



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

Summary of Main Points from the Meeting held on Monday 10th December 2018

2. Minutes and Summary Notes from last meeting

The Minutes and Summary notes from the 12th November 2018 Medicines Group meeting were approved and will be circulated.

3. Matters Arising

The Group noted the matters arising from the previous meeting.

4. Business to be transacted by the Medicines Group

4.1 Formulary Applications

Full Applications

• **Budesonide Orodispersible 1mg Tablets (Jorveza[®])**

Requested by Gastroenterology. Jorveza[®] is the only licensed product indicated for the treatment of Eosinophilic Esophagitis (EoE) in adults (Older than 18 years of age). The request is also for use in Paediatrics at CW site only (Outside the product licence). Currently swallowed corticosteroids (Fluticasone and Budesonide) are administered via inhaler or nebulas made into slurry/viscous solution, but are not optimised for oesophageal delivery and are unlicensed for this indication. It is intended that Jorveza[®] will only be initiated by the Gastroenterology Team.

Potential maximum additional cost to the Trust: £21,099 per annum.

Outcome: Approved for addition to the Formulary for treatment of Adult patients.

Action: DR to discuss application with relevant paediatric consultant and pharmacist regarding request for use in paediatric patients.

• **Sativex[®] (2.7 mg delta-9-tetrahydrocannabinol (THC) and 2.5 mg cannabidiol (CBD) from Cannabis Sativa per spray)**

Requested by Neurology. Sativex[®] is indicated as treatment for symptom improvement in adult patients with moderate to severe spasticity due to Multiple Sclerosis (MS) who have not responded adequately to other anti-spasticity medication and who demonstrate clinically significant improvement in spasticity related symptoms during an initial trial of therapy. It is intended that Sativex[®] will be reserved for patients who have failed/not tolerated conventional treatments. Spasticity associated with MS will be diagnosed only by a MS Consultant and patients will be reviewed initially monthly by the MS Team, then 3 monthly to assess response.

Potential cost to the Trust: £8,880 per annum (first month treatment at free of charge).

It was noted that NICE does not recommend this as a treatment option for spasticity in MS patients due to cost effectiveness. However, this application is for use in complex patients who have tried multiple conventional agents previously and where treatment is fully assessed objectively for benefit. Treatment will be discontinued if it is found that there is no benefit.

It was also noted that Imperial College Healthcare Trust (ICHT) (Neurology Specialist (Hub) Centre) currently does not have Sativex[®] included on their formulary. Hillingdon (Neurology Secondary (Spoke) Centre) currently does have Sativex[®] included in their formulary. It was agreed that adding Sativex[®] to the Chelsea & Westminster in the absence of it being used by the Hub would not be appropriate. It was therefore agreed that Sativex[®] could be prescribed without it being included on the formulary provided it is prescribed and assessed by a Consultant Neurologist and feedback on patient benefit is provided in due course. Will await progress with the ICHT Formulary application.

Outcome: Agreed not to add this to the formulary. Agreed to trial this in patients who may benefit and to resubmit application with patient feedback when application is approved for adding to the ICHT formulary.

Ex-panel

• **Biosimilar Insulin Lispro (Sanofi)**

Requested by Diabetology. Overall, the results show it to be of similar efficacy, safety and immunogenicity to Humalog (Eli Lilly).

Patients eligible for the Biosimilar Lispro are patients with Type 1 or Type 2 Diabetes, who require the initiation of rapid acting insulin for postprandial hyperglycaemia.

This is already included on NWLIF.



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Outcome: Approved for addition to the formulary once RMOC check list has been submitted.

Action: To complete RMOC checklist prior to approval being granted

- **Sodium Hyaluronate 0.2% drops (Hilo-Forte[®])**

Sodium Hyaluronate 0.4% (Clinitas Multi[®]) Eye Drops was requested by the Ophthalmology Team to be added to the Trust Formulary in June 2017 for the relief from the sensations of dry eye such as grittiness, burning or foreign body sensation. At the time it was requested that the 0.4% strength would replace the 0.2% strength drops.

The Ophthalmology Team are now requesting for Sodium Hyaluronate 0.2% drops to be reinstated back on the formulary because:

- Sodium Hyaluronate 0.2% is currently included on the NWLIF and Sodium Hyaluronate 0.4% is not.
- There remains a clinical need for the prescribing of the Sodium Hyaluronate 0.2% drops in some patients and therefore in some cases the higher strength may not always be warranted.

This will mean that going forward both 0.2% and 0.4% will be available on the formulary

Outcome: Approved for addition to the formulary

Action: Application to be submitted to NWLIF

- **Buccolam 5mg/ml Solution (Midazolam[®]) - 2.5mg, 5mg, 7.5mg and 10mg Oromucosal syringes**

Requested by Paediatrics WMUH. WMUH site has been prescribing Buccolam 5mg/ml oromucosal pre-filled syringes (PFS). This was included on the WMUH formulary prior to the amalgamation of the two formularies. Currently only Epistatus 10mg/ml buccal liquid is on the Joint Formulary however, this product is not licensed for children under 10 years old and currently being used off-label at CW site. Paediatrics at both sites would like to use Buccolam 5mg/ml oromucosal PFS for the majority of our patients, but also to keep the Epistatus 10mg/ml buccal liquid for refractory epilepsy cases who require more accurate dosing in between the dose bands. Once Epistatus PFS become available, this will be reviewed for cost comparison.

Outcome: Approved for addition to the formulary

- **Nifedipine 10mg SR Tablets (Nifedipress MR 10)**

Requested for addition to the formulary to replace Nifedipine 10mg SR Tablets (Adalat Retard[®]).

Outcome: Approved for addition to the formulary

Removals

- **Nifedipine 10mg SR Tablets (Adalat Retard[®])**

Discontinued by the manufacturer

Outcome: Approved for removal from the formulary

- **Lubiprostone 24mcg Capsules (Amitiza[®])**

Discontinued by the manufacturer

Low usage at both sites.

Outcome: Approved for removal from the formulary

NICE Approved drug applications

- **Vyxeos[®] (Daunorubicin 44mg and Cytarabine 100mg)**

Approved by NICE for AML on 08/11/2018. NICE TA yet to be published.

Outcome: Approved for addition to the formulary

Note: Following the meeting it was established AML is not routinely treated at either site and therefore this is not applicable to the Trust. The formulary has been updated subsequently to reflect this.

Pharmacoeconomic Board requests

- **IVIg for Cutaneous Vasculitis**

Approved by the Pharmacoeconomic Board on 08/11/18

For noting by the Group.



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Outcome: Noted

- **IVIG for Autoimmune Encephalitis**

Approved by the Pharmacoeconomic Board on 22/11/18

For noting by the Group.

Outcome: Noted

4.2 Trust Medicines Policy

- **TMP - Section 3: Ordering and supply of medicines**

Update to include supply endorsements "S" and "POSH"

Updated to remove references to Kobler Pharmacy

Outcome: Approved

- **TMP - Section 4: Storage of medicines**

Updated to include:

- Reference to Duthie Guidance on Safe Storage of Medicines
- Instruction on not removing loose strips of tablets/capsules from primary packaging on wards/departments.
- Storage of medical gas cylinders

Outcome: Approved

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

Addition of the following medicines:

- Sativex[®] as a Schedule 4 CD
- Medicinal Cannabis derived products (including those awaiting scheduling) as a Schedule 2 CD in table on page 3.

Outcome: Approved

- **TMP - Section 21. Patient Group Directions**

Updated to include:

- Improved clarity around audit of PGDs.
- New audit tool used for audit of PGDs.

Outcome: Approved

- **TMP - Section 33: Pharmacy service outside normal working hours**

Updated to include new Emergency Drug Cabinet on Crane Ward at WMUH

Outcome: Approved

- **Updates to Adult IV Administration Guide**

Updates to Adult IV Administration Guide including:

- Inclusion of Cardiac Physiologists as healthcare professional who can administer IV medicines
- Update of administration instruction for Urokinase for unblocking PICC lines via 3-way tap
- Other minor changes

Decision: Approved

4.3 Medicines Optimisation

Nil

4.4 NICE Technical Appraisals and Guidance

a) NICE Technical Appraisals

2 Appraisals published in November 2018

**TA545 - Gemtuzumab ozogamicin for untreated acute myeloid leukaemia
Formulary status / Action**



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To confirm if applicable to CWFT

TA546 - Padeliporfin for untreated localised prostate cancer
Formulary status / Action
Nil - Not recommended

b) NICE Highly Specialised Technologies published in October 2018
1 Highly Specialised Technologies published in October 2018

HST8 - Burosumab for treating X-linked hypophosphataemia in children and young people
Formulary status / Action
Nil action - Not applicable - Condition not treated at CWFT

c) NICE TA Adherence Table 2018/19
NICE TA Adherence Table for 2018/19
Outcome: Approved. Will be uploaded on the Trust Intranet Website for public viewing.

4.5 IVIG requests

CWH Site

- **IVIG issues for November 2018 - CW site**

There were 12 IVIG issues in November 2018, with 6 new requests:

- **IVIG issues for November 2018 - WMUH site**

There were 18 IVIG issues in November 2018, with 4 new requests

Decision: Approved

4.6 Items for noting

- **Quarterly Controlled Drug Summary Report - Q2 2018/19**

Quarterly Controlled Drug Summary report for Q2 2018/19

Decision: Noted

- **Quarterly Controlled Drugs Accountable Officer Report - Q2 2018/19**

Quarterly CD Accountable Officer report for Q2 2018/19

Decision: Noted

- **Medication Safety Group - Terms of Reference**

Terms of Reference for Medicines Safety Group

Decision: Noted

- **Medication Safety Bulletin - Accessing medicines out-of-hours**

Medication Safety Bulletin relating to accessing medicines out-of-hours

Decision: Noted

- **CAS Alert - Phenytoin Liquid**

CAS Alert regarding shortage of Phenytoin Liquid and associated action plan

Decision: Noted

- **RMOC Guidance - Insulin Preparations**

The RMOC Guidance around safe choice of agent when considering adding a new insulin preparation to a local formulary.

Enclosures include:

- Guidance
- Safety Checklist



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Decision: Noted

- **RMOC Guidance - Liothyronine**

The RMOC Guidance on the prescribing of Liothyronine

Decision: Noted

- **RMOC Guidance - FOC Medicine Schemes**

The RMOC Guidance on FOC Medicines Schemes

Decision: Noted

- **Dates for Trust Medicines Group meetings 2019**

Dates for Trust Medicines Group meetings 2019

Decision: Noted

- **Dates for North West London Integrated formulary meetings 2019**

Dates for North West London Integrated formulary meetings 2019

Decision: Noted

- **MHRA Drug Safety Update - November 2018**

MHRA update for November 2018

Decision: Noted

4.7 Meeting minutes for noting

- **HIV/GUM Directorate - Medicines Sub-Group Meeting - October 2018**

Minutes from HIV/GUM Directorate - Medicines Sub-Group Meeting - October 2018

Decision: Noted

- **Medication Safety Group - October 2018**

Minutes from Medication Safety Group - October 2018

Decision: Noted

4.8 Additional papers to go to Trust Patient Safety Group

- Quarterly Controlled Drug Summary Report - Q2 2018/19
- Quarterly Controlled Drugs Accountable Officer Report - Q2 2018/19

5. Any other business

Nil

6. Date of next meeting

Date: Monday 11th February 2018

Time: 8am-9am

Location: Wyman Seminar Room (CWH Site) and Meeting Room E (WMUH Site via telephone conferencing)

Closing date: 18th January 2018