	NArea Drugs and T	herapeutics Committee Meeting Minutes	
	-	ay 18th December 2024 10-12pm	
		Aicrosoft Teams Meeting	
Present:	Mehrdad Malekian (Chair) Victoria Gemmell (Prof Sec) Tyra Smyth Graeme Bryson Colin Angus	Rachael Kelly Kirsty Macfarlane Stephanie Dundas Penny Brankin Christine Carswell	
1. Apologies:	Craig Thurtell Chris Miller	Alistair Brown	
2. Declaration of Interest	nil		
ltem		Notes	Action
3.	Minutes/Actions from the last These were agreed as a true re	<u>meeting</u> flection of the meeting and can be published.	RK
4.	Matters Arising		
a)	Mirikizumab (Omvoh) Clinical	Protocol - Conor Cronin - Update awaited	
b)	website. It is acknowledged th publication of this guidance sho	e - Pamela Miller – Update equested. Electrolyte monitoring reference now links to RDS at previously requested calcium guidance is in progress, but ould not be delayed pending this. to further changes, and may be published on RDS.	
c)	Vabysmo Clinical Protocol – To	ony Carson (Meena Virdi) - Update awaited	
d)	Acute Stroke – Thrombolysis a Some further changes were red To return for final approval.	n <b>d Thrombectomy Pathway - Mark Barber</b> quested.	
e)	Motor Neurone Disease - Lind	a Johnstone - Update awaited	
f)	-	o forms. Feedback was received and discussed. Minor submission form will be rolled out and audited.	
g)	ADTC. The plan includes creation would be transparency and acc would be helpful to have subgr	e proposal for the evolution of medicines governance and on of several subgroups which would feed into ADTC. There countability throughout the process. The committee felt it roups which include relevant experts to support clinical hair would also be a welcome addition and help support	

5.	SMC Advice-CONFIDENTIAL	
	Full Submissions	
	vamorolone (Agamree) Santhera Pharmaceuticals (Deutschland) GmbH SMC2721	
	ACCEPTED with PAS-treatment of Duchenne muscular dystrophy (DMD) in	
	patients aged 4 years and older. REFER TO NEUROLOGY FOR ADVICE	
	<ul> <li>sirolimus (Hyftor) Plusultra pharma SMC2710 ACCEPTED with PAS for the treatment of facial angiofibroma associated with tuberous sclerosis complex in adults and paediatric patients aged 6 years and older. REFER TO DERMATOLOGY FOR ADVICE</li> <li>relugolix / estradiol / norethisterone acetate (Ryeqo) Gedeon Richter (UK) Ltd SMC2666 ACCEPTED in adult women of reproductive age for symptomatic treatment of endometriosis in women with a history of previous medical or surgical treatment for their endometriosis. REFER TO GYNAECOLOGY FOR ADVICE</li> <li>danicopan (Voydeya) Alexion Pharmaceuticals SMC2675 ACCEPTED RESTRICTED with PAS as an add-on to ravulizumab or eculizumab for the treatment of adult patients with paroxysmal nocturnal haemoglobinuria (PNH) who have residual haemolytic anaemia. REFER TO HAEMATOLOGY FOR ADVICE</li> <li>iptacopan (Fabhalta) Novartis Pharmaceuticals UK Limited SMC2676 ACCEPTED RESTRICTED RESTRICTED with PAS As monotherapy in the treatment of adult patients with paroxysmal nocturnal haemoglobinuria (PNH) who have haemolytic anaemia.</li> </ul>	
	REFER TO HAEMATOLOGY FOR ADVICE <u>Abbreviated Submissions</u>	
	<ul> <li>closporin (Cequa) Sun Pharma UK Limited SMC2739 ACCEPTED RESTRICTED: treatment of moderate-to-severe Dry Eye Disease (keratoconjunctivitis sicca) in adult patients who have not responded adequately to artificial tears. REFER TO OPHTHALMOLOGY FOR ADVICE</li> </ul>	
	<ul> <li>risankizumab (Skyrizi) AbbVie Ltd SMC2686 ACCEPTED with PAS REFER TO GASTROENTEROLOGY FOR ADVCIE</li> </ul>	
	<ul> <li>ubilituximab (Briumvi) Neuraxpharm UK Ltd SMC2731 ACCEPTED RESTRICTED with PAS treatment of adult patients with relapsing forms of multiple sclerosis (RMS) with active disease defined by clinical or imaging features. REFER TO NEUROLOGY FOR ADVICE</li> </ul>	
	<ul> <li>crovalimab (PiaSky) Roche Products Limited SMC728 ACCEPTED RESTRICTED with PAS as monotherapy for the treatment of adult and paediatric patients 12 years of age or older with a weight of 40 kg and above with paroxysmal nocturnal haemoglobinuria (PNH): REFER TO HAEMATOLOGY FOR ADVICE</li> </ul>	
	NON SUBMISSIONS	
	<ul> <li>bictegravir / emtricitabine / tenofovir alafenamide (Biktarvy<sup>®</sup>) Gilead Sciences Ltd SMC2760 FOR NOTING A point was raised regarding potential current use of this within NHSL. This will be investigated further.</li> <li>rozanolixizumab (Rystiggo) UCB Pharma Limited SMC2761 as an add-on to standard</li> </ul>	
	therapy for the treatment of generalised myasthenia gravis (gMG) in adult patients who are anti-acetylcholine receptor (AChR) or anti-muscle-specific tyrosine kinase (MuSK) antibody positive. <b>FOR NOTING</b>	

	Ultra orphan medicine-DEFERRED ADVICE	
	<u>fosdenopterin powder for solution for injection (Nulibry®) Sentynl Therapeutics Inc</u>	
	<u>SMC2624 – for the treatment of patients with molybdenum cofactor deficiency</u>	
	(MoCD) Type A <b>REFER TO NEONATOLOGY FOR ADVICE</b>	
	FOR INFORMATION	
	SMC2492 atezolizumab (Tecentriq)	
	Draft guidance for use of molnupiravir for treatment of COVID-19	
	Draft guidance for public consultation has been published by the National Institute for Health and Care Excellence (NICE). The recommendations are draft and may change	
	following public consultation. SMC has had direct input into the decision-making	
	committee that produced the draft guidance. The final published advice will have the same	
	status for health board consideration as other SMC advice on new medicines. The draft	
	guidance is open for public consultation until <b>17 December 2024</b> . Anyone with an interest	
	in this topic is encouraged to send their comments on the draft recommendation. Visit the	
	NICE website to access the draft recommendation and to comment: Consultation	
	Molnupiravir for treating COVID-19 [ID6340]   Guidance   NICE	
	FOR NOTING	
	Decistuis Licence Futenciene	
	Paediatric Licence Extensions FOR INFORMATION	
6.	SMC follow up	RK
	RK outlined proposed designation updates from the follow-up, including ivosidenib,	
	Kaftrio, Symkevi and Orkambi. RK made the committee aware of medicines which have	
	passed their decision expected by date but which discussions around their use in NHS	
	Lanarkshire are ongoing, including Tirzepatide, rimegepant, Symbicort Turbohaler and	
	Hemgenix.	
7.	Lanarkshire Formulary	RK
	Formulary Amendment Form SyreniRing	
	Formulary Amendment Gygel Spermicide SBAR	
	Formulary Amendment Isotretinoin Acitretin SBAR	
	Proposed Formulary Amendments December 2024	
	Formulary Amendment Cinacalcet Tablets	
	These were accepted.	
8.	Clinical Protocols	
(a)	AMC Surgical Prophylaxis – Stephanie Dundas	
	This was a significant piece of work to review existing guidance. These have been shared	
	with the various surgical specialties and updated with relevant comments and suggestions.	
	It was noted that there are limitations with current version of HEPMA which limits	
	prescribing of surgical prophylaxis by theatres. There have been a significant number of	
	errors and near misses in which HEPMA prescribing is a factor at the UHW site. This was	
	also raised as an issue in Emergency Departments, especially when patients are transferred to a different site, or downstream wards. Contributing factors also include	
	transiented to a different site, or downstream wards. Contributing factors also include	

	when activity is high and patients remain in ED rather than transfer to wards. This will be		
	taken forward via hospital management teams, and the Medicines Safety Group at UHW.		
	GB advised to add to site risk register, and will follow up with GR.		
	All guidelines approved and can be shared via the RDS website.		
	Paracetamol Guideline – Sarah Brady		
(b)	This is an update to the previous version, including additional information of salt content		
	of soluble tablets. A comment was received regarding the use of paracetamol		
	suppositories. It was agreed that reference to these may be helpful. This will be fed back to		
	the author		
	SPAR Changes to the Blood Manitaring Requirements Concy Granin		
(c)	SBAR – Changes to the Blood Monitoring Requirements - Conor Cronin This was discussed and the requested changes agreed.		
(0)	This was discussed and the requested changes agreed.		
	Produodopa - Graham McCallum		
(d)	•		
	There were several comments which will be fed back to the author.		
	The item will also need to be discussed at Acute PMB for cost and operational approval once		
	it has been approved from a clinical perspective.		
	The document is not approved at this time, and should return for final approval once the		
	above areas have been addressed.		
	Difelikefalin - Alison Yule		
(e)	This was discussed. It was approved on clinical grounds, however it will proceed through the		
(e)	usually processes for cost and operational approval.		
	usually processes for cost and operational approval.		
	Neonatal Monographs SBAR – Kirsty MacFarlane		
(f)	This was discussed and plans to move documents approved.		
9.	ADTC New Medicines Decisions		
	This was accepted. Update to medicine designations as per Follow-Up.		
10.	Unlicensed Medicines		
10.	<u>Officensed Medicines</u>		
(a)	nil		
11.	Medication and Clinical risk in Lanarkshire		
	https://www.gov.uk/drug-safety-update		
	It has been highlighted that there is a fault with the risk assessment calculator on the		
	website <u>www.assign-score.com</u> . Clinicians were requested to STOP using the website		
	immediately. RK liaised with CG team to ensure a statement has been added to the		
	relevant NHSL guideline section to inform users. They will be directed to use either		
	alternative calculators such as those available on GP prescribing systems, or NHSL		
	guideline on management of cholesterol in adults		
12.	Regional Cancer Advisory Network		
	nil		
13.	Patient Safety Alerts		
13.	nil		

14.	Lay member related items	
	nil	
45	Companyandanaa	
15.	Correspondence	
(a)		
	nil	
16.	Pharmacy & NMAHP Prescribing Governance	
	nil	
17.	AOCB	
(a)	PGD update Kirsty Macfarlane	KMAC
	Meds guidance team took over PGD oversight recently and there are plans to present an	
	updated to the current policy at January ADTC. There are also plans to create and maintain	
	a database to manage and track these. It has been identified that there are 11 PGD's which	
	have expired. These currently cannot be used in practice. This will be fed back to site chief	
	nurses as a matter of urgency. The team will continue to try and locate authors and ensure	
	these are updated as soon as possible. Plan for PGD amnesty, requesting for all and any	
	PGD's to be shared to allow the Med Guidance Team to have full oversight.	
(b)	2025 proposed meeting dates	
(-)	These were agreed.	
18.	Date of next meeting	
	Wednesday 22nd January 2025 10-12pm	
	MS TEAMS	