

**Chelsea and Westminster Hospital NHS Foundation Trust
Trust Medicines Committee**

Summary of Main Points from the Meeting held on Monday 12th October 2015

2. Minutes and Summary Notes from last meeting

The Minutes and Summary notes from the September 2015 meeting were approved and will be circulated.

3. Matters Arising

The Committee noted the matters arising from the previous meeting.

4. Formulary Applications

Full applications

- **Insulin glargine 300units/ml (Toujeo®)**

Decision: Accept

DM presented Insulin Glargine 300units/ml (Toujeo®) for inclusion to the formulary. It is a high concentration insulin glargine that is intended to be used in patients with type 2 diabetes who experience problematic hypoglycaemic episodes on a basal analogue (insulin glargine 100unit/ml/insulin detemir). This is a higher strength formulation of insulin glargine. Currently the NWLIF lists all formulations of insulin glargine, however, CC highlighted that it was uncertain of whether Toujeo would require a full application or it would be an automatic inclusion of this new formulation. CC will inform us if a full submission to NWLIF is required. It would be the intention for GPs to continue prescribing.

- **Dulaglutide (Trulicity®) 0.75mg & 1.5mg solution for injection**

Decision: Accept

MF presented Dulaglutide (Trulicity®) 0.75mg & 1.5mg solution for injection to be used in patients requiring GLP-1 therapy for the management of type 2 diabetes who request weekly injections or refuse daily injections and have intolerance or compliance issues. The existing once weekly injection currently on the Trust's formulary is Bydureon® (Exenatide). Dulaglutide is expected to replace Bydureon® as the long acting GLP-1 of choice as it is in a device that does not require reconstitution and it is therefore easier to use. Furthermore, dulaglutide does not cause subcutaneous nodules which is a known side effect of Bydureon® and can also be used in patients who have a CrCl of >30ml/min whereas Bydureon® should only be used when the CrCl is >50ml/min.

Individual funding requests (For noting)

- **IFR Outcome – Adult onset downbeat nystagmus syndrome**

To note that funding has been approved for 2 months treatment by NHSE.

- **IFR – Elthrombopag for severe thrombocytopenia (prior to TIPSS procedure)**

For the management of a patient who has severe thrombocytopenia.

Approved by the pharmaco-economic board (Mark Bower, Zoe Penn, Deirdre Linnard, Esther Wong): 09.10.15

The above IFR was noted.

Ex-Panel Requests

- **Picato® (ingenol Mebutate) 500mcg/g gel**

Decision: Accept

- **Cetraben Ointment**

Decision: Accept

- **Rivastigmine 4.6mg/24 hours patch**
Rivastigmine 9.5mg/24hours patch
Rivastigmine 13.3mg/24hours patch
Rivastigmine 2mg/ml oral solution

Decision: Accept

Removals

- Nil

5. Trust Medicines Policy

- **TMP: Section 6: Controlled Drugs**

Decision: Approved

Update to the list and schedules of controlled drugs.

6. Medicines Management

- **Temazepam Memo**

Decision: Noted

Memo circulated to all staff regarding the change in prescription requirements for temazepam.

- **Medicines management annual report**

Decision: Noted

Chelsea and Westminster Hospital NHS Foundation Trust Trust Medicines Committee

Report that summarises the activities of the committees responsible for the management of medicines at Chelsea and Westminster Hospital NHS Foundation Trust, describes developments through the 2014-2015 year and reports on results of external assessments. DL and VS thought that the report should include CQC results, therefore EW to update report and finalise.

- **Propofol Colour on Carton Memo**

Decision: Noted

Memo circulated to medical, nursing and pharmacy staff for wards, theatres or departments, in light of the class 4 drug alert issued by the MHRA.

7. NICE TA Guidance

2 Technology Appraisals have been noted in September 2015

NICE TA Guidance September 2015

- **TA 355 – Edoxaban for preventing stroke and systemic embolism in people with non-valvular atrial fibrillation**

Edoxaban is recommended, within its marketing authorisation, as an option for preventing stroke and systemic embolism in adults with non-valvular atrial fibrillation with one or more risk factors, including: congestive heart failure, hypertension, diabetes, prior stroke or transient ischaemic attack, age 75 years or older.

Action: Add to the formulary. Short form received.

- **TA356 – Ruxolitinib for treating polycythaemia vera**

Terminated appraisal.

Action: Nil terminated appraisal.

NICE TA Short forms for Noting:

- **TA 345 – Naloxegol for treating opioid-induced constipation**

Short form received.

Action: For noting

- **TA 346 – Aflibercept for treating diabetic macular oedema**

Short form received.

Action: For noting

- **TA 347 – Nintedanib for previously treated locally advanced, metastatic, or locally recurrent non-small-cell lung cancer**

Short form received.

Action: For noting

- **TA 349 – Dexamethasone intravitreal implant for treating diabetic macular oedema**

Short form received.

Action: For noting

- **TA 354 – Edoxaban for treating and for preventing deep vein thrombosis and pulmonary embolism**

Short form received.

Action: For noting

- **TA340 – Ustekinumab for treating active psoriatic arthritis**

Short form received.

Action: For noting

8. IVIG Update

Decision: Noted

- **IVIG requests**

September 2015

There were 12 IVIG issues in September 2015, with 4 new requests:

- Two for Lambert Eatons (Blue indication)
- One for Myasthenia gravis (Blue indication)
- One for Kawasaki's Disease (Red indication)

9. Items for noting

- **MHRA Update**

September 2015

DL raised concerns of information governance risk of the yellow card reporting app that may be downloaded to smart phones. EW to further investigate information governance risk.

- **NWLIF Compliance Audit Q2 2015/2016**

Audit of prescribing compliance with the NWLIF Q2 2015/2016. Correction to the papers, 95.8% compliant for Q2 2015/2016

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- **Non-medical Prescriber Register September 2015**

Trust non-medical prescriber register as of September 2015

- **Quarterly Controlled Drug Report Q4 2014/2015**

Quarterly CD Report Q4 2014/2015

- **Medicines Committee dates 2016 (to April)**

Medicines Committee dates to April 2016

- **Audit on the prescribing of rifaximin at CW**

Audit on the prescribing of rifaximin within Chelsea and Westminster Hospital in line with its licensed indication for hepatic encephalopathy. (NICE TA 337)

10. Meeting minutes for noting

- HIV Subcommittee Meeting

- August 2015

Minutes from the local HIV subcommittee group meeting held in August 2015.

Decision: Noted

11. Joint Formulary

- **Joint Formulary Full Application Form (for comments and approval)**

A joint formulary full application form for comments/approval was discussed. The application form is a combination of existing application forms from CW and WMUH. Comments to be emailed to EW. EW to forward to WHUH to receive comments at their next DTC meeting.

- **Joint Formulary**

Example of formulary comparison – for comments

13. Date of next meeting

Monday 9th November: 8.00 - 9.00

Board Room: Lower Ground Floor, Lift Bank B

Closing date for papers: Friday 16th October 2015