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

2. Minutes and Summary Notes from last meeting

The Minutes and Summary notes were approved with a minor amendment and will be circulated.

3. Matters Arising

The committee noted the matters arising from the previous meeting.

4. New Medicines Applications

Formulary Applications

• Ranibizumab for Diabetic Macular Oedema

Decision: deferred until the NICE decision following the Final Appraisal determination appeal meeting in October.

• Boceprevir and Telaprevir for chronic hepatitis C genotype 1 infection

Decision: Approved. Tariff Excluded Medicine. Individual Funding Request regardless of HIV status, subject to NICE guidance (June 2012)

Pegylated interferon and ribavirin will remain first line therapy for the treatment of genotype 1 HCV. The total cost impact for 10-15 patients per year is estimated to be £200,000 to £300,000.

Collagenase

Decision: Approved. Tariff Included Medicine.

Collagenase is indicated for the treatment of Dupuytren's contracture in adult patients with a palpable cord causing contracture. There will be an estimated 20 patients per year at an estimated cost of £31,000 per year. The committee also recommended this should also be referred to the New Procedures Committee for noting.

Retigabine in line with NICE TA 231

Decision: Approved. Tariff Included Medicine.

Retigabine is indicated as an adjunctive treatment of partial onset seizures with or without secondary generalisation in adults with epilepsy. Retigabine will be used as a last-line in therapy when other alternatives have failed and for a limited number of patients; estimated less than 5 patients per year. Once a patient is stabilised, Retigabine can be continued by GPs.

Ulipristal acetate (Ellaone[®])

Decision: Approved in GUM. Tariff Included Medicine. Awaiting roll-out in A&E.

Ulipristal acetate is intended for 2nd line emergency contraception use in women reporting unprotected sex between 72 and 120 hours or contraceptive failure. Ulipristal will be prescribed by clinicians and non-medical prescribers. There is potential to have a patient group direction for Ulipristal.

Ex-Panel Requests

• Apraclonidine 0.5% Eye Drops

Decision: Approved. In-tariff Medicine.

• FlexTouch pen for Novorapid insulin

Decision: Approved. In-tariff Medicine.

Replens MD and Hyalofemme (vaginal moisturisers)

Decision: Approved. In-tariff Medicine.

5. Medicines Management / Medicines Policy

Appendix - Procedure for In-patient Self-Administration of Medicines

The above procedure has been updated with a minor amendment to reflect changes to locked storage requirements. The committee approved the procedure for in-patient self-administration of medicines.

Injectables Audit 2011

An injectables audit was carried out in July 2011 to determine compliance with the Trust Medicines Policy. The committee reviewed the standards and results. The results showed that compliance was poor with many of the standards. Recommendations for action have been discussed with and agreed by the Director of Nursing, who has highlighted the results to Matrons who will cascade the importance of adherence to the Trust Policy for the preparation and administration of injectable medicines to nursing staff. A re-audit in November 2011 will include medical staff. The committee approved the recommendations of the audit.

• NPSA Action Plan: NPSA /2010/RRR018 - Preventing fatalities from medication loading doses

Chelsea and Westminster Hospital NHS Foundation Trust Trust Medicines Committee

The committee noted the NPSA action plan and approved the Medicines Policy update to Section 10 – Discharge Medicines – relating to provision of information about loading doses given during admission to GPs where the medication is intended to be continued in the community.

Statin and ACEI vs ARB Audit October 2011

The NWL contract 2011-12 requires each provider to increase the proportion of low cost prescribing for: statins, ACE inhibitors and ARBs in line with the locally agreed improvement trajectory. The committee reviewed the audit of statin, ACEI and ARB prescribing (excl. HIV patients). 2 patients were newly initiated on a high-cost statin and 68% of patients were prescribed a low cost statin. 7 patients were prescribed ACEI and 8 patients were prescribed ARB, of which 2 patients were newly initiated on ARB. The committee agreed it would be difficult to set an improvement trajectory based on the small numbers of patients who were newly initiated in hospital. The committee considered the options of reviewing all newly initiated ARB and high cost statin prescriptions, however it would be very time consuming to measure on an ongoing basis. DL and MF would discuss outside the meeting and bring back a proposal in December.

6. NICE Guidance October 2011

• TA 235 - Osteosarcoma - Mifamurtide

The above TA is not applicable to C&W.

• TA 236 - Acute Coronary Syndrome - Ticagrelor

Ticagrelor requires Formulary application from the cardiologists.

7. IVIG Update October 2011

There were 13 IVIG issues in October 2011, with 5 new requests.

- One was for autoimmune haemolytic anaemia (blue indication)
- One was for myasthenia gravis (blue indication)
- One was for idiopathic thrombocytopenic purpura adult (red indication)
- One was for staphylococcal toxic shock syndrome (blue indication)
- One was for toxic epidermal necrolysis, Steven's Johnson syndrome (red indication)

. 8. Items for Noting

The following items were noted by the Committee:

Shared Care Documents

- Prescribing of Hydroxycarbamide for Myeloproliferative Disorders
- Growth hormone (for Adults)
- Octreotide (for Adults with acromegaly)

Other Items

- Medicines Committee dates 2012
- Controlled Drug Quarter 2 Accountable Officer's Report
- Controlled Drug Quarter 2 Occurrence Report
- HIV Drugs Sub-committee Minutes September 2011 List
- Trust Non-medical Prescribers List Updated
- Extension to PGD 2006 HIV/GUM PGD for the administration of hepatitis A and hepatitis B vaccination in GUM Out-reach clinics to 15/12/2011
- Updated Terms of Reference for the Local Chemotherapy Group
- Minutes of the Local Chemotherapy Group August 2011

9. Papers to go to the Trust Quality Committee

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

- Medicines Committee Summary Notes October 2011
- Injectables Audit 2011

10. Date of the next meeting

Monday 12th of December 2011, 8.00 – 9.00am (Beta cell Seminar Room. Closing date for papers: Friday 25th of November 2011