Chelsea and Westminster Hospital NHS Foundation Trust
Trust Medicines Group

Summary of Main Points from the Meeting held on Monday 26th June 2017

2. Minutes and Summary Notes from last meeting

The Minutes and Summary notes from the May 2017 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

4.1 Formulary Applications

Full applications

- **Sodium chloride 5% Eye Ointment**

Requested by the Ophthalmology Team for the 1st line management of Recurrent Erosion Syndrome.
Decision: Approved for addition to the formulary

- **Sodium Hyaluronate 0.4% (Clinitas Multi®) Eye Drops**

Requested by the Ophthalmology Team for the relief from the sensations of dry eye such as grittiness, burning or foreign body sensation. This will replace Sodium Hyaluronate 0.2% drops. This is currently not available on the North West Integrated Formulary and will require a submission. If this is prescribed in the meantime all ongoing prescribing will need to be undertaken by secondary care.
Decision: Approved for addition to the formulary

- **Tafluprost 15micrograms/ml & Timolol 5mg/ml (Preservative Free) (Taptiqom®) Eye drops**

Requested by the Ophthalmology Team for the management of raised intra-ocular pressure in open-angle glaucoma and ocular hypertension when beta-blocker or prostaglandin analogue alone is not adequate. It was requested that Taptiqom replace Ganfort (Bimatoprost & Timolol) (Preservative free) eye drops. This is currently not available on the North West Integrated Formulary and will require a submission. Further discussion was had regarding the need for 4 agents (Xalacom; Ganfort and Duotrav) from the same class to be included on the Hospital and NWL Integrated Formularies. It was also discussed how Tapiqom is more superior to Ganfort as it causes less side effects and costs less and is therefore more cost effective. This was not however reflected in the application. It was suggested that the application could be strengthened by making a case for Taptiqom replacing all formulations of Ganfort. It was also unclear which agent to use 1st line, 2nd line and 3rd line where a preservative is required or is not required.
Decision: Application to be resubmitted

Ex-Panel Requests

- **Naproxen 250mg Effervescent Tablets**

Requested as a high potency soluble NSAID. Diclofenac prescribing is on the decline and this is the only NSAID currently available on the formulary in a soluble tablet formulation.
Decision: Approved for addition to the formulary

- **Cetraben Lotion**

Requested by the Dermatology Team. Cetraben cream is often voted best emollient in patient/parent feedback however, many patients do find it too thick and oily for the face.
Cetraben lotion has been developed to retain the glycerol content (3%) but reduce the paraffin content (9% vs 23.7%) and remains SLS and paraffin free. It is the ideal emollient for Roaccutane induced facial dryness in acne patients as well as for patients with facial eczema.
Decision: Approved for addition to the formulary

NICE TA Approved Requests

- **Daclizumab 150mg Injection (Zinbryta®) - In line with NICE TA441**

For use in line with NICE TA441 (Daclizumab for treating relapsing–remitting multiple sclerosis)

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Decision: Noted (Approved for addition to the formulary in May)

- **Ixekizumab 80mg Injection (Taltz®) - In line with NICE TA442**

For use in line with NICE TA442 (Ixekizumab for treating moderate to severe plaque psoriasis)
Decision: Approved for addition to the formulary

Pharmacoeconomic Board Requests

- **Infliximab for Severe Relapsing Polychondritis**

Requested by Rheumatology Team
Approved by the Pharmacoeconomic Board on 9th May 2017
Decision: Noted

- **Eltrombopag for Pancytopenia**

Requested by Haemotology Team
Approved by the Pharmacoeconomic Board on 10th May 2017.
Decision: Noted

- **Bortezomib and Thalidomide for Stage IVB Plasmablastic HIV associated Lymphoma**

Requested by Oncology Team
Approved by the Pharmacoeconomic Board on 11th May 2017.
Decision: Noted

- **Infliximab for Scleritis**

Requested by Ophthalmology Team
Approved by the Pharmacoeconomic Board on 22nd May 2017.
Decision: Noted

- **IVIG for Burkett's Lymphoma**

Requested by Oncology Team
Approved by the Pharmacoeconomic Board on 9th June 2017
Decision: Noted

4.2 Trust Medicines Policy

- **TMP Section: 30. Supply of Discharge Medicine Packs by Nurses/Midwives on Wards/Departments**

Updated to include the addition of Paediatric Short Stay Unit
Decision: Approved

- **Trust Medicines Audit 2017 - Standards**

Standards for the Trust Medicines Policy Audit 2017. Audit to be conducted cross site in July/August.
Decision: Approved

4.3 Medicines Optimisation

- **Choosing Wisely initiative**

NWL CCGs are engaging with health professionals and the public about three proposals to save money. Feedback is being requested by 30th June 2017.

The three initiatives are:

- **To reduce waste, GPs will ask patient to order their own repeat prescriptions**
- **GPs will ask patients if they are willing to buy certain medicines or products that can be bought without a prescription**
- **GPs will not routinely prescribe certain medicines that can be bought without a prescription**

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Divisional Medical Directors have been asked to provide feedback and comments via the Trust Medicines Group.
Decision: Noted

- **Tariff (PbR Excluded Drugs) 2017-18 and PbRex List for 2017-18**

Updated Guidance on the Management of Medicines Excluded from the National Tariff (PbR Excluded drugs) for 2017-18 including the list of PbR excluded drugs for 2017-18.
Decision: Noted

- **Expansion of the National Standardised Dose Banding of Intravenous Systemic Anti-Cancer Therapy**

Letter to NHS England to state that the Trust is in full support of the expansion of the national dose banding initiative of Intravenous Systemic Anti-Cancer Therapy NHSE CQUIN. The initiative has been expanded to include a further 31 drugs.
Decision: Noted

- **Quarterly Q4 2016/17 Controlled Drug Summary Report**

Quarterly Controlled Drug Summary Report for Q4 2016-17
Decision: Noted

- **Quarterly Q4 2016/17 Controlled Drugs Accountable Officer Report**

Quarterly Controlled Drug Accountable Officer Report for Q4 2016-17
Decision: Noted

4.4 NICE TA Guidance
NICE TA Guidance - May 2017

3 Appraisals were published in May 2017

TA444 - Afatinib for treating advanced squamous non-small-cell lung cancer after platinum-based chemotherapy (terminated appraisal)
Action: Nil - Terminate Appraisal

TA445 - Certolizumab pegol and secukinumab for treating active psoriatic arthritis after inadequate response to DMARDs
Action: Update formulary accordingly

TA446 - Brentuximab vedotin for treating CD30-positive Hodgkin lymphoma
Action: Update formulary accordingly

4.5 IVIG Update

- **IVIG requests**

May 2017
CWH Site
There were 18 IVIG issues, with 6 new requests

WMUH Site
There were 16 IVIG issues, with 1 new request
Decision: Approved

4.6 Items for noting

- **MHRA Update - May 2017**

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Action: Re. Finasteride - Rare reports of depression and suicidal thoughts. Urology Teams at both sites to be informed
Decision: Noted

4.7 Meeting minutes for noting
Antimicrobial Steering Group Meeting minutes - May 2017

4.8 Additional papers to go to Trust patient Safety Group
- Quarterly Q2 Controlled Drug Summary Report
- Quarterly Q2 Controlled Drugs Accountable Officer Report

5. Any other business
Nil

6. Date of next meeting
Date: Monday 24th July 2017
Time: 8am-9am
Location: Board Room (CWH Site) and Meeting Room A (WMUH Site via video conferencing)
Closing date: 30th June 2017