NICE Technology Appraisals About Medicines: Formulary Adherence

Technology appraisal (TA) Titles are hyperlinks to full guidance	*Date of TA Release*	*Availability of medicine for NHS patients with this medical condition, as indicated by NICE*	*Adherence of local formulary to NICE*	
			Included on the Trust Formulary for this indication Yes OR No	*Reason provided if "No"*
2014-15				
Pomalidomide for relapsed and refractory multiple myeloma previously treated with lenalidomide and bortezomib (TA338)	31/03/2015	**Pomalidomide -** in combination with dexamethasone, is not recommended within its marketing authorisation for treating relapsed and refractory multiple myeloma in adults who have had at least 2 previous treatments, including lenalidomide and bortezomib, and whose disease has progressed on the last therapy	**No**	Not applicable to C&W
Rifaximin for preventing episodes of overt hepatic encephalopathy (TA337)	31/03/2015	**Rifaximin** - is recommended, within its marketing authorisation, as an option for reducing the recurrence of episodes of overt hepatic encephalopathy in people aged 18 years or older	**Yes**	
Empagliflozin in combination therapy for treating type 2 diabetes (TA336)	31/03/2015	**Empagliflozin** - in a dual therapy regimen in combination with metformin is recommended as an option for treating type 2 diabetes, only if: •a sulfonylurea is contraindicated or not tolerated, or •the person is at significant risk of hypoglycaemia or its consequences. **Empagliflozin** - in a triple therapy regimen is recommended as an option for treating type 2 diabetes in combination with: •metformin and a sulfonylurea or •metformin and a thiazolidinedione. **Empagliflozin** - in combination with insulin with or without other antidiabetic drugs is recommended as an option for treating type 2 diabetes.	**Yes**	
Rivaroxaban for preventing adverse outcomes after acute management of acute coronary syndrome (TA335)	31/03/2015	**Rivaroxaban -** is recommended as an option within its marketing authorisation, in combination with aspirin plus clopidogrel or aspirin alone, for preventing atherothrombotic events in people who have had an acute coronary syndrome with elevated cardiac biomarkers	**Yes**	
Sipuleucel-T for treating asymptomatic or minimally symptomatic metastatic hormone-relapsed prostate cancer (TA332)	28/02/2015	**Sipuleucel-T -** is not recommended within its marketing authorisation for treating adults who have asymptomatic or minimally symptomatic metastatic non-visceral hormone-relapsed prostate cancer for which chemotherapy is not yet clinically indicated.	**No**	Not applicable to C&W

Simeprevir in combination with peginterferon alfa and ribavirin for treating genotypes 1 and 4 chronic hepatitis C (TA331)	28/02/2015	**Simeprevir -** in combination with peginterferon alfa and ribavirin, is recommended within its marketing authorisation as an option for treating genotype 1 and 4 chronic hepatitis C in adults	**Yes**	
Axitinib for treating advanced renal cell carcinoma after failure of prior systemic treatment (TA333)	28/02/2015	**Axitinib** - is recommended as an option for treating adults with advanced renal cell carcinoma after failure of treatment with a first-line tyrosine kinase inhibitor or a cytokine, only if the company provides axitinib with the discount agreed in the patient access scheme	**Yes**	
Infliximab, adalimumab and golimumab for treating moderately to severely active ulcerative colitis after the failure of conventional therapy (TA329)	28/02/2015	**Infliximab, adalimumab and golimumab** - are recommended, within their marketing authorisations, as options for treating moderately to severely active ulcerative colitis in adults whose disease has responded inadequately to conventional therapy including corticosteroids and mercaptopurine or azathioprine, or who cannot tolerate, or have medical contraindications for, such therapies. Golimumab is recommended only if the company provides the 100 mg dose of golimumab at the same cost as the 50 mg dose, as agreed in the patient access scheme.	**Yes**	
Sofosbuvir for treating chronic hepatitis C (TA330)	28/02/2015	**Sofosbuvir** - is recommended as a possible treatment for adults with some types (called genotypes) of chronic hepatitis C. It is taken with other drugs (peginterferon alfa and ribavirin, or ribavirin alone).	**Yes**	
Eculizumab for treating atypical haemolytic uraemic syndrome (HST1)	31/01/2015	**Eculizumab -** within its marketing authorisation, is recommended for funding for treating atypical haemolytic uraemic syndrome, only if all the following arrangements are in place: •coordination of eculizumab use through an expert centre •monitoring systems to record the number of people with a diagnosis of atypical haemolytic uraemic syndrome and the number who have eculizumab, and the dose and duration of treatment •a national protocol for starting and stopping eculizumab for clinical reasons •a research programme with robust methods to evaluate when stopping treatment or dose adjustment might occur.	**No**	Not applicable to C&W
Dabigatran etexilate for the treatment and secondary prevention of deep vein thrombosis and/or pulmonary embolism (TA327)	31/12/2014	**Dabigatran etexilate -** is recommended, within its marketing authorisation, as an option for treating and for preventing recurrent deep vein thrombosis and pulmonary embolism in adults.	**Yes**	

Erythropoiesis-stimulating agents (epoetin and darbepoetin) for treating anaemia in people with cancer having chemotherapy (TA323)	30/11/2014	**Erythropoiesis-stimulating agents (epoetin alfa, beta, theta and zeta, and darbepoetin alfa) -** are recommended, within their marketing authorisations, as options for treating anaemia in people with cancer who are having chemotherapy. If different erythropoiesis‑stimulating agents are equally suitable, the product with the lowest acquisition cost for the course of treatment should be used	**Yes**	Not applicable to C&W
Nalmefene for reducing alcohol consumption in people with alcohol dependence (TA325)	30/11/2014	**Nalmefene** - is recommended within its marketing authorisation, as an option for reducing alcohol consumption, for people with alcohol dependence: •who have a high drinking risk level (defined as alcohol consumption of more than 60 g per day for men and more than 40 g per day for women, according to the World Health Organization's drinking risk levels) without physical withdrawal symptoms and •who do not require immediate detoxification. The marketing authorisation states that nalmefene should: •only be prescribed in conjunction with continuous psychosocial support focused on treatment adherence and reducing alcohol consumption and •be initiated only in patients who continue to have a high drinking risk level 2 weeks after initial assessment.	**No**	
Imatinib for the adjuvant treatment of gastrointestinal stromal tumours (TA326)	30/11/2014	**Imatinib -** is recommended as an option as adjuvant treatment for up to 3 years for adults who are at high risk of relapse after surgery for KIT (CD117-positive gastrointestinal stromal tumours, as defined by the Miettinen 2006 criteria (based on tumour size, location and mitotic rate). People currently receiving treatment initiated within the NHS with imatinib that is not recommended for them by NICE in this guidance should be able to continue treatment until they and their NHS clinician consider it appropriate to stop.	**No**	
Dabrafenib for treating unresectable or metastatic BRAF V600 mutation‑positive melanoma (TA321)	31/10/2014	**Dabrafenib -** within its marketing authorisation, as an option for treating unresectable or metastatic BRAF V600 mutation‑positive melanoma only if the company provides dabrafenib with the discount agreed in the patient access scheme.	**Yes**	

Lenalidomide for treating myelodysplastic syndromes associated with an isolated deletion 5q cytogenetic abnormality (TA322)	30/09/2014	**Lenalidomide** - is as an option, within its marketing authorisation, that is for treating transfusion-dependent anaemia caused by low or intermediate-1 risk myelodysplastic syndromes associated with an isolated deletion 5q cytogenetic abnormality when other therapeutic options are insufficient or inadequate, with the following condition: The drug cost of lenalidomide (excluding any related costs) for people who remain on treatment for more than 26 cycles (each of 28 days; normally a period of 2 years) will be met by the company	**Yes**	
Dimethyl fumarate for treating relapsing-remitting multiple sclerosis (TA320)	31/08/2014	**Dimethyl fumarate** - an option for treating adults with active relapsing-remitting multiple sclerosis (normally defined as 2 clinically significant relapses in the previous 2 years), only if they do not have highly active or rapidly evolving severe relapsing-remitting multiple sclerosis and the manufacturer provides dimethyl fumarate with the discount agreed in the patient access scheme	**Yes**	
Ipilimumab for previously untreated advanced (unresectable or metastatic) melanoma (TA319)	31/07/2014	**Ipilimumab** - an option, within its marketing authorisation, for treating adults with previously untreated advanced (unresectable or metastatic) melanoma, only if the manufacturer provides ipilimumab with the discount agreed in the patient access scheme.	**Yes**	
Lubiprostone for treating chronic idiopathic constipation (TA318)	31/07/2014	**Lubiprostone** - an option for adults with chronic idiopathic constipation in whom treatment with at least 2 laxatives from different classes, at the highest tolerated recommended doses for at least 6 months, has failed to provide adequate relief and for whom invasive treatment for constipation is being considered.	**Yes**	
Prasugrel with percutaneous coronary intervention for treating acute coronary syndromes (review of technology appraisal guidance 182) (TA317)	31/07/2014	**Prasugrel 10mg** - an option, in combination with aspirin, for preventing atherothrombotic events in adults with acute coronary syndrome (unstable angina, non-ST segment elevation myocardial infarction or ST segment elevation myocardial infarction) having primary or delayed percutaneous coronary intervention.	**Yes**	
Enzalutamide for metastatic hormone-relapsed prostate cancer previously treated with a docetaxel-containing regimen (TA316)	31/07/2014	**Enzalutamide** - an option, within its marketing authorisation, for metastatic hormone-relapsed prostate cancer in adults whose disease has progressed during or after docetaxel-containing chemotherapy, only if the manufacturer provides enzalutamide with the discount agreed in the patient access scheme	**Yes**	

Canagliflozin in combination therapy for treating type 2 diabetes (TA315)	30/06/2014	**Canagliflozin** - an option in combination with other treatments for some patients with type 2 diabetes.	**Yes**	
Psoriatic arthritis (active) - ustekinumab (TA313)	30/05/2014	**Ustekinumab** - not recommended alone or with methotrexate for adults when the response to previous non-biological disease-modifying antirheumatic drug	**No**	Not recommended
Multiple sclerosis (relapsing-remitting) - alemtuzumab (TA312)	30/04/2014	**Alemtuzumab** - an option for adults with active relapsing–remitting multiple sclerosis	**No**	Not applicable to C&W
Multiple myeloma - bortezomib (induction therapy) (TA311)	30/04/2014	**Bortezomib** - an option, in combination with dexamethasone, or with dexamethasone and thalidomide, for the induction treatment of adults with previously untreated multiple myeloma, who are eligible for high-dose chemotherapy with haematopoietic stem cell transplantation	**Yes**	
Lung cancer (non small cell, EGFR mutation positive) - afatinib (TA310)	30/04/2014	**Afatinib** - an option for adults with locally advanced or metastatic non-small-cell lung cancer only if they have the EGFR-TK mutation and have not had an EGFR-TK	**Yes**	
Lung cancer (non small cell, non squamous) - pemetrexed (TA309)	30/04/2014	**Pemetrexed** - not recommended as maintenance treatment for locally advanced or metastatic non-squamous non-small-cell lung cancer in people whose disease has not progressed immediately following induction therapy with pemetrexed and cisplatin	**No**	Not recommended