Chelsea and Westminster Hospital
NHS Foundation Trust

Chelsea and Westminster Hospital NHS Foundation Trust
Trust Medicines Group

Summary of Main Points from the Meeting held on Monday 22nd July 2019

2. Minutes and Summary Notes from last meeting

The Minutes and Summary notes from the 17th June 2019 Medicines Group meeting were approved and will be circulated. It was noted that there was no meeting held in May.

3. Matters Arising

The Group noted the matters arising from the previous meeting.

4. Business to be transacted by the Medicines Group

a) Formulary Applications

Full Applications

- **Aviptadil 25mcg & Phentolamine 2mg solution for injection (Invicorp®)**

Requested by Urology. Invicorp® is indicated for the symptomatic treatment of erectile dysfunction in adult males due to neurogenic, vasculogenic, psychogenic, or mixed aetiology. It is intended that Invicorp® will only be prescribed by Urologist at CW site as a 2nd line treatment after failure on oral phosphodiesterase-5 (PDE-5) inhibitors as per guidelines by the British Society for Sexual Medicine and the European Association of Urology. Erectile dysfunction service not offered at WMUH site. Potential cost to the Trust is estimated to be £2,850 per annum as it is included in the North West London Integrated Formulary (NWLIF).

Outcome: Presenter did not attend the meeting - Deferred until presenter can attend

- **Methenamine Hippurate 1g Tablets (Hiprex®)**

Requested by Microbiology. Hiprex® is indicated in the prophylaxis and treatment of urinary tract infections (UTI). It is intended that Hiprex® will be used cross-site as a prophylactic option to reduce recurrent UTI in patients where 1st / 2nd / 3rd line options recommended by NICE [NG112] (nitrofurantoin, trimethoprim and amoxicillin respectively) are not suitable due to:

- Presence of multi-resistant organisms
- Allergies, contraindications, or side-effects with prophylactic antibiotics
- Patient history of *C.difficile* infection (CDI)

All treatment will be initiated after review by specialist Microbiologist / Infection Disease clinician, Urology Consultant or Elderly Care Consultant. Will require application to be made to NWLIF for inclusion so that onward prescribing can be undertaken by GPs. Maximum potential cost to the Trust estimated to be £5,680 per annum until added to NWLIF.

Decision: Approved for addition to the formulary

Ex-panel

- **Flecainide 50mg Tablets**

Requested by ITU for a specific patient. 100mg tablets already included on the formulary. Proposal to add the 50mg tablets to the formulary for completeness.

Decision: Approved for addition to the formulary

- **Semglee Insulin in Pre-filled Pen**

Semglee Insulin is a Biosimilar of Insulin Glargine (Lantus). Added to the NWLIF in January 2019. Request received from NWLIF panel to add this to local acute Trust formularies in addition. Added to the formulary for prescribing for any patients admitted on this. It was agreed that a letter should be drafted to the Diabetes Team informing them of the addition of this new Biosimilar to the formulary. Adding this to the formulary means it is available for any patients who may be admitted on this. It may also be prescribed for new patients requiring Insulin Glargine going forward and potentially considered for switching existing patients who are currently prescribed Lantus®. This will require further discussion with the Diabetes Team.

Information received from the CCG subsequent to the meeting: Currently, Semglee® is the least expensive way of using Insulin Glargine, 20% more cost effective than Lantus®, both in hospital and general practice

(based on list prices). The local 4 CCGs annual savings from a 100% switch from Lantus SoloStar® to Semglee® is around £170,000.
Decision: Approved for addition to the formulary
Action: Letter to be drafted to the Diabetes Team

- **Levetiracetam 250mg, 500mg and 1g Granules (Desitrend®)**

Requested by Paediatrics as an alternative to using liquid formulation for the management of complex epilepsy in patients with behavioral/learning difficulties with compliance issues. The granules have shown to be successful in this group of patients as the granules can be disguised in food.
Desitrend® 250mg granules - £5.37 - 60 sachets
Desitrend® 500mg granules - £9.46 - 60 sachets
Keppra® Liquid 100mg/ml - £13.20 - 300ml
Decision: Approved for addition to the formulary

Removals

- **Testosterone 300mcg/24hours Transdermal Patches (Intrinsa®)**

Discontinued by the manufacturer.
Decision: Approved for removal from the formulary

- **Cilest® (Ethinylestradiol 35 mcg / norgestimate 250 mcg) tablet**

Discontinued by the manufacturer. Currently procuring the generic product as a regular pack and over-labelled/pre-pack.
Decision: Approved for removal from the formulary

- **Isotrex® (Isotretinoin 0.05% and Erythromycin 2%) Gel**

Discontinued by the manufacturer.
Decision: Approved for removal from the formulary

- **Sodium Aurothomalate (Gold) 50mg injection (Myocrisin®)**

Discontinued by the manufacturer.
Decision: Approved for removal from the formulary

Switches

- **Methylphenidate 18mg, 27mg and 36mg Prolonged Release Tablets - Brand switch from Concerta XL® to Delmosart®)**

Request from CCG to switch from Methylphenidate (Concerta XL®) to (Delmosart®) on the grounds of cost-effectiveness (Overall savings for the 8 CCGs is around £250,000/year)
Decision: Approved for switching in the formulary

- **Calcium Folinate Injection - Strength switch from 30mg/10ml to 10mg/ml Injection**

30mg/10ml injection formulation is discontinued by the manufacturer. Currently procuring 10mg/ml injection formulation
Decision: Approved switching in the formulary

NICE Approved drug applications

- **TA575 - Tildrakizumab for treating moderate to severe plaque psoriasis**

Approved by NICE in April 2019.
Decision: Approved for addition to the formulary

- **TA578 - Durvalumab for treating locally advanced unresectable non-small-cell lung cancer after platinum-based chemoradiation**

Approved by NICE in May 2019.
Decision: Approved for addition to the formulary

- **TA584 - Atezolizumab in combination for treating metastatic non-squamous non-small-cell lung cancer**

Approved by NICE in June 2019.
Decision: Approved for addition to the formulary

Pharmacoeconomic Board requests

- **Apremilast for Hidradenitis Suppurativa**

Approved by the Pharmacoeconomic Board on 02/06/2019
Decision: Noted

- **Rituximab for Limbic Encephalitis**

Approved by the Pharmacoeconomic Board on 03/06/2019
Decision: Noted

- **IVIG for Autoimmune Encephalitis (Grey Indication)**

Approved by the Pharmacoeconomic Board on 21/06/2019
Decision: Noted

- **Rituxiumab for Paraneoplastic Syndrome**

Approved by the Pharmacoeconomic Board on 03/07/2019
Decision: Noted

- **Rituximab for Relapsing Neuroinflammatory Disease**

Approved by the Pharmacoeconomic Board on 08/07/2019
Decision: Noted

Other

- **Risankizumab (Skyrizi®) (Abbvie)**

AbbVie has announced that the EU has granted a marketing authorisation for Risankizumab (Skyrizi®) for the treatment of moderate to severe plaque psoriasis.

Abbvie has submitted the product for NICE review (Fast track). Anticipated publish date: 21/09/19
In the meantime has agreed to make this product immediately available to NHS patients via a Commercial Offer (FOC Scheme) in line with RMOC guidance where there is an unmet clinical need.

As this FOC Scheme does not meet an unmet clinical need and potentially circumvents existing NICE approved therapies, it would not be appropriate for the Trust to use this medication prior to the NICE TA publishing date. There is the potential to save a substantial amount following a positive NICE on any patients started after this until the 31/3/20. Therefore, it was proposed to sign the agreement prior to the 21/8/19 (Date set by AbbVie) however restricting prescribing until after the 21/9/19. This would maximise the saving to the health economy prior to 31/3/20 on any patient newly started on this medication post NICE TA and prevent circumventing the current NICE criteria.
Decision: As this FOC scheme does not meet the RMOC criteria for FOC Schemes due to an unmet clinical need, it was agreed that this should not be pursued by the Trust.

4.2 Trust Medicines Policy

- **RPSGB Professional Guidance on the safe and secure handling of Medicines in Healthcare Settings (Appendix A and C)**

Gap analysis undertaken to review the Trust compliance status with RPSBG Professional Guidance on the safe and secure handling of medicines in healthcare settings

- Appendix A standards relate to Storage of medicines in healthcare settings
- Appendix C standards relate to Operating Theatres.

Areas of non-compliance were identified and an action plan drafted.
This gap analysis runs alongside a further a group of individual gap analysis that were undertaken on 135 individual clinical areas for Appendix A and 30 clinical areas for Appendix C. Action plans for individual clinical areas are yet to be agreed by Senior Nursing/Midwifery staff.
Actions from both the individual and Trust-wide action plans need to be complete in order to be fully compliant with the guidance.

Decision: Approved

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

Updated in line with RPSGB Professional Guidance on the safe and secure handling of Medicines in Healthcare Settings - Published December 2018.
Decision: Approved

- **Proposed changes to Trust Medicines Policy in relation to the provision of a second check of IV medications by Final Year Student Nurses and Nursing Associates**

Changes have been proposed to the Trust Medicines Policy in light of recent changes to the role and responsibilities of the student nurse proposed by the Nursing and Midwifery Council (NMC).
It has been agreed at the IV Task Force Group that final year nursing and midwifery students are permitted to provide a second check of IV medicines including blood and blood products. In addition, registered Nursing Associates will be permitted to also provide a second check of IV medicines including blood and blood products. They will however continue not be permitted to administer IV medicines - and only permitted to administer medicines via the IM and SC routes as per the NMC proficiency standards). This is to ensure efficiency with the administration of medicines at ward level.
Decision: Approved

- **TMP: Section 8 - Administration of medicines**

Updated:
- In line with RPSGB Professional Guidance on the safe and secure handling of Medicines in Healthcare Settings - Published December 2018 - Statement included relating to the safe drawing up of medicines in theatre.
- In line with final year student nurses and registered nursing associates providing a second check of IV medications as agreed at Trust IV Work Force Group June 2019 meeting.
- To include more detailed information about Midwives Standing Orders
Decision: Approved

- **TMP: Section 17 - Injectable Medicines Policy**

Update in in line with final year student nurses and registered nursing associates providing a second check of IV medications as agreed at Trust IV Work Force Group June 2019 meeting
Decision: Approved

- **Update to Adult IV Administration Guide**

Addition of two new monographs to the Adult IV Administration Guide:
- CefEPime (Renapime®)
- Dalbavancin (Xydalba®)

Decision: Approved

4.3 Medicines Optimisation

- **Trust Annual Medicines Optimisation Report 2018-19**

Medicines management encompasses a range of activities intended to improve the way that medicines are selected, procured, prescribed, dispensed and administered.
This report summarises the activities of groups responsible for the management of medicines at CWFT including the Trust Medicines Group and the groups that feed into the Trust Medicines Group, describes developments throughout the 2018-19 year and reports on results of external assessments.
The Group were asked to forward any comments on the content by 28/06/2019
The finalised report will be forwarded to the Trust Patient Safety Group for noting.
Decision: Approved

4.4 NICE Technical Appraisals and Guidance

a) NICE Technical Appraisals

1 Appraisals published in May 2019
5 Appraisals published in June 2019

TA582 - Cabozantinib for previously treated advanced hepatocellular carcinoma
Advice
Formulary status / Action
Nil - Terminated appraisal

TA583 - Ertugliflozin with metformin and a dipeptidyl peptidase-4 inhibitor for treating type 2 diabetes
Formulary status / Action
Nil action - Already included on the formulary for monotherapy or in combination with Metformin

TA584 - Atezolizumab in combination for treating metastatic non-squamous non-small-cell lung cancer
Formulary status / Action
Added to the formulary following receipt of a signed application form from the CW Oncology Team - See Section 4.1

TA585 - Ocrelizumab for treating primary progressive multiple sclerosis
Formulary status / Action
Nil action - Not applicable - CWFT not a Specialist Neuroscience Centre
Action: Confirm with Dr Curry-Singh if there is a need to include Ocrelizumab on the Trust Formulary to treat patients at CWFT due to practicalities issues of getting transferred to a Specialist Neuroscience Centre.

TA586 - Lenalidomide plus dexamethasone for multiple myeloma after 1 treatment with bortezomib
Formulary status / Action
Currently included on the formulary.
Numbers likely to treat at CWH site: 5-10 patients per year.
Numbers likely to treat at WMUH site: 4-5 patients per year.

TA587 - Lenalidomide plus dexamethasone for previously untreated multiple myeloma
Currently included on the formulary.
Numbers likely to treat at CWH site: 10 patients per year.
Numbers likely to treat at WMUH site: 2-3 patients per year.

a) NICE Highly Specialised Technologies published since last meeting
0 Highly Specialised Technologies published

4.5 IVIG requests

- **IVIG issues for May 2019 - CW site**

There were 11 IVIG issues in June 2019, with 7 new requests:
Decision: Approved

- **IVIG issues for June 2019 - WMUH Site**

There were 17 IVIG issues in March 2019, with 7 new requests
Decision: Approved

4.6 Items for noting

- **Specialist Commissioning Drugs Briefing - Spring 2019**

Specialist Commissioning Drugs Briefing - Spring 2019
Enclosures include:
- Commissioning Briefing
- Changes to list of medicines not reimbursed through national process and directly commissioned by NHS England

Decision: Noted

- **Patient Safety Group Report - July 2019**

Patient Safety Group report covering period Apr, May and June 2019
Decision: Noted

- **Trust Medicines Group - Terms of Reference**

Updated Terms of Reference for Trust Medicines Group for approval
Decision: Noted

- **Chemotherapy Service Group - Terms of Reference**

Updated Terms of Reference for Chemotherapy Service Group
Decision: Noted

- **Clinical Directorate of HIV and GUM, Medicines Sub-Group - Terms of Reference**

Updated Terms of reference for Clinical Directorate of HIV and GUM, Medicines Sub-Group
Decision: Noted

- **Homecare Group - Terms of Reference**

Update Terms of Reference for Homecare Group
Decision: Noted

- **Antimicrobial Steering Group - Terms of Reference**

Updated Terms of Reference for Antimicrobial Steering Group
Decision: Noted

- **Antifungal Steering Group - Terms of Reference**

Updated Terms of Reference for Antifungal Steering Group
Decision: Noted

- **Patient Group Directions Log - July 2019**

Patient Group Directions Log for July 2019
Decision: Noted

- **Clinical Commissioning Pharmacy Report - May 2019**

Clinical Commissioning Pharmacy Report for May 2019
Decision: Noted

- **Medication Safety Bulletin - Medication-Related Never Events**

Medication Safety Bulleting re Medication-Related Never Events
Decision: Noted

- **Medication Safety Bulletin - Polypharmacy and Deprescribing**

Medication Safety Bulleting re Polypharmacy and Deprescribing
Decision: Noted

- **RMOC Newsletter - Issue 1**

Newsletter from RMOC - Issue 1
Decision: Noted

- **RMOC Newsletter - Issue 2**

Newsletter from RMOC - Issue 2
Decision: Noted

- **Decision: Noted**
- **RMOC Newsletter - Issue 3**

Newsletter from RMOC - Issue 3
Decision: Noted

- **MHRA Drug Safety Update - June 2019**

MHRA update for June 2019

Decision: Noted

4.7 Meeting minutes for noting

- **Medication Safety Group - April 2019**

Minutes from Medication safety Group meeting - April 2019
Decision: Noted

- **Medication Safety Group - May 2019**

Minutes from Medication safety Group meeting - May 2019
Decision: Noted

- **Medication Safety Group - June 2019**

Minutes from Medication safety Group meeting - June 2019
Decision: Noted

- **Homecare - June 2019**

Minutes from Homecare meeting - June 2019
Decision: Noted

- **Chemotherapy Service Group (CSG) - June 2019**

Minutes from Chemotherapy Service Group - June 2019
Decision: Noted

4.8 Additional papers to go to Trust Patient Safety Group

- Trust Hospital Pharmacy Transformation Plan (HPTP)
- Trust Medicines Optimisation Strategy 2017 to 2020
- Trust Response and Action Plan to the Gosport Independent Panel Report
- Patient Safety Group Report - April 2019
- Trust Medicines Group - Terms of Reference

5. Any other business

Nil

6. Date of next meeting

Next meeting
Date: Monday 23rd September
Time: 8am-9am
Location: Executive Boardroom and A&E Meeting Room
Closing date: 30th August 2019