

Area Drugs and Therapeutics Committee Meeting Minutes

Wednesday 20th March 2024 10-11:30 am

Microsoft Teams Meeting

Present:	Christine Gilmour (acting Chair) (CG) Kirsty Macfarlane (KMAC) Victoria Gemmell (minutes) (VG) Stephanie Dundas (SD) Mark Kirk (MK) Tyra Smyth (except sections 4a-e) (TS) Jacqueline Macfadyen (Item 8c) (JM) Lorna Templeton (Item 8f) (LT)	David Semple (DS) Chris Miller (CM) Linda Johnstone (from item 8a) (LJ) Christine Carswell (CG)
1. Apologies:	Mehrdad Malekian Gail Richardson	Penny Brankin Colin Angus
2. Declaration of Interest	nil	
Item	Notes	Action
3.	<u>Minutes/Actions from the last meeting</u> The minutes were accepted as true records and can now be published	VG
4.	<u>Matters Arising</u> a) Management of Malignant Hypercalcaemia This was updated with changes as previously discussed and was approved by the group. b) Off-Label Prescribing-Use of Medicines Outside of their UK Marketing Authorisation in Palliative Medicine-Prescribing for Off-Label Indications or Unlicensed Medicines KMAC gave an update. It has been agreed a summary paragraph will be included in the updated unlicensed medicine policy, and the reference table from the original document will become a standalone document. Both these items are progressing. c) SGLT2i for Treatment of Chronic Kidney Disease SGLT2i CKD NHSL Guideline Update awaited d) Ryego Update awaited	

<p>e) Wegovy® (Semaglutide) for Weight Management This was shared with both Acute and Primary Care PMMB's Update awaited</p> <p>f) NIV Withdrawal Guideline Update awaited</p>		
<p>5.</p>	<p><u>SMC Advice-CONFIDENTIAL</u> Please all see attached Advice from the Scottish Medicines Consortium which will be published on the SMC website after 10.00 am on Monday 08 April 2024.</p> <p><u>Full Submissions</u></p> <ul style="list-style-type: none"> • ritlecitinib hard capsules (Litfulo) Pfizer Ltd SMC2610-treatment of severe alopecia areata in adults and adolescents 12 years of age and older. Accepted with PAS. REFER TO DERMATOLOGY • daridorexant film-coated tablets (Quviviq) Idorsia Pharmaceuticals UK Ltd SMC2611-treatment of adult patients with insomnia characterised by symptoms present for at least 3 months and considerable impact on daytime functioning Accepted Restricted. As this is most likely to be requested at GP practice, MK to discuss with colleagues the best route for opinion. • mavacamten hard capsules (Camzyos) Bristol-Myers Squibb Pharmaceuticals Ltd SMC2618-treatment of symptomatic (New York Heart Association, NYHA, class II to III) obstructive hypertrophic cardiomyopathy (oHCM) in adult patients Accepted with PAS. REFER TO CARDIOLOGY • tirzepatide solution for injection in pre-filled pen (Mounjaro) Eli Lilly and Company Limited SMC2633-treatment of adults with insufficiently controlled type 2 diabetes mellitus as an adjunct to diet and exercise REFER TO DIABETIC SERVICES • dostarlimab concentrate for solution for infusion (Jemperli) GlaxoSmithKline SMC2635 Accepted with PAS. DEFER TO WoSCAN <p><u>Abbreviated Submissions</u></p> <ul style="list-style-type: none"> • glycopyrronium/formoterol fumarate pressurised inhalation, suspension (Bevespi Aerosphere) AstraZeneca UK Ltd SMC2652. REFER TO RESPIRATORY • mirikizumab solution for injection in pre-filled pen and concentrate for solution for infusion (Omvoh) Eli Lilly and Company Ltd SMC2650 : For the treatment of adult patients with moderately to severely active ulcerative colitis who have had an inadequate response with, lost response to, or were intolerant to either conventional therapy or a biologic treatment. REFER TO GASTROENTEROLGY <p><u>Amended Advice</u></p> <ul style="list-style-type: none"> • olaparib (Lynparza) AstraZeneca UK Ltd SMC2617. AWAIT ADVICE FROM WoSCAN 	<p>MK</p>

	<ul style="list-style-type: none"> axicabtagene ciloleucel dispersion for infusion (Yescarta®) Kite, a Gilead company SMC2628. SMC NOT RECOMMENDED <p><u>Ultra-Orphan</u> <i>Olipudase Accepted to Pathway-FOR NOTING</i></p> <p><u>Paediatric License Extensions</u> nil</p>	
6.	<p><u>SMC follow up</u> This was discussed. Items ongoing.</p>	
7.	<p><u>Lanarkshire Formulary</u></p> <p>There was discussion about plans for a regional formulary. This is at the early planning stages. Further details in due course.</p>	
8.	<p><u>Clinical Protocols</u></p> <p>(a) Management of Generalised Convulsive Status Epilepticus in Adults This is an update to guideline previously agreed last year. The update removes sodium valproate as an option, as it is not used in NHSL. This was agreed</p> <p>(b) Progesterone in Pregnancy Guideline This was discussed and agreed that although the proposed therapy is an off label use, it mirrors current NICE guidance which is reassuring. It is anticipated that all patients will be seen at EPAS and there is no expectation for GP involvement. Medication supply needs to be firmed up, which will be taken forward at UHW, being the primary maternity site. The requirement for a standard NHSL patient consent form to be completed and scanned into patient notes was also discussed and agreed. The guideline was approved following the addition of this clarification, with plans for supply only to be fed back to committee.</p> <p>(c) GLP-1 Guideline JM discussed the issues surrounding the long-term shortages of GLP-1 treatments for diabetes. An NPSA alert was issued in January 2024 giving advice relating to treatment options in view of these issues and the guideline is based on this alert. A concern was noted about the potential for additional work for GP's. It was also acknowledged that this is in response to a complex national situation. CM will ask the pharmacy team to run a query to help identify patients who may be affected. The guideline was approved pending changes to include a further recent additional alert (MSAN (2024) 09) and will return for final approval.</p> <p>(d) Pivmecillinam prescribing Information This is an update to the current policy. The section around prescribing for children has been updated to remove information on dosing for children with a link to BNFC in its place. The link will be checked as functional when the document is uploaded</p>	CM

	<p>to the Clinical Guidelines website. Small point of clarification around sensitivity reporting was discussed. Approved pending this change</p> <p>(e) Penicillin Allergy Poster/Guidance on Antibiotic Choice in Penicillin Allergy This is a revision to existing guidance. SD spoke through this. Some changes around the antibiotic choice in severe infection where previous allergy has been noted. Abbreviation DRESS to be expanded. Approved pending this change</p> <p>(f) Cognitive Enhancer Monitoring Guidance LT discussed this guideline, previously approved by MH D and T, and plans to share via Clinical Guidelines Website, and also to link from the Dementia Section of the formulary. MK asked a question around sharing of monitoring results with GP's. It was agreed this would be a helpful addition. Agreed pending this addition.</p> <p>(g) Delirium Guideline-carried over to April meeting</p> <p>(h) Finerenone Diabetic Kidney Disease This was discussed. There are some points not covered in either the guideline or clinical protocol-cautions, interactions, adverse effects. Clarification of supply route-via hospital or primary care. The committee also asked for clarification of expected patient numbers for NHSL. There was also discussion around where this fits into current therapy. Expand abbreviations. To return for final agreement</p> <p>(i) Avacopan for ANCA Vasculitis This was discussed. The committee were broadly satisfied with the content of the guideline/protocol. Patient group to be specified. Abbreviations used throughout to be expanded. A question was raised regarding supply. Clarification was sought to confirm if supply would be planned be via dispensary at UHM or across all 3 sites. There may be a need to confirm capacity within existing dispensary services, depending on patient numbers. Also, the committee agreed that it would be helpful to refer to Acute PMMB for further advice. To return for final agreement.</p> <p>Acute Hyperkalaemia Guideline-Revised Jan 24</p> <p>(j) This was updated with changes as previously discussed, to include a flowchart. Further minor amendment requested-change abbreviation of K to potassium. Yellow box covering orange box in flowchart-to be removed. Accepted pending these changes.</p>	
<p>9.</p>	<p><u>ADTC New Medicines Decisions</u></p> <p>These were accepted</p>	
<p>10.</p>	<p><u>Unlicensed Medicines</u></p> <p>(a) KMAC gave an update. A Task and Finish group has been set up and will progress this.</p>	

11.	<u>Medication and Clinical risk in Lanarkshire</u> https://www.gov.uk/drug-safety-update nil	
12.	<u>Regional Cancer Advisory Network</u> nil	
13.	<u>Patient Safety Alerts</u> nil	
14.	<u>Lay member related items</u> nil	
15.	<p><u>Correspondence</u></p> <p>(a) <u>ADTC Collaborative</u> Nil</p> <p>(b) SAPG Response to MHRA updated statement on use of fluoroquinolones This paper outlines the Scottish Antimicrobial Prescribing Group (SAPG) response to the updated MHRA fluoroquinolone prescribing advice. SD confirms existing NHS guidelines will be reviewed and updated where necessary to reflect MHRA advice. There is some additional work to be done around patient information and consent for those prescribed fluoroquinolones. Acute services supply a PIL to each patient and also have a warning added to the bag label for discharge prescriptions, however it was acknowledged that more work is required to cover patient information and consent at the point of initiation for inpatients. The AMT are working on this. Information is provided via ScriptSwitch on GP prescribing systems. It was discussed that there are plans ongoing to make a PIL available on the RDS website and that a link embedded in the SS message would be helpful. There was also a point raised around the possibility of bag label warning in primary care-CG to take this forward SD to feedback in due course</p> <p>SMC-Changes to SMC Outwith Remit Criteria</p> <p>(c) This was noted</p>	SD/CG
16.	<u>Pharmacy & NMAHP Prescribing Governance</u> nil	
17.	<p><u>AOCB</u></p> <p>(a) PGD-KM gave an update. Minor amendment made to template after comment from the group. To share with TS. This was accepted.</p> <p>(b) VG updated the group with changes to some admin function of the group. The main change is the deadline for papers is to be brought forward to the first Tuesday of the month.</p>	
18.	<u>Date of next meeting</u> Wednesday 17 th April 2024. 10-11:30am MS TEAMS	