Chelsea and Westminster Hospital NHS Foundation Trust
Trust Medicines Committee
Summary of Main Points from the Meeting held on the 10th June 2013

2. Minutes and Summary Notes from last meeting

The Minutes and Summary notes from the May 2013 meeting were approved and will be circulated.

3. Matters Arising

The Committee noted the matters arising from the previous meeting.

4. New Medicines Applications

Formulary applications

- **Ingenol Mebutate (Picato®)**

Decision: Approved. Tariff Included Medicine

Picato® is indicated for the cutaneous treatment of non-hyperkeratotic, non-hypertrophic Actinic Keratosis in adults. This will be prescribed as a single course for patients who fail cryotherapy, have too many lesions to freeze or who decline cryotherapy where compliance with other topical agents may be an issue. GPs will not be expected to continue prescribing due to the length of the course involved, 2 to 3 days. If a patient requires a repeat course they will be referred back to the Secondary Care. DR to follow-up with Dr Morar.

Individual funding requests

Decision: Noted

- **Tocilizumab IV for Mycobacterium Avium Complex**

Approved by the Pharmacoecomonic Board.

Ex-panel

- **Hydrocortisone (Efcortesol®) injection**

Decision: approved

For patients with Addision's Disease for self-administration at home. In liquid form and more practical than the current formulary option (Solu-cortef®) which requires reconstitution.

- **Bimatoprost 0.03% unit dose eye drops**

Decision: Approved

Recently available in unit doses. (Only tafluprost currently available in unit doses). Cheaper than tafluprost and does not require refrigeration. This was recently approved for inclusion on the NWL integrated formulary.

c) Feedback from NWLIF panel meeting – June 2013 – Deirdre Linnard

Approved

i. Flutiform (fluticasone + formoterol)combination aerosol inhaler, requested by the Royal Brompton and Harefield, and ICHT
ii. Perampanel – novel anticonvulsant for partial seizures, requested by ICHT
iii. Mirabegron –for treatment of overactive bladder, requested by Hillingdon Hospital

Action for C&W – Deirdre Linnard to inform Lead Directorate Pharmacists of these additions for dissemination to relevant clinicians.

Not approved

iv. Insulin degludec, requested by Chelsea and Westminster Hospital.

Action for C&W: This application was for a sub-limited sub-group of patients with troublesome hypoglycaemia. The NWLIF did not approve the application on the grounds that the benefit in terms of reduced hypoglycaemia was small and the price of insulin degludec was higher compared to insulin glargine or detemir. The NWLIF was concerned that insulin degludec could displace a significant proportion of lower cost insulin use. There also were concerns raised because the FDA had requested additional cardiovascular data prior to licensing and the MHRA caution that there could be a risk of dispensing errors with the 100unit/ml and 200 unit/ml insulin degludec pens. However, It should be noted that whilst the NWLIF is intended to cover the majority of patients, the Terms of Reference acknowledge that it does not override the responsibility of prescribers to make decisions appropriate to the circumstances of an individual patient. It was suggested at the NWLIF meeting that insulin degludec might go on the red list but this was not agreed. The minutes of the NWLIF meeting are awaited before any action is taken by the Chelsea and Westminster Medicines Committee.

v. Glycopyrronium inhalation powder – forwarded from ICHT and Ealing Hospital
vi. Aclidinium bromide inhalation powder (Ealing Hospital)
Note: the Tiotropium UK SPC expiry date is 11.9.15

Medicines added to the Integrated Formulary without full discussion by the Panel

- Bimatoprost 300micrograms/ml eye drops – forwarded from NWLH – costs less than 100micrograms/ml eye drops which are on the IF. Both strengths contain benzalkonium chloride
- Bimatoprost 300micrograms/ml preservative free single dose eye drops
- Latanoprost 50micrograms/ml preservative free single dose eye drops (Monoprost)
- Sodium cromoglicate 2% preservative free single dose eye drops (Catacrom)
- Accrete D3 tablets (calcium 600mg, vitamin D3 400 units, film coated tablets that are scored to facilitate breaking for ease of swallowing) – lower price than any calcium + vit D product in the IF
- Scheriproct ointment (prednisolone + cinchocaine) - £2.94/30g, costs less than Xyloproct which is on the IF £3.49/20g

Medicines proposed for removal from the Integrated Formulary

- Etynodiol diacetate tabs 500micrograms (Femulen) – discontinued
- Distigmine tabs 5mg – discontinued
- Hydrocortisone eye drops – discontinued
- Calcitonin nasal spray – discontinued
- Timolol eye gel 0.1% - discontinued but unit dose gel still marketed
- Metolazone tabs 5mg – now only available as specials or imported products

Prednisolone retention enema 20mg in 100ml (as sodium metasulphobenzoate) – discontinued. Prednisolone sodium phosphate enemas remain available and in the IF.

5. NICE Guidance on developing and updating local formularies

NICE Guidance on developing and updating local formularies

Decision: Noted

A status report was provided on the updated action plan as at June 2013.

Review of membership skill mix against NPA local decision-making: Competency framework and Diagnostic tool

An assessment has been undertaken of the ability of the panel to meet the competency framework developed by the NPA to support the decision-making process relating to medicines.

The panel reviewed the results and agreed the final scoring. All competency sets scored at least 7 out of a possible 10. The two competency sets that scored 7 were:

- Assessment of evidence for clinical and cost effectiveness
- Deliberation, reasoning and ethical judgement

It was suggested that the panel avail of training relating to critical appraisal and ethical judgement.

It was agreed that the assessment was reflective of the competence of the HIV/GUM Drugs Sub-Committee panel which acts as the appeal panel. DR to co-ordinate training for the panel (Andrew Lawson)

Formulary application appeal form

Decision: Approved

A new application form for submission as part of a formulary appeal has been compiled in response to a request received from the HIV/GUM Drugs Sub-Committee (appeal panel). This was approved by the HIV/GUM Drugs Sub-Committee in May

6. Trust Medicines Policy Audit

- **Trust Medicines Policy Audit 2012/13 action plan.**

Decision: Noted

A status report was provided on the updated action plan as at June 2013.

- **Intensive Care Unit Drug chart**

Decision: Approved

Updated in line with the Trust Medicines Policy prescribing standards. The panel have asked that the chart is put into use as soon as possible in the ITU/Burns ITU setting.

- **Section 2. Prescribing**

Decision: Approved / Approval pending

It is not always possible to guarantee that doses less that 1mg will be detailed in micrograms and those less than 1g will be detailed in mg due to the inability of the electronic prescribing system to switch between dosage units. Where the dosage unit of a drug has set up in mgs, there may be a need to prescribe "0.xmg" where a very small dose is required such as in paediatrics. As a result a small amendment has been made to the Trust Medicines Policy, Section 2. Prescribing to indicate this. The Trust Medicines Policy Audit standards will be updated to exclude this standard going forward. EPR to be asked to check with other hospital how they overcome this issue.

- **Trust Medicines Policy Audit 2013/14 standards**

Decision: Approved

Standards have been compiled for the Trust Medicines Policy Audit 2013/14. The panel suggested the audit should include a sample of discharge, out-patient prescriptions and electronic chemotherapy prescriptions. It was also suggested that there should be standards relating to missed doses included. It is anticipated that the audit will be undertaken in July 2013.

7. Medicines Management

- **IV Administration monograph - Immunoglobulin IV**

Decision: Approved

Updated to include Immunoglobulin IV (Privigen®)

- **Privigen® Administration guide**

Decision: Approved

Updated for use within the Trust when administrating Immunoglobulin IV (Privigen®)

- **Risk assessment – Potassium conc. IV held as a stock medicine on Children's HDU**

Decision: Approved

Summary report of a risk assessment that has been undertaken to support potassium conc. IV being held as a stock medicine on

Children's HDU.

8. Medicines Management Annual Report 2012/13

- **Medicines Management Annual Report 2012/13**

Report that summarises the activities of committees responsible for the management of medicines at Chelsea and Westminster Hospital NHS Foundation Trust describes developments throughout the 2012-13 year and reports on the results of external assessments.

The panel suggested the following included:

- Section relating to VTE
- Section relating to NPSA - Never Events assurance reports
- Panel members names and titles
- Details of the BMJ award for the CLAHRC project - Improving medication at Discharge – Closing the loop
- Titles of appendices in contents table

The report will be updated and presented at the July Medicines Committee meeting

9. NICE Guidance

Nice Guidance May 2013

- **TA283 Ranibizumab for ocular impairment**

Ranibizumab is recommended as an option for treating visual impairment caused by macular oedema secondary to retinal vein occlusion in particular circumstances.

Update to formulary required

- **TA284 – Bevacizumab for advanced ovarian cancer**

Bevacizumab in combination with paclitaxel and carboplatin is not recommended for first-line treatment of advanced ovarian cancer.

Not recommended for use and not application to C&W

- **TA285 – Bevacizumab for platinum-sensitive ovarian cancer**

Bevacizumab in combination with gemcitabine and carboplatin is not recommended within its marketing authorisation, that is, for treating people with the first recurrence of platinum-sensitive advanced ovarian cancer.

Not recommended for use and not applicable to C&W

- **TA286 – Loxapine for acute agitation and disturbed behaviours**

NICE is unable to recommend the use in the NHS of loxapine inhalation for treating acute agitation and disturbed behaviours associated with schizophrenia and bipolar disorder because no evidence submission was received from the manufacturer of the technology

Unable to recommend

10. IVIG Update

The panel noted the IVIG report.

There were 8 IVIG issues in May 2013, with 4 new requests.

- One for Guillain Barre Syndrome (Red indication)
- One for CIDP (Blue indication)

Two for Myasthenia Gravis (Blue indication)

11. Items for Noting

- **External inspection of Pharmacy Aseptic Services – May 2013**

Noted. Report of an external inspection of the Pharmacy Aseptic Services that took place in May 2013. No critical deficiencies were identified.

- **Quarterly Controlled Drug Report Q4 2012/13**

Noted.

- **Drugs Sub-Committee Meeting minutes – April 2013**

Noted.

- **MHRA Drug Safety Update - May 2013**

Noted

12. Papers to go to the Trust Quality Committee

The following papers should be sent to the Trust Quality Committee:

- Medicines Committee Summary Notes - May 2013
- External inspection of Pharmacy Aseptic Services - May 2013
- Quarterly Controlled Drugs Summary Report Q4 - 2012/13

13. AOB

Nil

Date of the next meeting

Monday 8th July 2013, 8.00 – 9.00 Boardroom, Lower Ground Floor.

Chelsea and Westminster Hospital NHS Foundation Trust
Trust Medicines Committee

Closing date for papers: Friday 14th June 2013