

MINUTE
 AREA DRUG AND THERAPEUTICS COMMITTEE
 WEDNESDAY 21st Sept 2022 @10am
 Microsoft Teams Meeting

In Attendance:

Dr Mehrdad Malekian	Mrs Karen Patterson	Mrs Katrina Maroni
Mr George Lindsay	Mrs Carol McGoff	Dr Linda Findlay
Mrs Emma Harris	Dr Tyra Smyth	Dr Stephanie Dundas
Dr David Semple	Mrs Christine Gilmour	Mrs Penny Brankin
Mrs Gail Richardson	Mrs Victoria Gemmell from Item 2022 150 7	

Dr Zhuoa Min Chong was present for Item 2022/146 3 e.

2022/144 1.	<u>Apologies for Absence</u> Mr John Milne	
2022/145 2.	<u>Declaration of Interest</u> There were no declarations of interest.	
2022/146 3.	<u>Matters arising not covered elsewhere on the agenda</u>	
a.	<u>Ratification of minutes of meeting 17th August 2022</u> Mrs Richardson requested that para 2 of the minute relating to Oral Iron be modified to the following: “The Committee will consider the issue, including any implementation and communications plan, at a future meeting.	IM
b.	<u>Steroid Emergency Cards</u> Mrs Gilmour will confirm with Jacqueline Logan that the communication has gone from Dr Burns.	CG
c.	<u>Arterial CDT Thrombolysis</u> Dr Malekian updated the committee on discussions with Dr Ghibu.	

It is anticipated that there remains some significant work to do on this guideline which will come back to the committee in due course.

d. New Member Plans

Dr Malekian explained that this will be Mrs Maroni's last meeting for the foreseeable future. He thanked Mrs Maroni for her very significant contribution to the committee's work over many years and in particular the success with the Formulary and its transfer to the new guidelines app. This appreciation was endorsed by all members.

Dr Malekian explained that Mrs Victoria Gemmell will be joining the committee in part as a replacement for Mrs Maroni and also to take over some of Mr Lindsay's duties.

Dr Findlay was at today's meeting with a view to assessing the best primary care medical lead who may replace Dr Iain Hathorn, and Dr Malekian also talked about plans for a lay member replacement for Mr Angus.

e. Osteoporosis Guideline

Dr Zhuoa Min Chong presented the draft guideline to the committee and there was extensive discussion and debate with the following suggestions:

1. There is a lot of complex information in the guideline. It is a difficult challenge to present this in a succinct way.
2. This led to debate about the prime "audience" for the guideline and the key "take home" messages that audience require.
3. Dr Chong and colleagues are going to consider this carefully and prepare a revised draft with that in mind.
4. It is anticipated that this will have a summary on the front page explaining the most important pieces of knowledge that e.g. GPs should take from the update along with any changes in clinical practice they would be expected to adopt.
5. Subsequent pages in the document would give explanation in detail tailored for that audience along with links to the more fulsome guidance as appropriate.

It is recognised that this is difficult and these suggestions may require further modification when the next draft is prepared.

2022/147 4.

SMC Advice

Full Submissions

Pembrolizumab 25mg/mL concentrate for solution for infusion (Keytruda®) SMC2479

This was noted and will be referred to the West of Scotland Cancer Network (WoSCAN).

Pembrolizumab 25mg/mL concentrate for solution for infusion (Keytruda®) SMC2460

This was noted and will be referred to the West of Scotland Cancer Network (WoSCAN).

Pembrolizumab 25mg/mL concentrate for solution for infusion (Keytruda®) SMC2474

This was noted and will be referred to the West of Scotland Cancer Network (WoSCAN).

Defatted powder of Arachis hypogaea L, semen (peanuts) (Palforzia®) SMC2487

This was noted.

Update on the interim assessment approach in response to COVID-19

This is a pragmatic approach to minimise delay in patient access as a result of the COVID-19 pandemic. Following review by the SMC executive, SMC advice for four medicines, one full, one resubmission and two abbreviated submissions will be published on the SMC website on **Monday 10 October 2022**.

Full Submission

Ozanimod 0.23mg, 0.46mg and 0.92mg hard capsules (Zeposia®) SMC2478

This was noted and will be referred to Gastroenterology specialists.

Resubmission

Filgotinib 100mg and 200mg film-coated tablets (Jyseleca®) SMC2475

This was noted and will be referred to Rheumatology specialists.

	<p><u>Abbreviated Submissions</u></p> <p>Brolucizumab 120mg/mL solution for injection and solution for injection in pre-filled syringe (Beovu®) SMC2508</p> <p>This was noted and will be referred to Ophthalmology specialists.</p> <p>Upadacitinib 15mg, 30mg, and 45mg prolonged-release tablets (Rinvoq®) SMC2510</p> <p>This was noted and will be referred to Gastroenterology specialists.</p> <p><u>Amended Advice</u></p> <p>Tofacitinib 5mg film-coated tablets (Xeljanz®) SMC2463</p> <p>This was noted and has been referred to Rheumatology specialists.</p> <p><u>Paediatric Licence Extensions</u></p> <p>These were noted.</p>	
2022/148 5.	<p><u>SMC follow up</u></p> <p>Mrs McGoff talked the Committee through the SMC follow up which had been previously circulated. Feedback and clinical protocols are expected on a number of items in due course. Feedback for tofacitinib was shared with the Committee.</p> <p>A number of specialist medicines included in previous ADTC bulletins were agreed to be updated to reflect the regional specialist services available.</p>	CMcG
2022/149 6.	<p><u>Lanarkshire Formulary</u></p> <p>Mrs McGoff presented a proposed update to the Formulary contraceptives section.</p> <p>The amendments proposed were:</p> <ol style="list-style-type: none"> 1. To reclassify desogestrel as the preferred progestogen only pill, with Noriday® and Norgeston® also remaining on formulary as total list options. 2. To reclassify Evra® patches as a total list option, restricted to patients unable to comply with oral contraceptives. 3. The addition of Benilexa® to the intra-uterine progestogen-only device section. 4. The removal of Ancora® 375 from the intra-uterine copper contraceptive devices, to be replaced with Nova-T® 380. <p>The above amendments were ratified by the Committee.</p>	CMcG KM

<p>2022/150 7.</p> <p>a.</p> <p>b.</p> <p>c.</p> <p>d.</p>	<p><u>Clinical Protocols</u></p> <p><u>Rheumatology Protocols.</u></p> <p>There was useful debate with the conclusions that:</p> <ol style="list-style-type: none"> 1. In each protocol the term “Biologics Pharmacist” should be changed to “Home Care Pharmacist” 2. The clinical detail in accordance with national guidelines is agreed. 3. This may lead to greater demand and that demand could exceed current capacity of the Home Care service (e.g. for adalimumab) or the aseptic service (e.g. for infliximab). 4. Thus implementation needs to be debated further at the Acute PMB. <p>Mrs Richardson and Patterson will feedback and take to that forum.</p> <p><u>Liraglutide</u></p> <p>A request was made for greater detail on dose modification and potential duration of dose modification in relation to changing renal function.</p> <p>It was also requested that communications about the prescribing of needles from GP practices should state the number of needles required at a given frequency and that communications with the patient should put in appropriate context the urgency of supply.</p> <p>Dr Malekian will feedback to the authors along with a request for the information to come in a completed template. It is anticipated that this item will come back to the October meeting.</p> <p><u>Antenatal Gentamicin. Chart</u></p> <p>This was agreed save the modification of</p> <p>MG on page 2 changing to mg</p> <p>“OTO/VESTIBULAR” on page 2 changing to “OTO/VESBULAR Toxicity”</p> <p>Reformatting the alignment of the “Continue 24 hourly”, “ Withhold” and “Stop” tick boxes on page 2 to minimise the risk of an erroneous tick.</p> <p><u>Alert Antibiotic Authorisation Process</u></p> <p>Dr Dundas talked through the evolution of this process and future</p>	<p>KP/GR</p> <p>MM</p> <p>SD</p>
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	plans including an e-authorisation process. The current document is therefore an interim solution and it was agreed by the committee.	SD
2022/151 8.	<u>ADTC New Medicines Decisions</u> This was noted.	
2022/152 9.	<u>Unlicensed Medicines</u> There was nil to report at today's meeting.	
2022/153 10.	<u>Patient Group Directions</u> Mr Lindsay talked through the context of NHS Scotland Pharmacy First and the national governance, education & training and publicity to support this service. Dr Dundas reiterated the full involvement of SAPG and that this was an important aspect of governance. Dr Smyth gave a case study which illustrated the value of the service. It was agreed that the updated PGDs for Trimethoprim and Fusidic Acid can be signed off and distributed. NHS Lanarkshire decided not to approve the PGD for Nitrofurantion when it was first developed a few years ago on the basis that trimethoprim was preferred for most circumstances and little was to be gained for its use. Since then nitrofurantoin is now more likely to be required and the ADTC approved further debate at the Antimicrobial Management Team meeting on 7 th October with a view to assessing how it may be introduced.	GL/SD
2022/154 11.	<u>Medication and Clinical risk in Lanarkshire</u> https://www.gov.uk/drug-safety-update This was noted.	
2022/155 12.	<u>Regional Cancer Advisory Network</u>	
2022/156 13.	<u>Patient Safety Alerts</u> There was nil to report at today's meeting.	
2022/157 14.	<u>Lay member related items</u> There was nil to report at today's meeting.	
2022/158 15.	<u>ADTCC Correspondence</u> <u>(ADTC) Collaborative</u>	

	<p>(i) The August 2022 ADTCC Newsletter was noted.</p>	
<p>2022/159 16.</p>	<p>Pharmacy & NMAHP Prescribing Governance</p> <p>There was nil to report at today's meeting.</p>	
<p>2022/160 17.</p>	<p>AOCB</p> <p>(i) <u>Decision Support Tool/ Right Decision Service</u></p> <p>Dr Malekian told the committee of pilot work in other Health Boards that he had recently been made aware of and had discussed with Dr Findlay and Mrs Gilmour. The general feeling is that NHS Lanarkshire may well be interested in taking part in future development/evaluation and several members made contributions about a range of issues which would need to be considered.</p> <p>(ii) <u>Medicines suitable for Vegetarian and Vegan Patients</u></p> <p>Dr Semple indicated that he is being asked about this issue more frequently and wondered if there is a readily accessible reference source.</p> <p>Mrs Patterson will check with Medicines Information and share the outcome.</p> <p>(iii) <u>West of Scotland Regional Formulary</u></p> <p>Mrs Gilmour informed the committee of a request sent to West of Scotland Directors of Pharmacy to consider development of a West of Scotland regional formulary. Mrs Gilmour will share the detail with Dr Malekian.</p>	<p>KP</p> <p>CG</p>
<p>2022/143 18.</p>	<p><u>Date of next meeting</u></p> <p>Wednesday 19th October 2022 10am @ Microsoft Teams</p>	