Chelsea and Westminster Hospital NHS Foundation Trust
Trust Medicines Group

Summary of Main Points from the Meeting held on Monday 18th March 2019

2. Minutes and Summary Notes from last meeting

The Minutes and Summary notes from the 11th February 2019 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

a) Formulary Applications

Full Applications

- **Semaglutide 0.25mg, 0.5mg and 1mg solution for subcutaneous injection in pre-filled pen (Ozempic®)**

Requested by Endocrinology. Ozempic® is indicated for the treatment of adults with insufficiently controlled Type 2 Diabetes Mellitus as an adjunct to diet and exercise:

- as monotherapy when metformin is considered inappropriate due to intolerance or contraindications
- in addition to other medicinal products for the treatment of diabetes

but in accordance with NICE guidelines (NG28) for use of GLP-1 agonists in management of Type 2 Diabetes:

- Where triple therapy is not effective, not tolerated, or contra-indicated in adults with type 2 diabetes who:

– have a BMI of ≥35 kg/m2 (adjusted accordingly for people from black, Asian and other minority ethnic groups) and specific psychological or other medical problems associated with obesity, or

– have a BMI <35 kg/m2, and for whom insulin therapy would have significant occupational implications, or weight loss would benefit other significant obesity-related comorbidities

- Therapy would be continued if the patient has had a beneficial metabolic response, defined within the guideline as a reduction of at least 1% in HbA1c and a weight loss of at least 3% of initial body weight after 6 months of treatment.

It is intended that Ozempic® will only be initiated by Consultant Diabetologists as an alternative to other GLP-1 agonists in adults with type 2 diabetes at high risk of cardiovascular events. No additional financial impact anticipated as its use will be instead of other formulary alternatives and the drug is cost neutral in relation to these alternatives.

The application will need to be forwarded to the North West London Integrated formulary (NWLIF) Panel for consideration for addition to the NWLIF to enable onward prescribing by GPs.
Decision: Approved for addition to the Formulary for restricted use for the treatment of insufficient controlled Type 2 Diabetes Mellitus as an add-on therapy to oral antidiabetic medicines or basal insulin. It was not approved for monotherapy where metformin is considered inappropriate due to intolerance or contraindications. It was agreed that Semaglutide will replace Exenatide on the formulary.

Ex-panel

Nil

Removals

- **Estriol (Ortho-Gynest) 0.01% Vaginal Cream**

Licensed for the treatment of atrophic vaginitis (due to estrogen deficiency) in peri- and post-menopausal women. Requested by Gynaecology to remove this form the formulary. Both Gynaecology Service Leads at CWH and WMUH have agreed that Ortho-Gynest Cream (Estriol 0.01%) can be made non-formulary due to the clinical equivalence in dose of Estriol and reduction in price when compared to Ovestin (Estriol 0.1%). Ovestin is now first line at both hospital sites.

Ortho-Gynest 80g = 16 doses of Estriol 500mcg in 5g (0.01%) = £29.98 JAC
Ovestin 15g = 30 doses of Estriol 500mcg in 0.5g (0.1%) = £5.34 JAC
Estimated saving per annum:
WMUH: £2.6K
C&W: £1K

NICE Approved drug applications
Nil

Pharmacoeconomic Board requests

- **Anakinra for Acute Gout**

Approved by the Pharmacoeconomic Board on 22/02/19
For noting by the Group.
Decision: Noted

- **IVIG for Encephalitis**

Approved by the Pharmacoeconomic Board on 08/02/19
For noting by the Group.
Decision: Noted

4.2 Trust Medicines Policy

- **RPSGB and RCN Professional Guidance on the Administration of Medicines in Healthcare Settings**

Enclosures include:
- Guidance (Published January 2019)
- Trust Gap Analysis with Action Plan

Action plan will continue to be completed and will be brought back for approval once all actions are completed. It was requested that a check is undertaken of the Risk Assessment for single supply of pre-packs in GUM to ensure it is up to date and if not to update this accordingly. To be added as an additional action to the Action Plan
Action: Add update of the Risk Assessment for single supply of pre-packs in GUM to the action plan.
Decision: Noted

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

Updated TMP in line with RPSGB and RCN Professional Guidance on the Administration of Medicines in Healthcare Settings
Decision: Approved

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

Updated TMP in line with RPSGB and RCN Professional Guidance on the Administration of Medicines in Healthcare Settings
Decision: Approved

- **Policy for the administration of ophthalmic medications in adult patients undergoing ophthalmic assessment and diagnostic investigation by Non-registered Healthcare personnel in the Ophthalmology Department**

Newly compiled policy for the administration of Ophthalmic Medications in adult patients who are undergoing ophthalmic assessment and diagnostic investigation by Non-registered Healthcare personnel in the Ophthalmology Department. Concerns were raised whether the Evolve prescription signatures will meet the national standards/criteria for electronic signatures.
The policy was approved on the basis that the Evolve prescription signature meets the national standards/criteria for electronic signatures.
Decision: Approved

- **TMP: Section 34 - Supply and administration of medicines by Non-registered Healthcare personnel**

Updated TMP in line with newly compiled policy for the administration of ophthalmic medications in adult

patients who are undergoing ophthalmic assessment and diagnostic investigation by Non-registered Healthcare personnel in the Ophthalmology Department
Decision: Approved

4.3 Medicines Optimisation
Nil

4.4 NICE Technical Appraisals and Guidance
a) NICE Technical Appraisals

2 Appraisal published in January 2019
5 Appraisals published in February 2019

TA558 - Nivolumab for adjuvant treatment of completely resected melanoma with lymph node involvement or metastatic disease
Formulary status / Action
Currently included on the formulary for another indication.
Numbers likely to treat at WMUH site: 0 patients per year.
Action: To confirm numbers likely to treat at CWH site

TA559 - Axicabtagene ciloleucel for treating diffuse large B-cell lymphoma and primary mediastinal large B-cell lymphoma after 2 or more systemic therapies
Formulary status / Action
Nil action - Not applicable - Condition not treated at CWFT

TA560 - Bevacizumab with carboplatin, gemcitabine and paclitaxel for treating the first recurrence of platinum-sensitive advanced ovarian cancer (Terminated appraisal)
Formulary status / Action
Nil - Terminated appraisal

TA561 - Venetoclax with rituximab for previously treated chronic lymphocytic leukaemia
Formulary status / Action
Currently included on the formulary.
Numbers likely to treat at CWH site: 3-5 patients per year.
Numbers likely to treat at WMUH site: 2 patients per year.

TA562 - Encorafenib with binimetinib for unresectable or metastatic BRAF V600 mutation-positive melanoma
Formulary status / Action
Add to the formulary following receipt of a signed application form from the Oncology Team at CWH site.

TA563 - Abemaciclib with an aromatase inhibitor for previously untreated, hormone receptor-positive, HER2-negative, locally advanced or metastatic breast cancer
Formulary status / Action
Add to the formulary following receipt of a signed application form from the Oncology Team at WMUH site.

TA564 - Dabrafenib with trametinib for treating advanced metastatic BRAF V600E mutation-positive non-small-cell lung cancer (Terminated appraisal)
Formulary status / Action
Nil - Terminated appraisal

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

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4.5 IVIG requests

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

There were 7 IVIG issues in February 2019, with 4 new requests:
Decision: Approved

- **IVIG issues for February 2019 - WMUH site**

Report not available
Decision: Deferred to April TMG meeting

- **Feedback from the NWL Immunoglobulin Approval Panel - January 2019 meeting**

Feedback from the NWL IAP meeting held in January 2019
Decision: Noted

- **NHS England: Revised commissioning criteria for the use of immunoglobulins - Letter and Guidance**

Revised letter and guidance from NHS England re. commission criteria for the use of immunoglobulins
Decision: Deferred until April TMG meeting

4.6 Items for noting

- **Quarterly Controlled Drug Summary Report - Q3 2018/19**

Quarterly Controlled Drug Summary report for Q3 2018/19
Decision: Noted

- **Quarterly Controlled Drugs Accountable Officer Report - Q3 2018/19**

Quarterly CD Accountable Officer report for Q3 2018/19
Decision: Noted

- **Medication Safety Bulletin - World Health Organisation (WHO) - *3rd Global Challenge 'Medication Without Harm'***

Medication Safety Bulletin re World Health Organisation (WHO) - *3rd Global Challenge 'Medication Without Harm'*
Decision: Noted

- **Medication Safety Bulletin - Look Alike Sound Alike Medicines** Medication Safety Bulletin re Look Alike Sound Alike Medicines

Decision: Noted

- **MHRA Drug Safety Update - February 2019**

MHRA update for February 2019
Decision: Noted

4.7 Meeting minutes for noting

- **North West London Integrated Formulary Meeting - January 2019**

Minutes from North West London Integrated Formulary Meeting - January 2019
Decision: Noted

- **Medication Safety Group - January 2019**

Minutes from Medication Safety Group - January 2019
Decision: Noted

4.8 Additional papers to go to Trust Patient Safety Group

- **Quarterly Controlled Drug Summary Report - Q3 2018/19**

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- **Quarterly Controlled Drugs Accountable Officer Report - Q3 2018/19**

5. Any other business

- **Declarations of conflict of interest**

The Group was notified of an e-mail that was sent by Chief Executive last week in relation to Declaration of Conflict of Interests. NHS England requires Foundation Trusts to publish an up-to-date register of interests for all 'Decision-making staff' at least annually. This Trust has defined decision-making staff as those at Band 8A or above, or who have the power to enter into contracts on behalf of the Trust, or are otherwise involved in decision-making concerning the purchasing of goods, medicines, medical devices or equipment and formulary decisions.
Group member are asked to complete a Declaration of Conflicts of Interest form. This will be sent around to Group members after the meeting. Group members are asked to complete it (Completing a Null report if no Conflicts of Interest of to declare). Please sent to either DR or Sheila Murphy by 22nd March 2019
Action: DR to send out Declarations of Conflict of Interest Form and group members to complete and submit by 22/03/2019.

- **Administration of medicines by Nursing associates**

CH brought the new Advisory Guidance on Administration of Medicines by Nursing Associates published by Health Education England to the attention of the Group. She has asked that a sub-meeting is arranged to explore the impact of this on the current content of the Trust Medicines Policy.
Action: David Bushby, DR, CH and GC to arrange a sub-meeting to discuss accordingly.

- **Dates for meetings going forward**

Due to the Boardrooms being used for Trust Executive Team Deep-Dives every Monday morning, TMG meeting dates are being confirmed only 2 months in advance. Meetings dates confirmed to date:

- April 15th 8am-9am (Boardroom (CWH) & Meeting Room A (WMUH))
- May 13th 8am-9am (Boardroom (CWH) & Meeting Room A (WMUH))

Decision: noted

6. Date of next meeting
Date: Monday 15th April 2019
Time: 8am-9am
Location: Board Room (CWH Site) and Meeting Room A (WMUH Site via video conferencing)
Closing date: 29th March 2019