Chelsea and Westminster Hospital NHS Foundation Trust
Trust Medicines Committee
Summary of Main Points from the Meeting held on the 14th October 2013

2. Minutes and Summary Notes from last meeting

The Minutes and Summary notes from the July 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

Vaccines supplied via Chelsea Vaccine Clinic

Decision: Approved

An application was considered to include the following vaccines:

- Rabies
- Japanese Encephalitis
- Tick Borne Encephalitis
- Yellow Fever
- Varcella-Zoster

on the formulary to support the running of the new Chelsea Vaccine Clinic. This was deferred from July 2013 awaiting the attendance of Dr Christopher Scott to attend to discuss the Governance issues relating to the setting up and running of this clinic. Dr Simone Antonucci attended in place of Dr Christopher Scott. The panel members were satisfied with the governance issues relating to the setting up and running of this clinic. The panel will expect a formulary application to be submitted for Malarone tablets in due course as this is likely to be prescribed on prescriptions issued from the clinic.

Elvitegravir, Cobicistat, Emtricitabine and Tenofovir combination tablet (Stribild®)

Decision: Noted

Stribild® is a combination anti-retroviral agent to be used in line with the NHS England Clinical Commissioning Statement:

- In ARV experienced patients with no prior history of virological failure or drug resistance, and who require a switch from their current regimen where there is a clinical advantage of Stribild® over alternative switch options and where the use of the individual components is not contraindicated OR
- In ARV-naïve patients with high viral loads who are not suitable for NNRTIs (or others on NNRTI who need to switch for reasons unrelated to resistance)

Approval has already been provided via the Drugs Sub-Committee meeting. This was noted by the panel.

Individual funding requests

Cidofovir cream for Herpes Simplex Immune Reconstitution Disease

Decision: Noted

Approved by the Pharmacoecomonic Board.

Rituximab for Membraneous Glomerulonephritis

Decision: Noted

Approved by the Pharmacoecomonic Board

Tocilizumab for Mycobacterium Avium Complex

Decision: Noted

Approved by the Pharmacoecomonic Board

Ex-panel

Decision: Approved

- **Morphine 100mcg/ml liquid**
- **Oxycodone 50mg/ml injection**
- **Hydromorphone 2.6mg capsule**
- **Hydromorphone 8mg and 24mg SR capsule**

Following a review of opioid analgesics currently listed on the formulary.

Liquiband (Flow Control®) in place of Liquidband (Optima®)

Decision: Approved

Request received from Paediatrics to revert back to using Liquiband Flow Control® instead of Liquiband Optima® due to experience gained with using Liquiband Optima® since it was introduced to the formulary in April 2013.

5. Medicines Management/Trust Medicines Policy

Trust Medicines Policy - Section 3. Ordering and supply of medicines

Decision: Approved

Routine review and update – Minor changes.

Risk assessment – Potassium conc. IV held as a stock medicine on ITU/HDU

Decision: Approved

Summary report of a risk assessment that has been undertaken to support potassium chloride conc. IV being held as a stock medicine on ITU/HDU. With the stated controls in place the risk would be categorised as Yellow.

Trust Medicines Policy Audit 2013/14

Overall, the results show that there was very good compliance with almost all aspects of the Trust Medicines Policy. Of the 19 standards

audited, 95% (n=18) scored 80% or greater compliance and 89% (n=17) scored 90% or greater compliance.
Two standards demonstrated significant improvement following implementation of recommendations from the 2012/13 audit.

Actions include:
a) Reviewing and updating the paper medication administration chart used on Burns ITU and ITU.
b) Reminding all pharmacy staff of the need to issue potassium chloride conc. IV in accordance with the Trust Medicines Policy.
c) Setting up and Omitted and Delayed medicine doses Task Force Group in conjunction with Senior Nursing staff.
d) Setting up a working group with EPR and Nursing Lead to investigate how abbreviated Lastword training can be introduced for agency staff in conjunction with a process of password allocation out-of-hours to improve documentation of administered doses.
The issue of documentation of missed doses was discussed by the panel in further detail and it was agreed that temporary staff should be provided with training and access to the Electronic (Lastword) Prescribing system during shifts.
Action: Trust Medicines Policy Section 1 to be updated to reflect the introduction used in the Trust Medicines Policy Audit report.

MHRA Alert re. Diclofenac and cardiovascular safety
Dr C Bantel was invited to attend the meeting to discuss the way forward with managing the use of Diclofenac in the Surgical Directorate but unfortunately was unable to attend the meeting. The following points were discussed and agreed:

- Anaesthetist to be chosen to champion the change in analgesic use - Action: KR to ask Dr Mike Weston
- Pharmacy to include a session on the Clinical Governance Surgery Half Day – Action: David Sie
- Pharmacy staff to be asked to query all requests for Diclofenac prescribed on discharge prescriptions - Action: David Sie.

IV Task Force
An update was provided on the first IV Task Force meeting which was held on 19th July 2013.

6. NICE TA Guidance
TA295 – Everolimus in combination with exemestane for treating advanced HER2-negative hormone-receptor-positive breast cancer after endocrine therapy
Everolimus, in combination with exemestane, is not recommended within its marketing authorisation for treating postmenopausal women with advanced human epidermal growth factor receptor 2 (HER2) negative hormone-receptor-positive breast cancer that has recurred or progressed following treatment with a non-steroidal aromatase inhibitor
Action: Nil – Not applicable and Not recommended

TA296 - Crizotinib for previously treated non-small-cell lung cancer associated with an anaplastic lymphoma kinase fusion gene
Crizotinib is not recommended within its marketing authorisation, that is, for treating adults with previously treated anaplastic-lymphoma-kinase-positive advanced non-small-cell lung cancer.
Action: Nil - Not recommended

7. IVIG Update
The panel noted the IVIG report.
There were 8 IVIG issues in July 2013, with 3 new requests:

- One for Acquired Cell Plasia (Blue indication)
- One for Secondary Antibody deficiency (Blue indication)

One for Myasthenia Gravis (Blue indication)

8. Items for Noting

- **Drug Sub-Committee Meeting minutes – June 2013**

Noted.

- **Drug Sub-Committee Meeting minutes – July 2013**

Noted.

- **Drug Sub-Committee Meeting minutes – August 2013**

Noted.

- **Drug Sub-Committee Meeting minutes – September 2013**

Noted.

- **MHRA Drug Safety Update - September 2013**

Noted.

9. Papers to go to the Trust Quality Committee
The following papers should be sent to the Trust Quality Committee:

- Medicines Committee Summary Notes - September 2013
- Trust Medicines Policy Audit 2013/14

10. Date of the next meeting
Monday 11th November 2013, 8.00 – 9.00 Boardroom, Lower Ground Floor.
Closing date for papers: Friday 18th October 2013