

Hull and East Riding Prescribing Committee Minutes – Confirmed

Date / Time	Wednesday 25th March 2020, 1pm
Venue	Conference Call
Chair	Dr S Raise, GP Prescribing Lead, ER
Notes / Action Points	Mrs W Hornsby, Senior Pharmacy Technician, HUTH
Quorate: Yes / No	Yes

Miss J Morgan, Senior Principal Pharmacist, HUTH
Mr P Davis, Strategic Lead Primary Care, Hull, CCG
Dr W Chong, Chief Pharmacist, HTFT
Mr K McCorry, Senior Pharmacist, NECS
Prof A Morice, Professor of Respiratory Medicine, HUTH
Mrs E Baggely, Head of Medicines Service, CHCP
Mrs J Clark Chief Officer Local Pharmaceutical Committee LPC
Mr D Corral, Chief Pharmacist, Clinical Director Therapy & Therapeutics, HUTH

Apologies	Dr B Ali, GP Prescribing Lead, Hull Dr R Schreiber, Medical Secretary, LMC
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Agenda No	Item	Discussion	Decision Made	Action	Lead	Due Date/Date complete
2020.03.01	Apologies	As above				03/2020
2020.03.02	Declarations of Interest	None				03/2020
2020.03.03	Minutes of the Previous Meeting	Accepted as a true record				03/2020
2020.03.04	Matters Arising & Action Tracker	<p>RMOC AR to discuss Heparinised saline with relevant HUTH departments</p> <p>PG/SCF AR has prepared liothyronine SCF and it is on agenda for discussion</p> <p>Correspondence Received Rheumatology to prepare pathway with Rituximab without methotrexate- in progress JM will chase</p> <p>AOB WH set up a meeting with York and NLAG APC – minutes have been circulated to the committee. SR said that the attendees agreed in principle going forward it would be useful to unify new SCF then once this was complete work backwards. CSU representative from Southbank have agreed to attend the next Joint Formulary meeting.</p> <p>Traffic Light Status WH has updated the red list</p> <p>Traffic Light Status KMc has discussed Dymista and Sativex with commissioners. Dymista has been approved as green and Sativex has been confirmed as not routinely commissioned available via IFR only</p> <p>PG/SCF</p>	<p>Agreed to park for now due to current situation with Covid 19</p> <p>Action complete</p> <p>JM to chase</p> <p>Action complete</p> <p>Action complete</p> <p>Action complete</p> <p>Action complete</p>		<p>AR</p> <p>AR</p> <p>JM</p> <p>WH</p> <p>WH</p> <p>KMc</p> <p>WH</p>	<p>01/2020</p> <p>03/2020</p> <p>01/2020</p> <p>03/2020</p> <p>03/2020</p> <p>03/2020</p> <p>03/2020</p>

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		WH has added anticoagulant prescribing guideline to the website				
		PG/SCF WH has add prescribing guidelines for Fidaxomicin, Fosfomycin and Pivmecillinam to the website	Action complete		WH	03/2020
		PG/SCF WH has added the opioid conversion chart and cluster headache guideline to the website	Action complete		WH	03/2020
		PG/SCF KMc has discussed melatonin status with commissioners, there is no appetite for change	Action complete		KMc	03/2020
		Humber CCG Evidence Based Interventions KMc to discuss wording of document with commissioners. CCG are still looking at wording – leave on tracker	Discuss next time		KMc	03/2020
		RMOG AR has replied to the draft shared care guidance on behalf of HERPC	WH to circulate to committee		AR	03/2020
		RMOG AR has circulated link to HERPC	Action complete		AR	03/2020
		Correspondence Received AR has requested HUTH consultants send full SCF document to GPs	Action complete		AR	03/2020
		Correspondence Received PD has raised with IT ways of uploading SCF onto patients records, new IT provider for primary care to be in place in April	Action complete		PD	03/2020
		Correspondence Received SR has discussed issues with GPs	Action complete		SR	03/2020
		Correspondence Received RS to discuss SCF with LMC – RS not present to discuss	Leave on tracker		RS	03/2020
		Correspondence Received JM has asked AR for update on SCF with Dr Grover – awaiting reply	Leave on tracker		JM	03/2020
		Correspondence Received WH has added paediatric guidance on prescribing ranitidine to the website	Action complete		WH	03/2020

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2020.03.05	Traffic Light Status	<p>Lurasidone HUTH had patient admitted who was receiving treatment from HFTH on named patient basis only. HUTH could not obtain Lurasidone. Lurasidone is not on joint formulary or HUTH trust formulary and was rejected by HFTH on basis of cost. The committee agreed to discuss at D&T with a view to adding to formulary as “for continuation on named patient basis only”</p> <p>Tildrakizumab- approved as RED JM informed the committee that dermatology have been asked to update flow chart</p> <p>Certolizumab Pegol – Approved as RED</p> <p>Ibandronic Acid - formulary extension to include use for hypercalcaemia in malignancy – approved as RED</p> <p>Fluticasone Furoate/ Vilanterol (Relvar) (Extension of Use) – request to change traffic light status RED to blue – asthma guideline has been updated in light of this change and is on agenda for discussion</p> <p>Cefalexin – added to formulary as cephradine liquid has been discontinued and there was a need for cephalosporin in liquid form</p>	<p>WH to add to D&T agenda</p> <p>WH to update red list</p> <p>WH to update red list</p> <p>WH to update red list</p> <p>Change to blue</p> <p>Noted</p>		<p>WH</p> <p>WH</p> <p>WH</p> <p>WH</p> <p>WH</p>	<p>5/20</p> <p>5/20</p> <p>5/20</p> <p>5/20</p> <p>5/20</p>
2020.03.06	Feedback From Commissioning Groups	<p>THC:CBD Spray Sativex was approved by HUTH D&T in line with NICE CG 144 it has now been discussed by both CCGs who have agreed not for routine commissioning and via IFR approval only.</p> <p>Dymista has been approved by both CCG as green</p> <p>Amended version of Anticoagulant guideline has been discussed by both CCGs and approved for web</p> <p>Medicines Optimisation workplan has been sent to CCGs for approval but is now on hold due to current situation with Covid 19.</p>	Noted			3/20

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2020.03.07	Prescribing guidelines, shared care frameworks for approval	<p>SCF Liothyronine NEW Written in line with guidance from Royal College of Physicians and RMOC guidance. To be initiated by endocrinology and GPs will take over once patient stabilised. KMc asked if patients already in the system would be transferred over to SCF. Needs to go to both CCG for approval</p> <p>Primary Care Vitamin Supplementation in Liver Disease NEW Written by HUTH gastro team in line with RMOC guidance. It was clarified that the 10 day course recommended by HUTH to treat refeeding would be supplied by HUTH. JM agreed to email RENEW and ask if they would be compliant with this document, then document will need to be approved by CCG</p> <p>Guidelines on Prophylaxis of Venous Thromboembolism on Transfer from Secondary Care UPDATE Updated to include dabigatran in orthopaedic surgery for unlicensed therapy where dalteparin would be the licensed option. Also updated to reflect that LMWH other than dalteparin may be used if there are issues with the supply chain</p> <p>Treatment of Adult Asthma Guideline UPDATE Updated to include Fluticasone Furoate/ Vilanterol (Relvar) to allow change of status from RED to blue. Committee approved with one amendment to add the word "hospital" to section 6 to demonstrate that initiation would always be by the hospital specialist asthma team.</p>	<p>KMc to take to CCG for approval</p> <p>JM to contact RENEW</p> <p>KMc to take to CCG for approval</p> <p>WH to add to website</p> <p>WH to amend and add to website</p>		<p>KMC</p> <p>KMc</p> <p>JM</p> <p>WH</p> <p>WH</p>	<p>05/2020</p> <p>05/2020</p> <p>05/2020</p> <p>05/2020</p> <p>05/2020</p>
2020.03.08	MHRA DSU	<p>January 2020 E-cigarette use or vaping reporting suspected adverse events, including lung injury Ondansetron: Small increased risk of oral clefts following use in first 12 weeks of pregnancy. JM told the committee that the obstetricians are reviewing their guidance.</p> <p>Mecasermin: risk of benign and malignant neoplasia – not on trust or joint formulary</p> <p>February 2020 Ingenol Mebutate Gel (Picato): suspension of the licence due to the risk of skin malignancy. Dermatology are aware and have agreed to update the guideline. Any patients who have been prescribed Ingenol should have completed their course by now and dermatology will no longer be prescribing.</p>	Noted			03/2020

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		<p>Lemtrada (Alemutuzumab): updated restrictions and strengthened monitoring requirements following review of serious cardiovascular and immune mediated reactions</p> <p>Valproate Epilim Depakote pregnancy prevention programme: updated educational materials</p> <p>Nexplanon (Etonogestrel) contraceptive implants: new insertion sites to reduce rare risk of neurovascular injury and implant migration</p>				
2020.03.09	Second Switching Biosimilars	HUTH are now looking at second switching biosimilars due to the beneficial effect on the local health economy. This work is only focusing on Rituximab, Infliximab and Etanercept at the moment. DC had asked the HUTH improvement team to help the pharmacy dept deliver this cost saving, but that work is now on hold due to the current situation with Covid 19	Noted			03/2020
	Paracetamol Prescribing Issues	Patients are struggling to buy OTC paracetamol and obtain prescription medicines when self-isolating. JC said community pharmacy's are struggling to get hold of paracetamol even though D of H is confident there is enough in the supply chain	Noted			03/2020
2020.03.10	Regional Medicines Optimisation Committee	<ul style="list-style-type: none"> Free of Charge Medicines Updated document giving greater clarity that original document on when it is acceptable to use FOC medicines Sequential Use of Biological Medicines Recommends using biological with different mechanism of action if initial choice does not work. Standard Principles for Medicines Prior Approval Form 	Noted			03/2020
2020.03.11	Correspondence Received	<p>Issues with SCF HUTH consultants have now been asked to supply all pages of SCF when requesting a GP to prescribe</p> <p>Sodium Oxybate – JM has received an email that has been sent to many D&T committees around the country regarding the supply of sodium oxybate. This was discussed at HUTH D&T and it was agreed that AR would speak to Dr Tarafder regarding submitting a D&T application</p>	Noted			03/2020
2020.03.12	Primary Care Rebate Scheme	None to report				

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2020.03.13	Additional Minutes for Information	a) MMIG (Jan, Feb) b) HEY D&T (Jan, Feb) c) HTFT DTC (Dec) d) CHCP e) Formulary Sub Group f) Hull CC Planning & Commissioning (Nov, Dec) g) Joint Area Prescribing Meeting	Noted			03/2020
2020.03.14	A.O.B	<p>WC told the committee that HFTH had been looking at a contingency plan for clozapine patients; there are currently 120 patients in this area. Clozapine prescribing is tightly monitored and the prescription can only be released when blood tests have been checked within normal range. HFTH propose to supply 7 days extra with each prescription, but they have realised that they have 20 patients receiving treatment in compliance aids and are trying to co-ordinate with GP practices to give 7 days extra of all medicines so that patients receive an extra week in their cycle during the pandemic crisis.</p> <p>PD asked if anyone had noticed if there had been a change in the durations on prescriptions as it had been reported from other areas that GPs were prescribing for 2 or 3 months for patients who were self isolating during the pandemic. This has not been an issue locally so far.</p> <p>SR informed the committee he had discussed with his colleagues if HERPC should still go ahead during the pandemic and they had agreed that it should. The committee felt that the next meeting would also take place via teleconference.</p>	Noted			03/2020
	Date and Time of Next Meeting	Wednesday 20 th May 2020, 1pm, Room 1 QCOH				