

**Clinical Commissioning Group**

Minutes of the **Somerset Prescribing Forum** held in **Meeting Room 2, Wynford House, Lufton Way, Yeovil, Somerset**, on **Wednesday 13 November 2013**

Present:	Dr Clare Barlow	Chair, Drug & Therapeutics Committee, Taunton & Somerset NHS Foundation Trust	CB
	Jon Beard	Chief Pharmacist, Taunton & Somerset NHS Foundation Trust	JB
	Dr Joanna Dunn	Consultant in Palliative Care Medicine, St. Margaret's Somerset Hospice	JD
	Steve Du Bois	Medicines Manager, NHS Somerset CCG	SDB
	Dr Steve Edgar	GP, Somerset Local Medical Committee representative	SE
	Shaun Green	Associate Director, Head of Medicines Management, NHS Somerset CCG	SG
	Dr Luke Gompels	Consultant Rheumatologist, Taunton & Somerset NHS Foundation Trust	LG
	Catherine Henley	Medicines Manager, NHS Somerset CCG	CH
	Dr Sally Knights	Chair, Drug & Therapeutics Committee, Yeovil District Hospital	SK
	Jean Perry	Commissioning Manager, NHS Somerset CCG	JP
	Dr Iain Phillips	GP Delegate (South Somerset Healthcare Federation), NHS Somerset CCG	IP
	John Martin	Chief Pharmacist, Yeovil NHS Foundation Trust	JM
	Dr Geoff Sharp (Chair)	GP Delegate (Central Mendip Federation), NHS Somerset CCG	GS
	Martin Taylor	Development Pharmacist, Somerset Local Pharmaceutical Committee	MT

Apologies:	Andrew Brown	Head of Medicines Management, Somerset Partnership NHS Foundation Trust	AB
	Dr Rosie Benneyworth	GP Delegate (Taunton Deane Federation), NHS Somerset CCG	RB
	Dr Ulrike Harrower	Consultant, Public Health, Somerset County Council	UH
	Gordon Jackson	Patient Representative	GJ
	Helen Kennedy	Prescribing Support Technician, NHS Somerset CCG	SDB
	Stephanie Wadham	Medicines Information / Formulary Senior Pharmacist, Yeovil NHS Foundation Trust	SW

## 1 INTRODUCTION

1.1 GS welcomed all to the meeting.

## 2 APOLOGIES

2.1 Apologies were received from:

- Andrew Brown, Head of Medicines Management, Somerset Partnership NHS Foundation Trust
- Dr Rosie Benneyworth, GP Delegate (Taunton Deane Federation), NHS Somerset CCG
- Dr Ulrike Harrower, Consultant in Public Health Medicine, Somerset County Council
- Gordon Jackson, patient representative
- Helen Kennedy, Prescribing Support Technician, NHS Somerset CCG
- Stephanie Wadham, Medicines Information / Formulary Senior Pharmacist, Yeovil NHS Foundation Trust

## 3 DECLARATIONS OF INTEREST

3.1 No additional declarations of interest were made.

## 4 MINUTES OF MEETING HELD ON 18 September 2013

4.1 The minutes were accepted as an accurate record of the meeting with the following correction:

- Minute 7.7: NICE TA295 was a negative appraisal.

## 5 MATTERS ARISING

### 5.1 Matters arising otherwise not on the agenda:

1. **European NOAC Patient Card** - the PDF had been uploaded to the CCG MM webpages. Complete.
2. **NICE TA159- Social anxiety disorder:** carry forward.
3. **NICE TA283 Macular oedema (retinal vein occlusion)** – a business case had been presented to TST to address the capacity issues. YDH had a plan that was to be implemented imminently.
4. **NICE TA287 Pulmonary embolism and recurrent venous thromboembolism –rivaroxaban** – Discussions on how to integrate the guidance the guidance into the current pathway were underway. Complete.

It was noted that LMWH would still be the most appropriate prophylactic treatment in a majority of patients undergoing chemotherapy for clinical reasons.

5. **NICE PH45 Tobacco Harm Reduction** – carry forward.
6. **BD Autosshield®** - Somerset Partnership had confirmed that *BD Autosshield®* use applies to community hospital inpatient situations and to nursing care provided by community teams. Complete.
7. **Standardisation of LMWH dose timings** – TST had a policy of administration of LMWH at 8pm to ensure that doses were administered at least 12 hours before scheduled inpatient surgical procedures.
8. **Aflibercept (Eylea® ▼)** was licensed for treatment visual impairment due to macular oedema secondary to central retinal vein occlusion (CRVO). NICE were reviewing its use for this indication (NICE ID578; expected date of issue April 2014). It was proposed that the Forum approve use in accordance with NICE TA283 (Ranibuzumab for RVO).

## 6 D&TC DECISIONS

### 6.1 RUH

No minutes had been received since the last meeting of the Forum.

### 6.2 Somerset Partnership MICP

Verbal report on the 7 November meeting:

- The Shared Care Guideline for treatment of **ADHD** was discussed.
- Moving patients from **quetiapine** modified release to quetiapine 'instant' release in consultation with the patients consultant psychiatrist was supported
- The Shared Care Guideline for **paliperidone** was approved.

### 6.3 TST

Verbal report of the 8 November meeting:

- **Midazolam (*Buccolam*<sup>®</sup>)**: advantages and disadvantages of the move to *Buccolam*<sup>®</sup> as the preferred product was discussed. National guidance is that a licensed product should be used in preference to an unlicensed product if available. *Buccolam*<sup>®</sup> would have advantages for ward use, and although slightly more expensive than *Epistatus*<sup>®</sup> as the product contains three prefilled oral syringes use may be cost-effective in primary care where doses are required to be stored at multiple locations. Changeover would be phased and required support with patient education.
- **Fluocinolone acetonide intravitreal implant** for chronic diabetic oedema: discussion deferred until NICE appraisal is published. The FAD is positive.
- ***Herceptin*<sup>®</sup>** (trastuzumab) 600mg/5ml solution for injection (subcutaneous use) is a substitute for iv ***Herceptin*<sup>®</sup>**. The s/c product had time and cost advantages over the iv product and administration. NHS England Specialist Commissioning are supportive of the change. ***Herceptin*<sup>®</sup>** iv will be coming off patent soon, so it was noted that, although unlikely, dramatic price reductions in the iv product could be an issue.  
YDH were also considering the change.

### 6.4 Weston

No minutes had been received since the last meeting of the Forum.

### 6.5 YDH

Verbal report of the 23 October meeting:

- NICE TAGs are automatically supported.
- **Fluorescein (*Antera*<sup>®</sup>) injection** approved for ophthalmology use.
- **Belcometasone dipropionate (*Clipper*<sup>®</sup>)** approved for use in accordance with NICE CG166 (Ulcerative colitis).
- **Fosfomycin iv injection** (unlicensed in the UK) approved for septicaemia (in conjunction with other antibiotics) and respiratory tract infections caused by multi-resistant bacteria
- **Colesevelam (*Cholestigel*<sup>®</sup>)** for those patients with diarrhoea due to bile acid malabsorption, but who do not tolerate colestyramine (unlicensed use). The patient group was expected to be small but the use was considered a useful addition. To be approved for use on a case by case basis.
- **Ondansetron** off license use for non-chemotherapy induced nausea and vomiting: Evidence is lacking but application to the Forum based on relative risk was discussed. JM would take forward.

**Action: JM**

## 7 NICE

7.1 A summary of the NICE guidance, including Quality Standards, published in September and October was presented to the Forum for information.

7.2 It was noted that implementation of value-based will be delayed. VBP was previously due to start in April 2014.

### 7.3 **NICE CG171 Urinary incontinence in women (Sep-13)**

Discussed at the previous forum

### 7.4 **NICE DG10 Gene expression profiling and expanded immunohistochemistry tests for guiding adjuvant chemotherapy decisions in early breast cancer management: MammaPrint, Oncotype DX, IHC4 and Mammostrat (Sep-13)**

Oncotype DX is recommended as an option for guiding adjuvant chemotherapy decisions but is not commissioned. This raised a more general issue that there appears to be no formal route for diagnostic tests to be reviewed and commissioned. SG agreed to discuss the issue with NHSE Specialist Commissioning.

**Action: SG**

### 7.5 **NICE TA296 Lung cancer (non-small-cell, anaplastic lymphoma kinase fusion gene, previously treated) - crizotinib (Sep-13)**

The appraisal was negative.

### 7.6 **NICE TA297 Ocriplasmin for treating vitreomacular traction (Oct-13)**

The appraisal was positive.

#### **Evidence Summaries: New Medicines**

### 7.7 **ESNM26: Type 2 diabetes: lixisenatide (Sep-13)**

The evidence had been discussed at a previous Forum and the product accepted on to Formulary.

### 7.8 **NICE ESNM27: Secondary prevention in acute coronary syndrome: rivaroxaban (Sep-13)**

Trials showed better than placebo. Dosing appears to need to be exact in order to get a marginal benefit.

#### **Evidence Summaries: Unlicensed / off-label medicines**

### 7.9 **ESUOM19: Schizophrenia: omega-3 fatty acid medicines (Sep-13)**

The trial evidence for using omega-3 fatty acid medicines in people with schizophrenia is limited and the results are not consistent.

7.10 **NICE EUOM20: Postural hypotension in adults: fludrocortisone (Oct-13)**

There is limited evidence that fludrocortisone improves postural blood pressure and orthostatic symptoms.

7.11 **ESUOM21: Ovarian cancer (advanced): bevacizumab 7.5 mg/kg in combination with paclitaxel and carboplatin for first-line treatment**

It was noted that the Cancer Drug Fund supported the 7.5mg/kg/dose.

7.12 **ESUOM22: Bile acid malabsorption: colestevlam (Oct-13)**

Limited evidence that colestevlam may improve diarrhoea and GI symptoms in patients with bile acid malabsorption.

7.13 **NICE Consultations**

A list of the current NICE consultations was presented to the Forum for information.

**8 HORIZON SCANNING**

8.1 The following horizon scanning documents were presented to the Forum for information:

- RDTTC Monthly Horizon Scanning document – August 2013
- RDTTC Monthly Horizon Scanning document – September 2013
- RDTTC Monthly Horizon Scanning document – October 2013
- UKMi Prescribing Outlook: New Medicines – September 2013
- UKMi New Drugs Online Newsletter – October 2013
- NICE Forward Planning Schedule – October 2013
- A list of forthcoming NICE ESNM and ESUOM

**9 FORMULARY APPLICATIONS**

9.1 **Renavit<sup>®</sup> tablets**

*Renavit<sup>®</sup>* vitamin B-complex plus vitamin C tablets had been accepted for the dietary management of water soluble vitamin deficiency in patients with chronic kidney disease by the BNSSG Joint Formulary Group. PAMM had **APPROVED (AMBER)** for use in Somerset. SG had raised with Exeter and Dorchester. JB said that the RD&E were already appeared to be using the product.

9.2 **ADHD Shared Care Guideline: Atomoxetine, Dexamfetamine, Lisdexamfetamine, Methylphenidate**

A Shared Care Guideline was developed following a county-wide meeting of key stakeholders. The ADHD guideline incorporated the previously separate Shared Care Protocols for Atomoxetine and Methylphenidate and was expanded to include Dexamfetamine and Lisdexamfetamine. PAMM had discussed the SCG at their meeting and a document containing their suggested amendments was distributed at the Forum. It was acknowledged that the Guideline was not perfect but was a step forward and was a better balance of risk-sharing. After further discussion to clarify some points the SCG was approved. The SCPs for Atomoxetine and Methylphenidate would be retired.

9.3 **Upostelle<sup>®</sup> (levonorgestrel) 1500mcg tablet**

PAMM had **APPROVED (GREEN)** for primary care use as an alternative to *Levonelle<sup>®</sup>*.

9.4 **FloTone<sup>®</sup> MDI Inhaler Training Device**

PAMM had **APPROVED (GREEN)** for primary care use as with placebo MDI devices for training purposes under the supervision of a healthcare professional

9.5 **GlucoRx FinePoint<sup>®</sup> Insulin Pen Needles<sup>®</sup>**

PAMM had **APPROVED (GREEN)** for primary care use. The brand of pen needles had an extensive range of sizes and were flat-priced across the range. The product offered an opportunity for significant a cost savings in primary care.

9.6 **Buccolam<sup>®</sup> (midazolam) oromucosal solution**

Discussed earlier on the agenda (see 6.3 above).

9.7 **Ondansetron for non-chemotherapy uses**

Discussed earlier on the agenda (see 6.5 above).

**10 NHS ENGLAND SPECIALIST COMMISSIONING**

10.1 The PBR High Cost Drugs, Devices and Listed Procedures Annex 7B was shared with the Forum for information. The new drugs added to the list in year were highlighted in the spreadsheet.

**11 PBR EXCLUDED DRUG MONITORING**

**CCG PBR Excluded Drugs**

11.1 A spreadsheet detailing the CCG-responsible PBR drug spend against budget for TST and YDH was presented and discussed. Variances against budget were considered.

- 11.2 JB raised a concern that the TST data may not be accurate as the data came solely from TST Finance without Pharmacy input.

### **Biologics in Rheumatoid Arthritis**

- 11.3 LG was welcomed and presented data on the biologics use in RA in 2012-13 at TST. Reasons for treatment failure with certolizumab first-line treatment were considered along with reasons for use of other biologics (rituximab, tocilizumab, etanercept and golimumab) first-line in preference to certolizumab.
- 11.4 Biologics use was increasing across the south west. Some of the non-certolizumab first line biologic use may have been attributable to repatriation of patients initiated at RUH.
- 11.5 The discussion supported a better understanding of the issues. Capacity issues because of the increased use of biologics were highlighted. It was noted that if monitoring could be improved and treatment drawn down where appropriate without detriment to patient outcomes cost-savings may be possible.

## **12 DRUG SAFETY**

### **12.1 MHRA Drug Safety Update October 2013 (Volume 7, Issue 3)**

The update was presented to the group for information. The issue highlighted a single issue:

- New oral anticoagulants apixaban (Eliquis ▼), dabigatran (Pradaxa) and rivaroxaban (Xarelto ▼): risk of serious haemorrhage—clarified contraindications apply to all three medicines

Primary care guidance is in the process of being reviewed and revised and would be distributed shortly.

## **13 ANY OTHER BUSINESS**

### **13.1 ARHAI Antimicrobial prescribing and stewardship competencies (Sep-13)**

The Public Health England guidance was presented to the Forum for information. The Forum noted that the competencies were very stringent and doubts were raised if over their practicability.

### **13.2 MHRA / CHM: Antiepileptic Drugs: New Advice On Switching Between Different Manufacturers (Nov-13)**

The recently published guidance was highlighted to members of the Forum for information. The guidance stratified anti-epileptic drugs (AEDs) into three groups depending on the clinical impact of switching between brands or formulations.

**DATE OF NEXT MEETING:**

- Wednesday 15 January 2014

Venue: Meeting Room 2, Wynford House, Lufton Way, Yeovil, Somerset  
BA22 8HR between 2.30pm and 5pm

Meeting ended.

### SCHEDULE OF ACTIONS

NO.	SUBJECT	OUTSTANDING RESPONSIBILITY	ACTION LEAD
<b>ACTIONS ARISING FROM THE MEETING HELD ON WEDNESDAY 13 November 2013</b>			
<b>1</b>	<b>Declarations of interest</b>	Members were asked to notify the Prescribing Forum secretary of any standing declarations of interest, which could be held on record.	<b>All</b> (on going)
<b>2</b>	<b>NICE TA159- Social anxiety disorder</b>	SomPar representatives were asked to bring back relevant issues from guidance if needed.	<b>AB</b> 15-Jan-14
<b>3</b>	<b>NICE PH45 Tobacco Harm Reduction</b>	Stewart Brock to be asked to identify relevant prescribing issues in the guidance that need to be considered by the Forum.	<b>OD / UH</b> 15-Jan-14
<b>4</b>	<b>Ondansetron off license use for non-chemotherapy induced nausea and vomiting</b>	JM to take forward application to the Forum based on relative risk on behalf of YDH.	<b>JM</b>
<b>5</b>	<b>NICE DG10 Gene expression profiling and expanded immunohistochemistry tests for guiding adjuvant chemotherapy decisions in early breast cancer management: MammaPrint, Oncotype DX, IHC4 and Mammostrat (Sep-13)</b>	SG to raise commissioning of <i>Oncotype DX</i> <sup>®</sup> with NHS England Specialist Commissioning.	<b>SG</b> 15-Jan-14