> <p>03/17</p>	<p>02/17</p> <p>02/17</p> <p>02/17</p> <p>02/17</p> <p>02/17</p> <p>02/17</p>
2017.02.07	MHRA Drug Safety Update	<p><b>January 2017</b></p> <p>Direct-acting antiviral interferon-free regimens to treat chronic hepatitis C: risk of hepatitis B reactivation.</p>	All noted				02/17

		<p>Direct-acting antivirals to treat chronic hepatitis C: risk of interaction with vitamin K antagonists and changes in INR.</p> <p>Apremilast (Otezla ▼): risk of suicidal thoughts and behaviour.</p> <p>Intravenous N-acetylcysteine (NAC) for paracetamol overdose: reminder of authorised dose regimen; possible need for continued treatment with NAC.</p>					
2017.02.08	<b>Minutes from SMPC</b>	None					02/17
2017.02.09	<b>Minutes from HERPC</b>	None					02/17
2017.02.10	<b>Correspondence Received</b>	<p><b>Pecfent (Fentanyl Nasal Spray) – Dr L O’Toole</b> This product was originally requested and approved for Palliative Care only. Dr O’Toole requested that it be available for Oncology patients with Head and Neck Cancers, where other options were unsuitable. This was approved by the committee.</p> <p><b>Tiotropium (Braltus) 10microgram Inhalation Powder- A Cracknell</b> Tiotropium is already on the formulary. As this formulation was cheaper than Spiriva there was no reason to not use it if appropriate for a patient e.g. that was admitted already on it.</p> <p><b>Stalevo &amp; generics</b> Jane Morgan had received feedback from the MHRA. They have received 19 UK ADR reports with the original branded multiple component product Stalevo, of which 8 were “drug ineffective”. With Sastravi there was only 1 single report that was “drug ineffective”. There were no reports for Stanek. Dr Ming had reported that a small cohort of patients were having adverse effects from the switch over from Stalevo. It was agreed that AM would write to Dr Ming to propose that we continue to use the Sastravi product at HEY, as there were cost savings and there appeared to be no safety concerns raised by the MHRA ADR data. There was further discussion by the committee regarding what</p>	<p>Update formulary to include use for head and neck cancer, initiated by Consultant Oncologist.</p> <p>Braltus approved for use</p> <p>AM to propose to Dr Ming that Sastravi is used instead of Stalevo.</p>	<p>SG to amend formulary &amp; discuss status at next HERPC</p> <p>SG to add to Pharmacy computer &amp; ensure stock available</p> <p>AM to write to Dr Ming.</p>	<p>SG</p> <p>SG</p> <p>AM</p>	<p>03/17</p> <p>03/17</p> <p>03/17</p>	

		happened with other branded products - when patients were changed onto a generic version, or were swapped from one generic version to another generic version. It was felt that this warranted greater discussion and should be put on the next agenda.	To be discussed at D&TC next time	SG to add to next agenda .	SG	03/17	
2017.02.11	<b>Chairs approvals</b>	<p><b>Thalidomide - Orofacial Granulomatosis – Dr T Diggory</b> There was no record on the Pharmacy computer of this being issued. AM to write to Dr Diggory to ask about the patient. POB to check regarding funding.</p> <p><b>Intra vesical formalin - intractable haematuria due to radiation cystitis - Mr N Smith</b></p> <p><b>Xultophy (Insulin degludec &amp; liraglutide) - Diabetes - Dr B Allen</b> An IFR had been done and approved.</p>	<p>Noted.</p> <p>Noted. Not supplied from Pharmacy.</p> <p>Noted.</p>	<p>AM to write to Dr Diggory. POB to check funding.</p> <p>No Further Action</p> <p>No Further Action.</p>	<p>AM</p> <p>POB</p>	<p>03/17</p> <p>03/17</p>	<p>02/17</p> <p>02/17</p>
2026.12.12	<b>Issues To Escalate To Operational Quality Committee</b>	None.					03/17
2026.12.13	<b>Any Other Business</b>	None.					03/17
2026.12.15	<b>Date and Time of Next Meeting</b>	<p><b>Date – 9/3/17</b> <b>Time - 8.15am-9.30am</b> <b>Venue – Board Room, HRI</b></p>					