

Minutes of the **Somerset Prescribing Forum** held in **Meeting Room 2, Wynford House, Lufton Way, Yeovil, Somerset**, on **Wednesday, 10th July 2013**

Present:	Jon Beard	Chief Pharmacist, Taunton & Somerset NHS Foundation Trust	JB
	Dr Orla Dunn	Consultant, Public Health, Somerset County Council	OD
	Steve Du Bois	Medicines Manager, NHS Somerset CCG	SD B
	Shaun Green (Acting Chair)	Associate Director, Head of Medicines Management, NHS Somerset CCG	SG
	Liz Harewood	Senior Pharmacist, Somerset Partnership NHS Foundation Trust	LH
	Gordon Jackson	Patient Representative	GJ
	Helen Kennedy	Pharmacy Technician, NHS Somerset CCG	SD B
	Martin Taylor	Development Pharmacist, Somerset Local Pharmaceutical Committee	MT
	Stephanie Wadham	Medicines Information / Formulary Senior Pharmacist, Yeovil NHS Foundation Trust	SW
Apologies:	Dr Clare Barlow	Chair, Drug & Therapeutics Committee, Taunton & Somerset NHS Foundation Trust	CB
	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 Steve Edgar	GP, Somerset Local Medical Committee representative	SE
	Dr Sally Knights	Chair, Drug & Therapeutics Committee, Yeovil District Hospital	SK
	John Martin	Chief Pharmacist, Yeovil NHS Foundation Trust	JM
	Jean Perry	Commissioning Manager, NHS Somerset CCG	JP
	Dr Iain Phillips	GP Delegate (South Somerset Healthcare Federation), NHS Somerset CCG	IP
	Dr Geoff Sharp (Chair)	GP Delegate (Central Mendip Federation), NHS Somerset CCG	GS

1 INTRODUCTION

- 1.1 SG, acting chair, welcomed all to the meeting and Liz Harewood was welcomed back as the Somerset Partnership representative, deputizing for AB.

2 APOLOGIES

- 2.1 Apologies were received from:
- Dr Clare Barlow, Chair, Drug & Therapeutics Committee, Taunton & Somerset NHS Foundation Trust
 - Andrew Brown, Head of Medicines Management, Somerset Partnership NHS Foundation Trust
 - Dr Rosie Benneyworth, GP Delegate (Taunton Deane Federation), NHS Somerset CCG
 - Dr Steve Edgar, GP, Somerset Local Medical Committee representative
 - Dr Sally Knights, Chair, Drug & Therapeutics Committee, Yeovil District Hospital
 - John Martin, Chief Pharmacist, Yeovil NHS Foundation Trust
 - Jean Perry, Commissioning Manager, NHS Somerset CCG
 - Dr Iain Phillips, GP Delegate (South Somerset Healthcare Federation), NHS Somerset CCG
 - Dr Geoff Sharp, GP Delegate (Central Mendip Federation), NHS Somerset CCG

3 DECLARATIONS OF INTEREST

- 3.1 There was a brief discussion on the Declarations of Interest.
- 3.2 Members were asked to notify the Prescribing Forum secretary (SDB) of any standing declarations of interest which could be held on record.

Action: All

4 MINUTES OF MEETING HELD ON 8 May 2013

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

- Correction of spelling of Dr Gerrit Lemmens' surname
- Acronym for Dr Iain Phillips corrected IP in the list of attendees.

5 MATTERS ARISING

5.1 Matters arising otherwise not on the agenda:

1. **Plasma-Lyte 148[®]**: (Minute 7.2) SW clarified that the product would only be used for a subset of patients at YDH, not all patients.
2. **Lixisenatide**: Dr Bickerton (YDH) had replied to the proposal that lixisenatide be made first-line glucagon-like peptide 1 (GLP-1) mimetic. Dr Bickerton's opinion was that on the basis of the available evidence a wholesale switch would not be recommended and that exenatide should remain first-choice. TST Diabetologists had yet to respond.

Action: Awaiting TST response

3. **European NOAC Patient Card**: SW requested that an electronic copy of the card be sent for consideration for use at YDH.

Action: SDB

6 D&TC DECISIONS

6.1 Somerset Partnership MICP

Verbal report on the July meeting:

- Differences in the cost of venlafaxine and quetiapine plain ('instant' release) and their respective MR versions has been highlighted to prescribers.

6.2 TST

The main items for noting from the minutes of the 10 May 2013 meeting were:

- **Co-trimoxazole**: Committee on Safety of Medicines (CSM) had confirmed they had no objection to off-licence use if it was considered to be best local clinical practice.
- **Dermal fillers**: clarification that requests for use at TST should be made by application to the D&TC
- **Aquamax[®]**: Pattern of usage at TST did not warrant approval of Aquamax[®] as a replacement for Aqueous Cream (re: MHRA DSU Vol.6 Issue 8 Mar-13.)
- **Nicotinic acid MR**: confirmation of approval for continued use following discontinuation of UK marketed product.
- **Celecoxib for rheumatology use**: approved for use as an option where

there is evidence of intolerance or lack of efficacy of other formulary possibilities for a limited trial initiated by secondary care.

- **Etoricoxib for gout:** 90mg and 120mg have limited indication for short-term use. Approved (AMBER) for gout where anti-inflammatory options have failed and no evidence of the patient being at increased cardiovascular risk.
- **Caphosol®:** Approved (AMBER) as a replacement for *Mugard®* (discontinued) for mucositis.
- **Ephedrine hydrochloride (oral) to prevent post-op postural hypotension:** approved (RED).
- **Beclometasone dipropionate (Clipper®) for acute ulcerative colitis:** approved (AMBER) for use on consultant recommendation and a maximum course of four-weeks.)
- **Tachosil® medicated sponge:** approved (RED)
- **Insulin degludec (Tresiba®):** Not approved for formulary. Named-patient basis only by application to D&TC.

6.3 Weston

Draft minutes of the 9 May 2013 meeting were presented to the forum for noting.

6.4 YDH

No D&TC had been held since the last meeting of the SPF.

7 NICE

7.1 A summary of the NICE guidance published in May and June was presented to the Forum for information.

7.2 NICE CG159 Social anxiety disorder (May-13)

A number antidepressants were included as recommended treatment options (e.g. sertraline and escitalopram). The CCG formulary would be updated to include the NICE recommendations.

LH was asked to bring back any other issues from the Guidance that need raising.

Action: LH (AB)

The CCG is reviewing its process on how implements the non-pharmacological NICE guidance.

7.3 NICE TA283 Macular oedema (retinal vein occlusion) – ranibizumab (May-13)

Feedback from the Trusts on the new indications implementation was requested. Capacity in the respect of pre-treatment assessment was an acknowledged issue at TST, and was the subject of a business case for increasing capacity. JB would update the Forum at the next meeting.

Action: JB

The position at YDH was unknown.

Action: SW / JM / SK

The question was raised as to whether the new NICE-approved indication would reduce laser use.

7.4 NICE CG160 Feverish illness in children (May-13)

The guideline was being implemented and rolled out by the CCG. The RAG (Red-Amber-Green) scoring from the Guidance would be added to the Formulary.

7.5 NICE CG161 Falls (Jun-13)

The guidance describes a risk assessment process for fall prevention. It was noted by the Forum that the PCT Falls and Bone Health Group had not met recently. SW would raise with SK to discuss bone health with (?) Dr Colebatch.

7.6 NICE CG162 Idiopathic pulmonary fibrosis (Jun-13)

The Forum noted the guidance. The CCG would raise awareness if needed.

7.7 NICE CG163 Stroke rehabilitation (Jun-13)

The guidance was presented for information. Upper limb electrical stimulation remains “not recommended” by NICE, therefore, was not commissioned by the CCG: Individual Funding Request process should be used for cases where exceptionality was thought to warrant use.

7.8 NICE CG 164 Familial breast cancer (Jun-13)

The Guidance recommends tamoxifen and raloxifene as options and would be included in the Formulary according to the Guidance. The CCG would recommend tamoxifen as the first-line option (on the basis of cost.)

The CCG was in discussion with providers on implementation of the recommendations.

7.9 NICE CG165 Hepatitis B (Jun-13)

Noted as NHSE Specialist Commissioning responsibility. Trusts were urged to raise with the BNSSSG Specialist Commissioning team.

7.10 NICE CG166 Ulcerative colitis (Jun-13)

Beclometasone dipropionate (*Clipper*[®]) has previously been approved (AMBER) by the Forum, for a maximum of four-weeks per treatment course.

7.11 NICE TA287 Pulmonary embolism and recurrent venous thromboembolism – rivaroxaban (Jun-13)

New indication approved. It was noted that RUH had already started using for the new NICE-approved indication.

The length of treatment will need to be discussed and the consultants should advise patients and GPs on discharge. The Forum requested that a Somerset-wide policy or guidance is drawn up for the Forum to approve and distribute. GS would be asked to discuss with the CCG Cardiology lead with a view to tasking the Cardiology programme group.

Action: GS

7.12 NICE TA288 Type 2 diabetes – Dapagliflozin combination therapy (Jun-13)

The Forum had previously reviewed dapagliflozin and given the drug a “not recommended” status. Following publication of NICE TA288 the Forum approved (GREEN) within the NICE conditions:

- with the antidiabetic drug metformin, as long as dapagliflozin is used in the way that NICE recommends for drugs called dipeptidyl peptidase-4 (DPP-4) inhibitors in its guidance
- with insulin (with or without other antidiabetic drugs)

It was noted that dapagliflozin was not recommended for triple therapy.

The Type-2 diabetes treatment algorithms need to be amended to include the newer agents.

Expansion of the class is likely to occur soon, with canagliflozin, another sodium-glucose transport protein subtype 2 (SGLT2) inhibitor, currently undergoing licensing approval.

7.13 NICE TA290 Overactive bladder – mirabegron (Jun-13)

Mirabegron has previously been approved by the forum (GREEN) based on the NICE Final Appraisal Determination. Prescribers should be reminded that NICE places the product as a third-line choice, if necessary.

7.14 NICE PH45 Tobacco harm reduction (Jun-13)

NICE recommends use of NRT (nicotine replacement therapy) to help reduce consumption as to help smokers to stop. Electronic products (“e-cigarettes”) are touched upon briefly in the guidance without recommendations.

OD to discuss with Stewart Brock, Public Health Specialist, and bring back relevant prescribing issues of the guidance if required.

Action: OD

If the Stop Smoking service would like to recommend e-cigarette prescribing an application for review should be made to the Prescribing Forum.

7.15 NICE Quality Standards

The NICE Quality Standards published in May and June were highlight to the Forum for information only.

7.16 NICE ESNM19: Attention deficit hyperactivity disorder in children and young people: lisdexamfetamine dimesylate

The NICE summary concluded that there was limited evidence and the product was expensive. The SMC had approved the drug for use in Scotland.

It appears that the manufacturer priced the product against atomoxetine. The current Somerset atomoxetine spend ≈ £4000/month, and dexamfetamine spend ≈ £1200/month.

The Forum requested that application for use be brought back with a pathway for ADHD treatment.

7.17 NICE ESNM20: Type 2 diabetes: alogliptin

Presented for noting and to be brought back to the Forum for review when launched in the UK.

7.18 NICE ESNM21: Chronic obstructive pulmonary disease – fluticasone furoate plus vilanterol

Presented for noting and to be brought back to the Forum for review when launched in the UK.

7.19 NICE ESNM22: Asthma: beclometasone/formoterol (Fostair) for maintenance and reliever treatment

The license extension of *Fostair*® in December 2012 to include maintenance and reliever therapy in adults would be added to Formulary: use for selected patients in line with the current recommendations for the *SMART*® maintenance and reliever protocol. It was noted that patients need training in appropriate use of the therapy.

Anecdotal evidence appears to show that step-down is an often forgotten part of the treatment plan.

7.20 NICE EUOM11: Induction of labour in late intrauterine foetal death - vaginal misoprostol (after oral mifepristone)

Presented for information only (a NHSE Specialist Commissioning responsibility.)

7.21 NICE EUOM12: Generalise anxiety disorder: quetiapine

Presented for information only.

7.22 NICE EUOM13: Gastroparesis in adults - oral erythromycin

Presented for information only.

7.23 NICE EUOM14: Chronic anal fissure: botulinum toxin type A injection

Presented for information only.

7.24 **NICE EUOM15: Hypersalivation: oral glycopyrronium bromide**

Presented for information only.

7.25 **NICE Consultations**

A list and the weblinks for current NICE Guideline consultations was presented to the Forum for information.

The Forum felt that the NICE forward planner would also be useful for horizon planning purposes.

8 FORMULARY APPLICATIONS

8.1 **Methylalntrexone**

The NICE TA277 (Methylalntrexone for treating opioid-induced bowel dysfunction in people with advanced illness receiving palliative care) appraisal had been terminated triggering a review of the status of the product by the Forum (currently GREEN). Terminated appraisals would normally result in a “not recommended” status. Somerset use appears to be small and well controlled therefore the current approval and GREEN status remained.

8.2 **Lisdexamfetamine**

Discussed earlier in the meeting (see 7.16 above.)

8.3 **Tapentadol**

PAMM had **APPROVED (GREEN)** for primary care use as an alternative to oxycodone (i.e. third / fourth-line strong opiate.) Branded generic oxycodone (*Longtec*[®]) was still cheaper.

Trust representatives are asked to take the proposal to their respective pain consultants.

8.4 **BD Autosield**[®]

Somerset Partnership had identified the BD *Autosield*[®] as a device to help their Trust compliance with European Sharps Directive. PAMM had approved use where NHS or practice staff are administering insulin on behalf of the patient. PAMM had **APPROVED (GREEN)** use where nursing staff would be administering insulin for the patient.

LH was asked to seek confirmation from SomPar that use would be for community hospital and community nursing teams not solely community nursing teams.

Action: LH

TST reported a low-incidence of needle-stick injuries. It was suggested that Trusts will need to do a risk assessment.

8.5 **Desloratidine**

PAMM **APPROVED (GREEN)** for primary care prescribing as the cost-effectiveness had increased and the drug may be of benefit to some patients.

8.6 **Fidaxomicin**

Fidaxomicin was **APPROVED (AMBER)** for primary care by PAMM use in line with Public Health England (PHE) guidance to the management of *Clostridium difficile*. However treatment would be restricted to 10 days as it was unclear where the PHE recommended treatment period of 10 to 14 days had originated (licensed use restricted to 10 days.)

9 **PBR EXCLUDED DRUG MONITORING**

9.1 The data was not yet ready for presentation.

10 **DRUG SAFETY**

10.1 **MHRA Drug Safety Update May 2013 (Volume 6, Issue 10)**

The update was presented to the group for information. Of particular note were:

- Tolvaptan (Samsca ▼): risk of liver injury—liver-function testing recommended in patients with symptoms that may indicate liver injury
- Thalidomide: risk of second primary malignancies
- Liothyronine 20 microgram tablets: continuity of supply and potential need for patient monitoring

10.2 **MHRA Drug Safety Update June 2013 (Volume 6, Issue 11)**

The update was presented to the group for information. Of particular note were:

- Hydroxyethyl starch intravenous infusion: suspension of licences
- Diclofenac: new contraindications and warnings after a Europe-wide review of cardiovascular safety
- Cyproterone acetate with ethinyloestradiol (co-cyprindiol): balance of benefits and risks remains positive—updated prescribing advice provided
- Oral retinoids: pregnancy prevention—reminder of measures to minimise teratogenic risk
- Codeine: restricted use as analgesic in children and adolescents after European safety review

TST & YDH reported that all hydroxyethyl starch infusions had been removed from use.

Diclofenac use in Somerset had decreased, however, MIU and A&E units appeared to have a preference as an NSAID of choice.

Codeine use at TST as pain relief after paediatric tonsillectomy had been replaced by supply of 25ml of *Oramorph*[®]. Concerns were raised that dihydrocodein may also have similar issues.

11 NHS ENGLAND SPECIALIST COMMISSIONING

11.1 No new information had been received.

12 ANY OTHER BUSINESS

12.1 Standardization of LMWH dose timings

The possibility of standardization of low molecular weight heparin (LMWH) for inpatients across the Somerset health community was discussed. Consensus was that an evening dose was the custom and practice.

JB would seek advice from the Haematologists on exact timings for a county-wide recommendations.

Action: JB

12.2 National Cancer Drugs Fund List

The list was presented for information.

12.3 Ward Medication Administration Record Charts ('Drug Charts')

A request had been received from the Frail Elderly Programme Board that Somerset Trusts consider using a unified MAR Chart. Trust representatives were requested to take back to their respective Trusts for discussion. However, TST and YDH representatives expressed the opinion that a change of their respective charts is highly unlikely for various safety and internal governance reasons.

DATE OF NEXT MEETING:

- Wednesday 13 November 2013

Venue: The Mandeville Room, Abbey Manor Business Centre, Preston Road, Yeovil BA20 2EN between 2.30pm and 5pm

Meeting ended.

SCHEDULE OF ACTIONS

NO.	SUBJECT	OUTSTANDING RESPONSIBILITY	ACTION LEAD
ACTIONS ARISING FROM THE MEETING HELD ON WEDNESDAY 10 JULY 2013			
1	Declarations of interest	Members were asked to notify the Prescribing Forum secretary (SDB) of any standing declarations of interest, which could be held on record.	All / SDB (on going)
2	NICE ESNM 10 - Type 2 diabetes: Lixisenatide	Trusts were asked to consider making lixisenatide a first-line choice for new patients on the basis of cost-effectiveness.	CB / JB 18-Sep-13
3	European NOAC Patient Card: Primary Care Use	The PDF of the card to be uploaded on the Medicines Management webpages.	SDB 18-Sep-13
4	European NOAC Patient Card: Primary Care Use	The PDF of the card to be forwarded to SW.	SDB 18-Sep-13
5	NICE TA159- Social anxiety disorder	LH asked to bring back relevant issues from guidance if needed.	LH / AB 18-Sep-13
6	NICE TA283 Macular oedema (retinal vein occlusion) - ranibizumab	JB to update Forum on TST capacity issues.	JB 18-Sep-13
7	NICE TA283 Macular oedema (retinal vein occlusion) - ranibizumab	To update Forum on YDH position / progress against implementation.	SW / JM / SK 18-Sep-13
8	NICE TA287 Pulmonary embolism and recurrent venous thromboembolism – rivaroxaban	GS to discuss with the CCG Cardiology lead with a view to tasking the Cardiology programme group with drawing up a Somerset-wide policy / guidance on treatment duration for SPF approval	GS 13-Nov-13
9	NICE PH45 Tobacco Harm Reduction	Stewart Brock to be asked to identify relevant prescribing issues in the guidance that need to be considered by the Forum.	OD 18-Sep-13
10	BD Autosshield®	Somerset Partnership to confirm that BD Autosshield® use applies to community hospital inpatient situations <u>and</u> to nursing care provided by community teams	LH / AB 18-Sep-13
11	Standardisation of LMWH dose timings	JB to seek advice of Haematologists on recommended timings of dose administration.	JB 18-Sep-13