Chelsea and Westminster Healthcare Trust Medicines Committee
Summary of Main Points from the Meeting held on the 12th of September 2011

2. Minutes and Summary Notes from last meeting

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

3. Matters Arising

The committee noted the matters arising from the previous meeting.

4. New Medicines Applications

Formulary Applications

- **Regadenoson**

Decision: Approved. In-tariff Medicine. Regadenoson is a selective coronary vasodilator licensed for radionuclide myocardial perfusion imaging in adult patients unable to undergo adequate exercise stress. Regadenoson is expected to be used for 600patients/year. Regadenoson is £5.22 more expensive than Adenosine, however there will be reduction of components required to conduct the stress test (no need for infusion line set-up at a cost of £4.91 per patient). The PGD for Adenosine will be reviewed and updated. Training will be conducted at the Royal Brompton hospital.

- **Memantine in line with NICE Guidance TA 217**

Decision: Approved pending shared care guidance. In-tariff Medicine. Memantine is recommended as an option for managing Alzheimer's disease for people with:

  - moderate Alzheimer's disease who are intolerant of or have a contraindication to AChE inhibitors or
  - severe Alzheimer's disease

Memantine is estimated to be used on 20patients/year at a cost of £449/year/patient. There is intention to include Memantine in the shared care guidance (developed by CNWL) allowing subsequent prescriptions to be supplied by the GP (to be clarified in the shared care guidance).

Ex-Panel Requests – Additions

- High strength darbepoetin (500mcg and 150mcg) pre-filled syringes
- Tropicamide 0.5% preservative free Minims
- Diltiazem 2% Cream (anal fissure)
  Diltiazem gel is currently on Formulary. The cream preparation would generate a cost saving of approximately £1000/year.
- Irbesartan 300mg tablets
- Updated Formulary approval for azacitidine in line with NICE Guidance TA 218 - myelodysplastic syndrome**s**
  Azacitidine is currently on Formulary and status will be updated in line with NICE guidance. Azacitidine requires individual funding request application.

Ex-Panel Requests – Removals

- **Dronedarone**

Decision: Removed from Formulary. Dronedarone is associated with side effects and extensive monitoring; therefore the Cardiologists have requested the drug to be removed from the Formulary. Patients from the Royal Brompton hospital that have been initiated on Dronedarone will continue therapy at C&W.

- **Niaspan® (prolonged release nicotinic acid)**

Decision: Removed from Formulary. The manufacturers of Niaspan have withdrawn the drug for commercial reasons. Tredaptive® may be considered as a suitable alternative.

5. Medicines management

- **Updated Medicines Management Annual Report 2010-2011**

The committee approved the updated Medicines Management Annual Report 2010-2011, which will be circulated to the Quality committee (October meeting) for noting.

- **Medicines Policy Audit 2011**

Overall, the results show that there was good compliance with most aspects of the Medicines Policy. Of the 20 standards audited, 85% (n=17) scored 80% or greater compliance. Where scores were calculated using electronic charts only, a total of 13 out of 15 prescribing standards scored 100% and the remaining 2 scored 99%. The committee approved the recommendations from the Medicines Policy Audit 2011.

- **Injectables Audit 2011**

Deferred until the October meeting.

- **Appendix to the Medicines Policy – Self-medication**

The committee approved the changes to Section 5 – Storage of medicines (page 5). Emollient creams and ointments do not require secure storage. Inhaler devices may be kept with the patient, under their direct supervision and out of sight of other patients, instead of being locked in the bedside locker. If a patient is away from their bedside, these medicines must be locked away.

- **Medicines reconciliation Audit June 2011**

Overall, the percentage of fully reconciled medication histories was 71% at June 2011 compared to 79% in March 2011 (stretch CQUIN target for 2010-11 was 70%). This is no longer a CQUIN initiative for 2011-12 but will continue to be monitored 6monthly. The committee noted the Medicines reconciliation Audit June 2011.

6. NICE Guidance-July and August 2011

- **TA231: Depression - agomelatine (terminated appraisal)**

Agomelatine is not recommended for treatment. No further action required.

- **TA232: Epilepsy (partial) - retigabine (adjuvant)**

Retigabine requires a Formulary application. DL to contact the Neurology team.

- **TA229: Macular oedema (retinal vein occlusion) - dexamethasone**

Dexamethasone requires a Formulary application by Dr Davies.

- **TA228: Multiple myeloma (first line) - bortezomib and thalidomide**

Bortezomib and thalidomide are already in the Formulary. Formulary status will be updated in line with NICE guidance. The committee approved the Formulary update for bortezomib and thalidomide. An individual funding request application needs to be completed if either drug is required.

- **TA230: Myocardial infarction (persistent ST-segment elevation) – bivalirudin**

The above guidance is not relevant to C&W.

- **TA233: Ankylosing spondylitis – golimumab**

Golimumab requires a Formulary application from Dr. Alex Brand.

- **TA234: Rheumatoid arthritis - abatacept (2nd line)**

Abatacept is already in the Formulary. Formulary status will be updated in line with NICE guidance. The committee approved the Formulary update for abatacept.

7. IVIG Update May 2011

There were 12 IVIG issues in July 2011, with 2 new requests:

- One was for Idiopathic thrombocytopenic purpura (red-selected) indication.
- One was for Kawasaki disease (red) indication.

There were 11 IVIG issues in August 2011, with no new IVIG requests. The committee noted the temporary shortage of Vigam® IV immunoglobulin (main brand stocked at C&W). Vigam® stock will be conserved for established long term patients of Dr Kennedy and Dr Kinali. All other patients who are initiated on an intravenous immunoglobulin must be supplied with Kiovig®.

8. Items for Noting

The following items were noted by the Committee:

- Trust Quarterly Controlled Drug Report – Quarter 1 2011-2012
- Trust Controlled Drug Occurrence report – Quarter 1 2011-2012
- Updated PGD Tracker
- Review of treatment of other conditions causing visual impairment due to diabetic macular oedema
- Trust Adult Parenteral Nutrition Guidelines

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

The following papers should be sent to the Trust Executive Team – Clinical Governance Meeting:

- Medicines Committee Summary Notes July 2011
- Medicines Management Annual Report 2010-2011
- Medicines Policy Audit 2011
- Trust Quarterly Controlled Drug Report – Quarter 1 2011-2012 & Occurrence Report – Quarter 1 2011-2012

10. Date of the next meeting

Monday 10th of October 2011 8.00 – 9.00am (Boardroom) Closing date: Friday 23rd of September 2011