



**Chelsea and Westminster Hospital NHS Foundation Trust
Trust Medicines Group**

Summary of Main Points from the Meeting held on Monday 11th September 2017

2. Minutes and Summary Notes from last meeting

The Minutes and Summary notes from the July 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

• **Prismocitrate 18/0 and Prism0cal B22 Dialysis Solutions**

Requested by Intensive Care Unit as 1st line anticoagulant for Continuous Renal Replacement Therapy. There is a potential estimated cost saving of £41k (CWH) and £65K (WMUH) due to extension of dialysis filter life by citrate anticoagulation.

Prismocitrate 18/0 and Prism0cal B22 Dialysis Solutions will replace the current use of intravenous Heparin and Epoprostenol. As Prismocitrate 18/0 and Prism0cal B22 Dialysis Solutions work regionally by anticoagulating the filter as opposed to the patient, their use is associated with less bleeding complications

Decision: Approved for addition to the formulary

• **Anidulafungin IV 100mg (Ecalta[®]) (Pfizer)**

Requested by Microbiology supported by Trust Antimicrobial Group as the first line anti-fungal (Echinocandin) agent for empiric treatment of invasive Candida infection replacing Caspofungin.

The contracts team have highlighted the imminent supply failure of the Trust 1st line echinocandin (Caspofungin). Due to problems with generic manufacturing, national supply has dropped significantly and is not expected to meet demand over the next two years. In addition, the NHS England cost savings expected have been negated by a vast price hike secondary to the shortage. In response, the Antimicrobial Group propose the Trust switch to an equivalent echinocandin, anidulafungin, as 1st line in adults. This drug has previously been on the formulary at WMUH pre-integration and therefore there is good previous experience and familiarity with its prescribing.

Voriconazole IV or Ambisome IV will continue to be the recommend 1st line therapy for invasive fungal infection with suspected / possible invasive aspergillosis infection due to superior mould coverage. In addition, Micafungin IV will remain the 1st line echinocandin in the neonatal and infant population for proven or presumed Candidaemia empiric treatment due to its superior evidence and robust dosing information in this population.

Anidulafungin IV was approved for addition to the formulary by Chair's action on 1st August.

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. At the June meeting it was requested that Taptiqom replace Ganfort (Bimatoprost & Timolol) (Preservative free) eye drops. At the time Taptiqom was not available on the North West Integrated Formulary and would require a submission. At the June meeting, 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 Taptiqom is more superior to Ganfort as from experience of use, it causes less side effects and costs less and is therefore more cost effective. It was suggested that the application is strengthened by making it clearer regarding the place in therapy for Taptiqom[®] as it was also unclear which agent is being proposed for use 1st line 2nd line or 3rd line where a preservative is required or is not required. A revised application was requested for review at a subsequent meeting.



Chelsea and Westminster Hospital NHS Foundation Trust Trust Medicines Group

A revised application form has since been received which includes the intended place in therapy of Taptiqom if it is added to the Trust formulary. In addition, Taptiqom eye drops were approved for inclusion in the NWLIF on 3rd August 2017.

Decision: Approved for addition to the formulary in place of Ganfort (Preservative free) drops

Ex-Panel

- **Dimethyl fumarate 30mg and 120mg Tablets (Skilarence®)**

Requested by the Dermatology Team. Dimethyl fumarate is a fumaric acid ester licensed for the treatment of moderate to severe chronic plaque psoriasis in adults in need of systemic medicinal therapy. It is a licensed product in the UK.

The Dermatology Department is currently prescribing Fumaderm®. Dimethyl fumarate is the active component of Fumaderm®. In the UK, Fumaderm® is an unlicensed medicine but is used in the treatment of patients with moderate-to-severe psoriasis.

Currently there are 5-10 patients requiring Fumaderm® regularly across the Trust.

Currently listed on the CWH Formulary as Fumaric Acid Esters.

Skilarence® has comparable efficacy to Fumaderm

The proposal is to switch to using the licensed product which costs marginally less than the unlicensed product.

Cost comparison:

Unlicensed product:

Fumaderm® 30mg tablets (40) = £94 (Exc. VAT)

Fumaderm® 120mg tablets (70) = £181 (Exc. VAT)

Licensed product:

Skilarence® 30mg tablets (42) = £89.04 (Exc. VAT)

Skilarence® 120mg tablets (90) = £190.80 (Exc. VAT)

Skilarence® 120mg tablets (180) = £381.60 (Exc. VAT)

Decision: Approved for addition to the formulary in place of Fumaderm

a) Feedback from NWLIF meeting

Feedback was provided of the changes to the NWLIF that have been made following the meeting held on 3rd August 2017

4.2 Trust Medicines Policy

- **Trust Medicines Audit 2017**

Audit report Trust Medicines Policy Audit 2017. At CWH 90% (19) of 21 standards scored compliance of 90% or better with the remaining 2 standards scoring < 80%.

At WMUH, where most prescribing is on paper, 90% (19) of standards scored 80% or better with better, with 2 standards scoring < 80%.

At CWH, out of 20 standards where performance could be compared to 2015, 6 (30%) standards showed improvement, 11 (55%) standards remained the same and 3 (15%) standards showed a negative variance.

0% adherence at CWH and 50% at WMUH to the requirement for the target INR for warfarin to be recorded on the paper or electronic charts.

39% compliance at CWH to the standard requiring missed administration to be documented with the Trust reason codes. This correlated with the results of another missed dose audit.

45% adherence at WMUH to the requirement for double signing of documentation of CDs destroyed on the ward.

An action plan has been drafted to manage areas of non-compliance.

Decision: Noted



Chelsea and Westminster Hospital NHS Foundation Trust
Trust Medicines Group

- **TMP: Section 17 - Injectable Medicines Policy**

Harmonised policy

Decision: Approved

- **TMP: Section 4 - Safe storage of medicines**

Updated to remove reference to GTN spray and sub-lingual tablets being kept with the patient instead of being locked in the bedside locker following a clinical incident.

Decision: Approved

- **Trust IV Guide: Anidulafungin IV**

New monograph for inclusion in the Trust IV Guide for Anidulafungin IV

It was also noted that the Trust IV Administration Guide has at the same time been updated to include the WMUH 'Who may give' areas so that the document is now relevant to both acute sites and links in with the Injectables policy

Decision: Approved

4.3 Medicines Optimisation

- **Feedback from CQC Mock inspections**

Report following CQC mock inspection undertaken 4th and 8th August 2017

Decision: Noted

- **SNMQR Medicines storage audit and action plan**

Reports following medicines storage audit undertaken on 18th August and action plan

Decision: Noted

4.4 NICE TA Guidance

NICE TA Guidance - July and August 2017

6 Appraisals were published in July 2017

TA457 - Carfilzomib for previously treated multiple myeloma

Formulary status: Currently not included on formulary - Haematology Team to complete a formulary application form

TA458 - Trastuzumab emtansine for treating HER2-positive advanced breast cancer after trastuzumab and a taxane

Formulary status: Current included on formulary

TA459 - Collagenase clostridium histolyticum for treating Dupuytren's contracture

Formulary status: Currently included on formulary

TA460 - Adalimumab and dexamethasone for treating non-infectious uveitis

Formulary status: Currently included on formulary, however the Ophthalmology Team will be asked to complete an application form as this is a new indication for Adalimumab

TA461 - Roflumilast for treating chronic obstructive pulmonary disease

Formulary status: Currently not included on formulary - Respiratory Team to complete a formulary application form

TA462 - Nivolumab for treating relapsed or refractory classical Hodgkin lymphoma



**Chelsea and Westminster Hospital NHS Foundation Trust
Trust Medicines Group**

Formulary status: Currently included on formulary

11 Appraisals published in August 2017

TA463 - Cabozantinib for previously treated advanced renal cell carcinoma

Formulary status: Currently not included on formulary - Oncology Team to complete a formulary application form

TA464 - Bisphosphonates for treating osteoporosis

Formulary status: Current included on formulary

TA465 - Olaratumab in combination with doxorubicin for treating advanced soft tissue sarcoma

Formulary status: Not relevant to C&W

TA466 - Baricitinib for moderate to severe rheumatoid arthritis

Formulary status: Currently not included on formulary - Rheumatology Team to complete a formulary application form

TA467 - Holoclar for treating limbal stem cell deficiency after eye burns

Formulary status: Currently not included on formulary - Awaiting confirmation if relevant to C&W

TA468 - Methylnaltrexone bromide for treating opioid-induced constipation

Terminated appraisal

TA469 - Idelalisib with ofatumumab for treating chronic lymphocytic leukaemia

Terminated appraisal

TA470 - Ofatumumab with chemotherapy for treating chronic lymphocytic leukaemia

Terminated appraisal

TA471 - Eluxadoline for treating irritable bowel syndrome with diarrhoea

Formulary status: Currently not included on formulary - Gastroenterology Team to complete a formulary application form

TA472 - Obinutuzumab with bendamustine for treating follicular lymphoma refractory to rituximab

Formulary status: Currently not included on formulary - Oncology Team to complete a formulary application form

TA473 - Cetuximab for treating recurrent or metastatic squamous cell cancer of the head and neck

Formulary status: Current included on formulary

4.5 IVIG Update

- **IVIG requests**

July 2017

CWH Site

There were 19 IVIG issues in July 2017, with 10 new requests



**Chelsea and Westminster Hospital NHS Foundation Trust
Trust Medicines Group**

August 2017

CWH Site

There were 13 IVIG issues in August 2017, with 4 new requests

July 2017

WMUH Site

There were 16 IVIG issues in June 2017, with 2 new requests

August 2017

WMUH Site

There were 17 IVIG issues in June 2017, with 6 new requests:

Decision: Approved

4.6 Items for noting

- **Quarterly Q1 2017/18 Controlled Drug Summary Report**

Quarterly Q1 2017/18 Controlled Drug Summary Report

Decision: Noted

- **Quarterly Q1 2017/18 Controlled Drugs Accountable Officer Report**

Quarterly Q1 2017/18 Controlled Drugs Accountable Officer Report

Decision: Noted

- **NHS England: Etelcalcetide for treating secondary hyperparathyroidism**

Letter regarding commissioning of Etelcalcetide by NHS England

Decision: Noted

- **Audit: Use of vinca alkaloid minibags - A re-audit of current practice against the NPSA Rapid Response Report NPSA/2008/RRR04**

Audit report

Decision: Noted

- **Audit: Adherence of Prescribing within Knee and Hip Replacement Patients with the Chelsea and Westminster Hospital's Enhanced Recovery Hip and Knee Replacement Pathway Policy**

Audit report

Decision: Noted

- **Audit: Audit of adherence to and the knowledge of the Trust hypoglycaemia treatment algorithm and documentation of hypoglycaemia episodes on selected adult wards on Chelsea and Westminster Site**

Audit report

- **MHRA Drug Safety Update - July 2017**

MHRA drug Safety Update for July 2017

Noted: Bendamustine - Increased mortality observed in recent clinical studies in off-label use. Monitor for opportunistic infections, Hepatitis B reactivation

Action: Ask relevant lead pharmacist to feedback to Oncology team. Hepatitis B screen to be included in clinical check prior to release from Technical Services.

Decision: Noted

- **MHRA Drug Safety Update - August 2017**

MHRA drug Safety Update for August 2017

Noted: Ibrutinib: Reports of ventricular tachyarrhythmia; risk of Hepatitis B reactivation and of opportunistic infection.

Action: Ask relevant lead pharmacist to feedback to Haematology team. Hepatitis B screen to be included in clinical check prior to release from Technical Services.

Decision: Noted



**Chelsea and Westminster Hospital NHS Foundation Trust
Trust Medicines Group**

4.7 Meeting minutes for noting

- **Trust Medicines Safety Group Meeting - April 2017**

Minutes for Trust Medicines Safety Group Meeting - April 2017

Decision: Noted

- **Trust Medicines Safety Group Meeting - May 2017**

Minutes for Trust Medicines Safety Group Meeting - May 2017

Decision: Noted

- **Trust Medicines Safety Group Meeting - June 2017**

Minutes for Trust Medicines Safety Group Meeting - June 2017

Decision: Noted

- **Antimicrobial Steering Group Meeting Minutes - May 2017**

Minutes for Antimicrobial Steering Group Meeting - May 2017

Decision: Noted

- **Antimicrobial Steering Group Meeting - July 2017**

Minutes for Antimicrobial Steering Group Meeting - July 2017

Decision: Noted

- **HIV/GUM Directorate Medicines Sub-Group Meeting - July 2017**

Minutes for HIV/GUM Directorate Medicines Sub-Group Meeting - July 2017

Decision: Noted

- **Local Chemotherapy Group Meeting - May 2017**

Minutes for Local Chemotherapy Group Meeting - May 2017

Decision: Noted

4.8 Additional papers to go to Trust patient Safety Group

- **Quarterly Q1 2017/18 Controlled Drug Summary Report**
- **Quarterly Q1 2017/18 Controlled Drugs Accountable Officer Report**

5. Any other business

5.1 Attendance

6. Date of next meeting

Date: Monday 9th October 2017

Time: 8am-9am

Location: Board Room (CWH Site) and Meeting Room A (WMUH Site via video conferencing)

Closing date: 15th September 2017