

**Chelsea and Westminster Hospital NHS Foundation Trust**  
**Trust Medicines Committee**  
**Summary of Main Points from the Meeting held on the 14<sup>th</sup> April 2014**

**2. Minutes and Summary Notes from last meeting**

The Minutes and Summary notes from the March 2014 meeting were approved and will be circulated.

**3. Matters Arising**

The Committee noted the matters arising from the previous meeting.

**4. New Medicines Applications**

***b) Formulary applications***

***Full applications***

- **Fluticasone / Vilanterol via Ellipta<sup>®</sup> inhaler (Relvar<sup>®</sup>)**

**Decision: Approved with condition**

For the symptomatic treatment COPD with a FEV1 < 70% predicted normal (post-bronchodilator) with an exacerbation history despite regular bronchodilator therapy. This was approved for addition to the formulary on the condition that this drug would only become available once approval was granted for addition to the NWLIF. Submission to be made to the NWLIF.

- **Estriol Cream (Ovestin<sup>®</sup>)**

**Decision: Approved**

For hormone replacement therapy (HRT) for treatment of atrophic vaginitis (due to estrogen deficiency) in peri- and post-menopausal women. Also pre and post-surgery for vaginal operations. This requires the application of a smaller volume of cream in comparison to the lower strength formulation currently available on the formulary, Gynest<sup>®</sup> 0.01%. The use of a lower volume, higher concentration formulation has been associated with better patient acceptance. Ovestin<sup>®</sup> is to be added to the formulary in addition to the Gynest<sup>®</sup> and to review in 6-12 months regarding the removal of Gynest<sup>®</sup>.

- **Argatroban Infusion (Exembol<sup>®</sup>)**

**Decision: Approved**

For anticoagulation in adult patients with heparin-induced thrombocytopenia type II who require parenteral antithrombotic therapy and have renal insufficiency. Danaparoid to continue to be included on the formulary for patients who require parenteral antithrombotic therapy and have renal sufficiency.

**Ex-Panel requests**

- **Copper bisglycinate 2mg capsules**

**Decision: Approved**

For supplementation of low copper levels in Burns ICU patients. Will replace copper Picolinate. Minimal cost difference between the two formulations. Supplementation guidelines to be updated in due course.

- **Tapentadol 20mg/ml Liquid**

**Decision: Approved**

Liquid formulation for administration to patients with swallowing difficulties or who have NG tubes in-situ.

**Individual request**

- **Acitretin liquid for Erythroderma (On-going treatment)**

**Decision: Approved**

Request for on-going treatment with Acitretin liquid for a paediatric patient with erythroderma (Previously approved by the Pharmacoeconomic Board) who has been initiated on treatment with good response to date.

**Application forms for noting**

**Decision: Noted**

The following application form was noted:

- **Pixantrone - In line with NICE TA306 (Approved in March 2014).**

**5. Medicines Management/Trust Medicines Policy**

- **Adult Hyperkalaemia Guideline**

**Decision: Approved**

Updated guideline on the management of Hyperkalaemia in adult patients. Main change is the use of 20% glucose bags instead of 50% vials due to ease of use and suitability for peripheral IV administration.

- **Paediatric HDU Intravenous Electrolyte Supplementation Guide 2014**

**Decision: Approved**

Guideline on the supplementation of intravenous electrolytes on Paediatric HDU. This will form Part 2 of the Trust IV Administration Guideline.

**6. NICE TA Guidance**

**TA307 - Aflibercept in combination with irinotecan and fluorouracil-based therapy for treating metastatic colorectal cancer that has progressed following prior oxaliplatin-based chemotherapy**

Aflibercept in combination with irinotecan and fluorouracil-based therapy is not recommended within its marketing authorisation for treating metastatic colorectal cancer that is resistant to or has progressed after an oxaliplatin-containing regimen.

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**TA308 - Rituximab in combination with glucocorticoids for treating anti-neutrophil cytoplasmic antibody-associated vasculitis**

Rituximab, in combination with glucocorticoids, is recommended as an option for inducing remission in adults with anti-neutrophil cytoplasmic antibody [ANCA]-associated vasculitis (severely active granulomatosis with polyangiitis [Wegener's] and microscopic polyangiitis), only if:

- further cyclophosphamide treatment would exceed the maximum cumulative cyclophosphamide dose **or**
- cyclophosphamide is contraindicated or not tolerated **or**
- the person has not completed their family and treatment with cyclophosphamide may materially affect their fertility **or**
- the disease has remained active or progressed despite a course of cyclophosphamide lasting 3–6 months **or**
- the person has had uroepithelial malignancy

**NICE TA log 2013/2014**

Report 1: Shows that the mean time between NICE Guideline publication and acknowledgement at Medicines Committee meeting is 22 days - within the 90 day statutory requirement as per NHS England, Information Health & Wealth Directive.

Report 2: Patient-friendly version of Report 1 for publication on the Trust intranet website.

**7. IVIG Update**

The panel noted the IVIG report.

There were 12 IVIG issues in March 2014, with 6 new requests:

- Three for Idiopathic Thrombocytopenic Purpura (Red indication)
- One for CIDP (Red indication)
- One for paraprotein associated demyelinating neuropathy (Red indication)
- One for Myasthenia Gravis (Blue indication)
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**8. Items for Noting**

• **NHS England/MHRA Patient Safety Alerts**

**Decision: Noted**

Two recent Patient Safety Alerts re. improving medication error and medical device incident reporting which have been recently circulated by NHS England/MHRA were presented. Relating action plans to be presented at Medicines Committee May meeting. Going forward all Patient Safety Alerts with associated action plan will be brought to the Medicines Committee for noting and later re-presented for approval and sign-off when action plan is completed.

• **NWL Red List - March 2014**

**Decision: Noted**

NWL Red List for March 2014.

• **Drugs Sub-Committee meeting minutes - January 2014**

**Decision: Noted**

Drugs Sub-Committee meeting minutes for January 2014

• **Drugs Sub-Committee meeting minutes - February 2014**

**Decision: Noted**

Drugs Sub-Committee meeting minutes for February 2014

• **MHRA Drug Safety Update March 2014**

**Decision: Noted**

MHRA Drug safety Update for March 2014

**11. Date of the next meeting**

**Monday 12<sup>th</sup> May 2014, 8.00 - 9.00 – Board Room, Lower Ground Floor**

**Closing date for papers: Friday 18<sup>th</sup> April 2014**