

Chelsea and Westminster Hospital NHS Foundation Trust Medicines Committee
Summary of Main Points from the Meeting held on the 14th of March 2011

2. Minutes and Summary Notes from last meeting

The Minutes and Summary notes were approved and would be circulated.

3. Matters Arising

- **Strategy for reduction in PPI prescribing**

- *Develop a prompt on the electronic prescribing system to prompt review of PPI indication and duration at point of prescribing.*

The EPR team had put together a mock-up of a prompt at the visual table selection point of the prescribing process which was reviewed by the Medicine Directorate. The strong view of the Medicine Directorate was that the benefit of the alert would be outweighed by the alert fatigue (i.e. having to go through an additional step at the point of prescribing) so the recommendation was not to implement the alert.

- **TA212 – Bevacizumab for the treatment of metastatic colorectal cancer**

This requires a formulary application from Prof. M. Bower.

4. New Medicines Applications

- **Gadolinium Injection - Decision: Approved. In-tariff Medicine**

The committee reconsidered the application for gadolinium injection (Magnevist®) in light of the response to the questions on safety posed at the February meeting and agreed that using a licensed preparation of gadolinium in MRI was preferable to the current practice of mixing an unlicensed solution.

- **Duloxetine 30mg & 60mg capsules (Cymbalta®) - Decision: Approved. In-tariff Medicine**

The committee approved duloxetine (Cymbalta®) for addition to the Formulary to treat diabetic neuropathy (NICE recommends first line) and as an alternative agent to amitriptyline, gabapentin and pregabalin for treatment of fibromyalgia. As an SSRI, duloxetine has the advantage of mood enhancement. It is also more cost effective than pregabalin. Based on the NICE recommendation and the favorable cost profile, the committee approved duloxetine (Cymbalta®) for addition to the Formulary.

- **Ibuprofen injection for closure of Patent Ductus Arteriosus (PDA) - Decision: Approved. In-tariff Medicine**

The committee approved the request to add ibuprofen to the Formulary for ibuprofen for closure of PDA. It would replace indometacin (unlicensed agent) which is in short supply and has a worse side effect profile. There is a cost difference of £8,000 per year; although ibuprofen has already been used for a period of time

- **Nuvaring Vaginal Ring - Decision: Approved for restricted use. In-tariff Medicine**

The request to add Nuvaring vaginal ring to the Formulary (as an alternative to the oral contraceptive pill) was approved in the following circumstances:

1. Women requesting Nuvaring as a method of contraception. *(Approved - only if other more cost effective methods had been discussed fully with the woman)*
2. Women requesting continuation of supply of Nuvaring. *(Approved)*
3. Women who are unable to comply with the rules for taking the combined pill (i.e. taking pills daily). *(Approved)*

- **Certolizumab 200mg injection - Decision: Approved for restricted use. Tariff-excluded Medicine. Individual Funding Request Form (IFR) required until a 'Short- Form' was available.**

The committee approved the request for certolizumab to treat rheumatoid arthritis in line with NICE Guidance.

- **Rupatadine 10mg tablets**

Decision: Approved for restricted use. In-tariff Medicine

The committee approved rupatadine to treat idiopathic urticaria resistant to cetirizine and hydroxyzine.

5. Medicines Policy - Progress with Recommendations for Actions from the Trust Medicines Policy Audit 2010

The committee noted the action plan was complete with the exception of changes to standards for the 2011 audit, these would be confirmed with the committee prior to the 2011 audit.

6. Ex-panel request Glutamine Granules

The committee considered the request to add glutamine granules to the formulary as an ex-panel request and agreed that it was inappropriate to add as it was a nutritional supplement outside the scope of the committee.

7. February 2010 Trusts Progress – Specific Medicines Related CQUIN targets

Chelsea and Westminster Hospital NHS Foundation Trust Medicines Committee

The committee noted the reports on Trust progress with specific medicines related CQUIN targets.

• Medicines Reconciliation at admission – February 2011

The trust achieved the stretch objectives in Q2 (74% in September 2010) and in Q3 (73% December 2010) with a value of £180,000. The results of internal monthly monitoring for February 2011 were 76% which means that the CQUIN is likely to achieve the stretch target for Q4.

• Indication and duration on discharge prescriptions for antibiotics and hospital initiated PPIs.

In February 2011, the Trust achieved the stretch target for hospital initiated PPIs (100%) and for antibiotic indication (98%) and duration. Despite the drop in performance in January 2011, it is likely the antibiotic CQUIN will meet the stretch target of 95% for Quarter 4. If PPI performance stays at 100% in March 2011, achievement of the 95% stretch target is possible.

8. NPSA Alerts –Completed Action Plans

• Patient Safety Alert NPSA 2009/PSA005 - Safer lithium therapy assurance document

- The Medicines Committee considered the assurance document relating to the NPSA Alert – Safer Lithium Therapy. However, recent incidents within the Trust had shown there was an issue with reliability of communication of results between laboratories and prescribers. The Committee was not sufficiently assured of the controls in place to pick up an out of range lithium result, as this relied on the requestor remembering to follow up and check the result. The Medicines Committee would not be assured until further actions had been taken to improve reliability of the communication process. The committee asked for these concerns to be raised via the Quality Committee at the April 2011 meeting.

9. NICE Guidance

The committee noted the above NICE Guidance, applicable to C&W, which would require a formulary application from Dr Cathryn Brock.

- TA 215 - Pazopanib for the first line treatment of advanced renal-cell carcinoma

10. IVIG Update

The Committee approved the IVIG requests for February 2011.

11. Items for Noting

The following items were noted by the Committee:

- Antibiotic Steering Group Minutes
- Local Chemotherapy Group Minutes
- PGD Tracker Update
- Trust Quarterly Controlled Drug Report - Quarter 3
- Trust Quarterly Controlled Drug Occurrence Report - Quarter 3
- Request for extension of PGD by a further 2 months – Nurse supply of Emergency Hormonal Contraception – approved to 30/05/2011

12. Papers to go to the Trust Executive Clinical Governance Committee

The following papers should be sent to the Trust Quality Committee:

- Medicines Committee Summary Notes February 2011
- Lithium Assurance Document
- Trust Quarterly Controlled Drug Report - Quarter 3
- Trust Quarterly Controlled Drug Occurrence Report - Quarter 3

Date of the next meeting

11th April 2011, 08: to 0900, Boardroom

Closing Date for Papers : 25th of March 0211