Chelsea and Westminster Hospital NHS Foundation Trust
Trust Medicines Group

Summary of Main Points from the Meeting held on Monday 12th September 2016

2. Minutes and Summary Notes from last meeting
The Minutes and Summary notes from the July 2016 Medicines Group meeting were approved and will be circulated.

3. Matters Arising
The Group noted the matters arising from the previous Medicines Group meeting in July 2016.

4.0 Business to be transacted by the Medicines group
4.1 Formulary Applications
Full applications

- **Darifenacin 7.5mg and 15mg Tablets (Emselex®)**

Decision: There was no presenter and therefore review of the application was deferred to October.

- **Enstilar® cutaneous foam (Calcipotriol & Betamethasone)**

Requested by the Dermatology Team as a treatment option for plaque psoriasis. Enstilar® is a suitable first-line topical treatment for patients with stable body/trunk plaque psoriasis who require a combination of a topical corticosteroid and vitamin D analogue. It is intended that patients will receive Enstilar® before moving on to a light therapy and systemic non-biological agent such as methotrexate, ciclosporin and acitretin. Treatment is recommended to be confined to a 4-week period. GPs would therefore not be expected to provide ongoing treatment after this initial 4 week treatment period. However it was decided that it would be prudent to forward an application request for Enstilar® to be added to the NWL Integrated formulary so that GPs can initiate treatment, thereby reducing referrals in the longer term.
Decision: Approved

Ex-panel

- **Insulin Lispro - Humalog® (Kwikpen®) 200units/ml**

Requested by the Diabetology Team for patients who require high doses of Humalog insulin and therefore would benefit from receiving the higher concentration preparation.
Decision: Approved

- **Boostrix® IPV vaccine**

Requested by the Obstetric Team for boosting Pertussis immmunisation in women over 28 week pregnant. Boostrix® IPV replaces Repevax® as the booster of choice as it has been judged by the Public Health England as the agent that delivers the best value to the NHS.
Decision: Approved

For noting

- **Alirocumab in line with NICE TA393**

For use in line with NICE TA393 *(Alirocumab for treating primary hypercholesterolaemia and mixed dyslipidaemia).*
Decision: Noted - Was approved for addition to the formulary by Chairman's action on 22/07/16

- **Evolocumab in line with NICE TA394**

For use in line with NICE TA394 *(Evolocumab for treating primary hypercholesterolaemia and mixed dyslipidaemia*
Decision: Noted - Was approved for addition to the formulary by Chairman's action on 22/07/16

- **Ceritinib in line with NICE TA395**

For use in line with NICE TA395 (*Ceritinib for previously treated anaplastic lymphoma kinase positive non-small-cell lung cancer*)
Decision: Noted - Was approved for addition to the formulary at the July meeting

- **Trametinib in line with NICE TA396**

For use in line with TA396 *(Trametinib in combination with dabrafenib for treating unresectable or metastatic melanoma*)
Decision: Noted - Was approved for addition to the formulary at the July meeting.

- **Rivaroxaban in line with NICE TA335 (At WMUH)**

For use in with line with NICE TA335 (*Rivaroxaban for preventing adverse outcomes after acute management of Acute Coronory Syndrome).* This supersedes any previous paperwork that has been submitted by WMUH and indicates that Rivaroxaban is now approved for use at the WMUH Site for ACS.

Decision: Approved

IFR Forms / Pharmacoeconomic Board approvals for noting

- Rituximab IV for Pemphigus Vulgaris

Decision: Noted - Was approved by the Pharmacoeconomic Board.

Removals

- **Methadone 1mg/ml Liquid (Sugar containing)**

Proposed by Pharmacy to remove the sugar containing Methadone 1mg/ml liquid formulation form the formulary leaving the sugar free formulation as the preferred formulation to minimise administration errors and controlled drugs stock discrepancies on wards/departments.

Decision: Approved

4.2 Trust Medicines Policy

The following changes were proposed to the Trust Medicines Policy - CWH Site:

- **TMP Section 24. Concentrated potassium solutions (CWH Site)**

Updated following a SUI review to include potassium chloride 40mmol/100ml infusion bags as a formulation that is regarded as a 'Concentrated potassium solution' and therefore covered under the remit of this section of the TMP. A statement was also added to indicate that all potassium containing infusions should always be administered via a suitable rate controlling infusion device.

Decision: Approved

- **Trust IV Administration Guide - Updates**

Updates to the Trust IV Administration Guide.
New additions: Vedolizumab IV and Micafungin IV
Updates: Changes to where certain IV drugs can be administered and terminology used throughout the guide

Decision: Noted as approved by Chairman's action on 29/07/16

4.3 Medicines Optimisation

- **Carter Hospital Pharmacy Transformation Plan - Assessment & Action Planning Tool.**

The Hospital Pharmacy and Medicines Optimisation Project Transformation Plan which has been compiled in response to the Carter Review published 5th February 2016 was presented.

Action: Any comments relating to this document to be submitted to DR or DL.
Decision: Noted

- **Impact Assessment for Category 1 Drug Policy Changes and new NICE TA**

On the 11th July NHS England set out the results of its annual process for deciding which new treatments and services it will be commissioned for the year ahead

There were 12 new treatments and services in this category which have been confirmed, 5 of which are applicable to the Trust. The impact of these on the Trust was presented.

Decision: Noted

4.4 NICE TA Guidance

a) NICE TA Guidance - July 2016

3 Technology Appraisals have been noted in July 2016

TA398 - Lumacaftor–ivacaftor for treating cystic fibrosis homozygous for the F508del mutation

Recommendations

1.1 Lumacaftor–ivacaftor is not recommended, within its marketing authorisation, for treating cystic fibrosis in people

12 years and older who are homozygous for the F508del mutation in the cystic fibrosis transmembrane conductance regulator (CFTR) gene

1.2 This guidance is not intended to affect the position of patients whose treatment with lumacaftor–ivacaftor was started within the NHS before this guidance was published. Treatment of those patients may continue without change to whatever funding arrangements were in place for them before this guidance was published until they and their NHS clinician consider it appropriate to stop. For children and young people, this decision should be made jointly by the clinician and the child or young person or the child or young person's parents or carers
Action: Nil - Not recommended

TA399 - Azacitidine for treating acute myeloid leukaemia with more than 30% bone marrow blasts

Recommendations
1.1 Azacitidine is not recommended, within its marketing authorisation, for treating acute myeloid leukaemia with more than 30% bone marrow blasts in people of 65 years or older who are not eligible for haematopoietic stem cell transplant

1.2 This guidance is not intended to affect the position of patients whose treatment with azacitidine was started within the NHS before this guidance was published. Treatment of those patients may continue without change to whatever funding arrangements were in place for them before this guidance was published until they and their NHS clinician consider it appropriate to stop
Action: Nil - Not recommended

TA400 - Nivolumab in combination with ipilimumab for treating advanced melanoma

Recommendations
1.1 Nivolumab in combination with ipilimumab is recommended, within its marketing authorisation, as an option for treating advanced (unresectable or metastatic) melanoma in adults, only when the company provides ipilimumab with the discount agreed in the patient access scheme.
Action: Update the formulary to indicate that Nivolumab is now used in line with NICE guidance TA400

b) NICE TA Guidance - August 2016

5 Technology Appraisals have been published in August 2016

- **TA401 - Bosutinib for previously treated chronic myeloid leukaemia**

Recommendations
1.1 Bosutinib is recommended as an option, within its marketing authorisation, for chronic, accelerated and blast phase Philadelphia chromosome positive chronic myeloid leukaemia in adults, when:

- they have previously had 1 or more tyrosine kinase inhibitor and
- imatinib, nilotinib and dasatinib are not appropriate and
- the company provides bosutinib with the discount agreed in the patient access scheme (as revised in 2016).

Action: Update the formulary to indicate that Bosutinib is now used in line with NICE guidance TA401

TA402 - Pemetrexed maintenance treatment for non-squamous non-small-cell lung cancer after pemetrexed and cisplatin

Recommendations
1.1 Pemetrexed is recommended as an option for the maintenance treatment of locally advanced or metastatic non-squamous non-small-cell lung cancer in adults when:

- their disease has not progressed immediately after 4 cycles of pemetrexed and cisplatin induction therapy
- their Eastern Cooperative Oncology Group (ECOG) performance status is 0 or 1 at the start of maintenance treatment and
- the company provides the drug according to the terms of the commercial access agreement as agreed with NHS England.

1.2 When using ECOG performance status, healthcare professionals should take into account any physical, sensory or learning disabilities, or communication difficulties that could affect ECOG performance status and make any adjustments they consider appropriate.

1.3 This guidance is not intended to affect the position of patients whose treatment with pemetrexed was started within the NHS before this guidance was published. Treatment of those patients may continue without change to whatever funding arrangements were in place for them before this guidance was published until they and their NHS clinician consider it appropriate to stop.

Action: Update the formulary to indicate that Premetrexed is now used in line with NICE guidance TA402

TA403 - Ramucirumab for previously treated locally advanced or metastatic non-small-cell lung cancer

Recommendations

1.1 Ramucirumab, in combination with docetaxel, is not recommended within its marketing authorisation for treating locally advanced or metastatic non-small-cell lung cancer in adults whose disease has progressed after platinum-based chemotherapy.

1.2 This guidance is not intended to affect the position of patients whose treatment with ramucirumab was started within the NHS before this guidance was published. Treatment of those patients may continue without change to whatever funding arrangements were in place for them before this guidance was published until they and their NHS clinician consider it appropriate to stop.

Action: Nil - Not recommended

TA404 - Degarelix for treating advanced hormone-dependent prostate cancer

Recommendations

1.1 Degarelix is recommended as an option for treating advanced hormone-dependent prostate cancer in people with spinal metastases, only if the commissioner can achieve at least the same discounted drug cost as that available to the NHS in June 2016.

1.2 This guidance is not intended to affect the position of patients whose treatment with degarelix was started within the NHS before this guidance was published. Treatment of those patients may continue without change to whatever funding arrangements were in place for them before this guidance was published until they and their NHS clinician consider it appropriate to stop.

Action: Add Degarelix to the formulary once signed application form has been received from the Oncology Team. Include the application form for noting in the October meeting.

TA405 - Trifluridine–tipiracil for previously treated metastatic colorectal cancer

1.1 Trifluridine–tipiracil is recommended, within its marketing authorisation, as an option for treating metastatic colorectal cancer, that is:

- in adults who have had previous treatment with available therapies including fluoropyrimidine-, oxaliplatin- or irinotecan-based chemotherapies, anti-vascular endothelial growth factor (VEGF) agents and anti-epidermal growth factor receptor (EGFR) agents, or when these therapies are not suitable, and
- only when the company provides trifluridine–tipiracil with the discount agreed in the patient access scheme.

Action: Nil - Not applicable to CW Trust.

4.5 IVIG Update

- **IVIG requests**

July 2016

CWH Site

There were 10 IVIG issues in July 2016, with 4 new requests:

- One for Immunobullous disease (Blue indication)
- Two for Myasthenia Gravis (Blue indication)
- One for Paraprotein associated demyelinating neuropathy (Red indication)

WMUH Site

There were 14 IVIG issues in July 2016, with 5 new requests:

- Three for ITP (Red indication)
- One for Myasthenia Gravis (Blue indication)
- One for Post-transfusion hyperhaemolysis (Blue indication)

Decision: Approved

August 2016
CWH Site
There were 14 IVIG issues in August 2016, with 7 new requests:

- One for ITP (Red indication)
- Three for Guillain Barre Syndrome (Red indication)
- One for Secondary antibody deficiencies (Blue indication)
- One for Paraprotein associated demyelinating neuropathy (red indication)
- One for Toxic epidermal necrolysis (Red indication)

WMUH Site
There were 19 IVIG issues in August 2016, with 3 new requests:

- Two for Secondary antibody deficiencies (Blue Indication)
- One for Haemophagocytic Syndrome (Blue indication)

Decision: Approved

4.6 Items for noting

- **Quarterly Controlled Drug Directorate Report Q1 2016-17**

Controlled Drug Directorate Report for Q1 2016-17
Decision: Noted

- **Quarterly Controlled Drug Accountable Officer Report Q1 2016-17**

Controlled Drug Accountable Officer Report for Q1 2016-17
Decision: Noted

- **Addition to the NMP register at WMUH**

Addition to the NMP register at WMUH
Decision: Noted

- **NHS Briefing re BCG**

Briefing from NHS England re BCG Vaccine
Decision: Noted

- **MHRA Update - July 2016**

MHRA Update for July 2016
Decision: Noted

4.7 Meeting minutes for noting

- **Clinical Directorate of HIV and GUM, Medicines Sub-Group meeting - June 2016**

Meeting minutes for June 2016
Decision: Noted

- **Clinical Directorate of HIV and GUM, Medicines Sub-Group meeting - July 2016**

Meeting minutes for July 2016
Decision: Noted

- **Local Chemotherapy Group meeting - May 2016**

Meeting minutes for May 2016
Decision: Noted

4.8 Additional papers to go to Trust patient Safety Group

- **Quarterly Controlled Drug Directorate Report Q1 2016-17**
- **Quarterly Controlled Drug Accountable Officer Report Q1 2016-17**

Chelsea and Westminster Hospital NHS Foundation Trust
Trust Medicines Group

Date of next meeting

Next meeting
Date: Monday 10th October 2016
Time: 8am-9am
Location: Board Room (CWH Site) and Meeting Room A (WMUH Site via video conferencing)
Closing date: 16th September 2016