NHS
Barnsley
Clinical Commissioning Group

Minutes of the meeting of the AREA PRESCRIBING COMMITTEE held on Wednesday, 8th January 2020 in the Edith Perry Room, BHNFT

MEMBERS:

Chris Lawson (Chair)	Head of Medicines Optimisation (Barnsley CCG)
Professor Adewale Adebajo	Associate Medical Director (Medicines Optimisation) on behalf of the Medical Director (BHNFT)
Tom Bisset	Community Pharmacist (LPC)
Dr Rebecca Hirst	Palliative Care Consultant (Barnsley Hospice)
Sarah Hudson	Lead Pharmacist (SWYPFT)
Dr Abdul Munzar	General Practitioner (LMC)
Mike Smith	Chief Pharmacist (BHNFT)

IN ATTENDANCE:

Caron Applebee	Lead Pharmacist (Barnsley CCG)
Nicola Brazier	Administration Officer (Barnsley CCG)
Emma Carlile	Tissue Viability Nurse (SWYPFT)
Lauren Clarke	Senior Pharmacist, Interface (BHNFT)
Deborah Cooke	Lead Pharmacist (Barnsley CCG)
Joanne Howlett	Medicines Management Pharmacist (Barnsley CCG)
Elizabeth Lock	Wound Care Nurse (Barnsley CCG)
Gillian Turrell	Lead Pharmacist (BHNFT)

APOLOGIES:

Dr Mehrban Ghani	Chair, Barnsley Healthcare Federation CIC, representing the Primary Care Networks (PCNs)
Dr Kapil Kapur	Consultant Gastroenterology (BHNFT)
Dr Jeroen Maters	General Practitioner (LMC)

ACTION BY

APC 20/01 QUORACY

The meeting was quorate.

APC 20/02 DECLARATIONS OF INTEREST RELEVANT TO THE AGENDA

There were no declarations of interest to note.

APC 20/03 DRAFT MINUTES OF THE MEETING HELD ON 11th DECEMBER 2019

The minutes were accepted as an accurate record of the meeting but clarity was provided in relation to 19/266.2.

It was confirmed that the red classification for new prescribing of daily tadalafil applies to both the 2.5mg and 5mg strengths.

APC 20/04 MATTERS ARISING AND APC ACTION PLAN

20/04.1 NICE TAs October 2019

TA607 Rivaroxaban for preventing atherothrombotic events in people with coronary or peripheral artery disease (proposed traffic light classification)

The proposed traffic light classification for this indication was green and the Lead Pharmacist, BHNFT would include this when updating

the antiplatelet guidance.

Agreed action: -

- The Lead Pharmacist, BHNFT to update the antiplatelet guidance accordingly. **GT**

20/04.2 NICE TAs November 2019

The Lead Pharmacist, BHNFT to advise if the following NICE TAs were applicable for use at BHNFT:- **GT**

- TA611 Rucaparib for maintenance treatment of relapsed platinum-sensitive ovarian, fallopian tube or peritoneal cancer
  Post meeting note*: the Lead Pharmacist confirmed by email that this was not applicable*
- TA613 Fluocinolone acetonide intravitreal implant for treating chronic diabetic macular oedema in phakic eyes after an inadequate response to previous therapy
  Post meeting note*: the Lead Pharmacist confirmed by email that this was applicable*

20/04.3 NRT

The Head of Medicines Optimisation and Lead Pharmacist, SWYPFT attended a recent regional QUIT Pharmacotherapy Workshop and the issues discussed at the last APC meeting were raised.

It was confirmed that the majority of patients are receiving NRT first line, with mental health areas potentially looking at using varenicline.

The target time to start NRT is between 30 minutes and 2 hours of admission to hospital and SWYPFT were in the process of updating their Homely Remedies Procedure to include long and short acting NRT to offer patient choice. The recently approved BHNFT Homely Remedies Procedure which includes NRT would be shared with SWYPFT. **GT**

The consensus from the regional QUIT Pharmacotherapy Workshop was to provide a 2 week supply of NRT followed by management in primary care.

20/04.4 Action Plan – other areas

20/04.4.1 Anticoagulation for Stroke Prevention in Non-Valvular AF Guidance

The draft guidance will be submitted to the next LMC. The draft guidance has previously been shared and there are no additional changes other than the addition of the primary care warfarin information. The guidance will be brought back to the next APC meeting.

20/04.4.2 Wound Care Formulary Protocol 9 Pathway

The development of this pathway was in progress and it was agreed that timeframes would be agreed at the next Wound Care Advisory Group meeting. It was agreed that the list of products would be shared with the Community Pharmacist to check product availability. **EL/TB**

There would be further discussions to overcome possible issues around prescribing full and split boxes. **CL/TB/EL**

20/04.4.3 Leukomed® Control (Wound Care)

Following the approval of the new product application in March 2019, with restricted use for self-harm patients, it was agreed to monitor prescribing data. The Lead Pharmacist (DC), Barnsley CCG advised that there was no prescribing of Leukomed® Control from ePACT data and therefore this action would be removed from the action plan. **NB**

APC 20/05 BISPHOSPHONATES/CALCIUM PRODUCTS

The Lead Pharmacist, BHNFT shared a summary report from UpToDate around calcium and vitamin D supplementation in osteoporosis. Unfortunately Dr Lee was unable to attend the APC meeting but was due to meet with the Lead Pharmacist. This item was therefore deferred to the February 2020 meeting.

APC 20/06 IMIQUIMOD 5% CREAM (ALDARA®), 5-FLUOROURACIL 5% CREAM (EFUDIX®) AND INGENOL MEBUTATE GEL (PICATO®) TRAFFIC LIGHT CLASSIFICATIONS

A request has been received from Dr Baxter, Consultant Dermatologist & Clinical Lead for Outpatients Department, BHNFT asking the APC to consider reducing the red traffic light classification of the topical formulary preparations for actinic keratosis. It was noted that Dr Baxter is keen to produce an actinic keratosis pathway.

As these are red drugs, GPs are currently unable to prescribe on the advice of the specialist following a referral into the tele dermatology service. The APC are asked to consider changing the classification to amber G to eliminate this barrier.

The Lead Pharmacist (DC) advised the Committee that the classifications vary in other local areas but from the areas checked, more are classified amber G or green than red.

The Committee approved the request to change the traffic light classification of the above topical preparations to amber G when the supporting guidelines are available. Primary care would only provide prescriptions following recommendation via the tele dermatology service.

It was noted that Dr Baxter has submitted a new product application for Actikerell®.

Post meeting note: *The marketing authorisation for Picato(®) (ingenol mebutate) has been suspended as a precaution while the EMA's safety committee reviews data on the risk of skin cancer. The manufacturer has recalled unexpired stock from pharmacies and wholesalers.*

APC 20/07 URGOSTART® PRESCRIBING DATA

Following the approval of the new product application in March 2019, with the requirement to monitor prescribing, the prescribing data was presented showing an increase in prescribing since March 2019.

It was noted that Urgostart® is supported by NICE and offers shorter treatment lengths and it was therefore agreed to remove from this

from the APC action plan and monitoring of prescribing would be undertaken by the Wound Care Advisory Group. **CL/EL**

APC 20/08 SWITCHING DILTIAZEM PREPARATIONS

The Lead Pharmacist, BHNFT presented Enclosure E which rationalises the brands used across Barnsley with the aim of minimising confusion and reducing the risk of inappropriate prescribing and/or dispensing. This has been produced with and endorsed by the cardiologists.

Following a query around the inclusion of Tildiem Retard®, it was agreed that this would be added to the formulary specifically for vegetarian and vegan patients only.

To ensure the guidance and the formulary were in line with each other, the wording around initiating as a OD / BD dose would be agreed outside of the meeting. **GT/DC**

It was confirmed that work was ongoing in primary care to look at patients on twice daily/once daily and vice versa and it was planned that next year primary care would be looking to move patients onto formulary brands where possible and this guidance would be adopted.

Subject to agreeing the wording as discussed above, the Committee approved the guidance.

APC 20/09 NEW PRODUCT APPLICATION LOG

Noted.

APC 20/10 REVIEW OF NEW PRODUCT APPLICATION FORM

The new product application form has undergone a routine review and the tracked changes were noted.

The Committee accepted the updated new product application form.

APC 20/11 SHARED CARE GUIDELINES / AMBER G SHARED CARE GUIDELINES

<u>Azathioprine, 6-Mercaptopurine, Methotrexate and Mycophenolate for Inflammatory Bowel Disease and Autoimmune Hepatitis Amber Shared Care Guideline</u>

The Lead Pharmacist, BHNFT presented the updated shared care guideline which has received a minor update to include the addition of U&Es to the routine monitoring for Azathioprine. This brings the monitoring in line with other shared care guidelines for Azathioprine in other specialities (dermatology and rheumatology).

The Committee endorsed the guideline.

APC 20/12 EXPIRED SHARED CARE/AMBER-G GUIDELINES

The Medicines Management Pharmacist presented the information highlighting expired shared care/amber-g guidelines. Allocations for reviewing the guidelines and some target dates have been added.

Following discussion, no immediate clinical risk was identified with

any of the expired guidelines.

Following a discussion regarding the antipsychotic shared care guidelines and the monitoring required with the older typical antipsychotics which were classified green, it was agreed that a collaborative antipsychotic guideline would be produced which would include information on all of the antipsychotics on the formulary. It was agreed that this would be presented in a similar way to other local collaborative shared care guidelines (e.g. epilepsy) and include a summary of the traffic light classifications of the different antipsychotics and short individual drug monographs. It was agreed that the existing traffic light classifications would remain.

It was highlighted that Glucodrate has been discontinued so the Glucodrate Amber-G Guideline would be removed from the formulary.

Agreed action: -

- Guideline updates to be prioritised and target dates to be advised. **GT**

APC 20/13 EXPIRED PRESCRIBING GUIDELINES

The Medicines Management Pharmacist presented the information highlighting expired prescribing guidelines. Allocations for reviewing the guidelines and some target dates have been added.

Following discussion, no immediate clinical risk was identified with any of the expired prescribing guidelines.

As omega-3 fatty acid compounds and glucosamine are included in the NHS England guidance 'items which should not be routinely prescribed in primary care' it was highlighted that omega-3 fatty acid compounds QIPP detail aid (plus supporting information) and Glucosamine QIPP Detail Aid would be removed from BEST.

Agreed action: -

- Guideline updates to be prioritised and target dates to be advised. **GT**

APC 20/14 FORMULARY REVIEWS

Formulary Review Plan (for information)

Received for information, noting the request to defer the Endocrine chapter.

APC 20/15 BARNSLEY APC REPORTING JANUARY 2020

The Lead Pharmacist (CA) presented the report for information.

BAPC20/01/06 was noted and concern was raised around communication issues between GP practice and community pharmacy with prescription queries. The issues were discussed and it was agreed to highlight this at a practice manager's forum. **CL/CA**

BAPC20/01/13 was noted and the Lead Pharmacist (CA) would check the CD incident report from the practice. **CA**

The Head of Medicines Optimisation advised the Committee that the

option to build APC reporting into the database was being explored to support reporting from the Clinical Pharmacists.

APC 20/16 NEW NICE TECHNOLOGY APPRAISALS (DECEMBER 2019)

The Lead Pharmacist, BHNFT would advise if the following NICE TAs were applicable for use at BHNFT:- **GT**

- TA614 Cannabidiol with clobazam for treating seizures associated with Dravet syndrome
  ***Post meeting note**: the Lead Pharmacist confirmed by email that this was not applicable*
- TA615 Cannabidiol with clobazam for treating seizures associated with Lennox–Gastaut syndrome
  ***Post meeting note**: the Lead Pharmacist confirmed by email that this was not applicable*

20/16.1 Feedback from BHNFT Clinical Guidelines and Policy Group
There was nothing significant to report.

20/16.2 Feedback from SWYPFT NICE Group
There was nothing significant to report.

APC20/17 FEEDBACK FROM THE MEDICINES MANAGEMENT GROUPS

20/17.1 Primary Care Quality & Cost Effective Prescribing Group
The Group have not met.

20/17.2 BHNFT
The Group have not met.

20/17.3 SWYPFT Drug and Therapeutics Committee
There was nothing significant to report.

APC 20/18 ISSUES FOR ESCALATION TO THE QUALITY & PATIENT SAFETY COMMITTEE (Q&PSC)

It was agreed to escalate the communication issues between GP practices and community pharmacy to the Q&PSC. **CL**

APC 20/19 HORIZON SCANNING DOCUMENT (DECEMBER 2019)

The Committee assigned the following classifications to the products listed below: -

Liothyronine (generic) 10 micrograms tablets (Liothyronine, Morningside Healthcare Ltd) – **already formulary red**
Octreotide acetate 10 mg, 20 mg & 30 mg powder and solvent for prolonged-release suspension for injection (Olatuton®, Teva UK Limited) – **formulary amber restricted**
Tenofovir disoproxil (generic) 123 mg & 204 mg film-coated tablets (Tenofovir Milpharm®, Aurobindo Pharma - Milpharm Ltd) – **already formulary red restricted**
Bortezomib (generic) 3.5 mg powder for solution for injection (Bortezomib, Dr. Reddy's Laboratories (UK) Ltd) – **already formulary red restricted**
Gilteritinib 40 mg film-coated tablets (Xospata®▼, Astellas Pharma Ltd) – **non-formulary provisional red**
Dasatinib (generic) 20 mg, 50 mg, 70 mg, 80 mg, 100 mg & 140 mg film-coated tablets (Dasatinib Zentiva®, Zentiva) – **already formulary**

red restricted
Dronedarone (generic) 400 mg film-coated tablets (Dronedarone Aristo®, Aristo Pharma Limited) – **already formulary red restricted**
Travoprost/timolol (generic) 40 micrograms/mL + 5 mg/mL eye drops (Mylan) – **non-formulary provisional green**

Other
Dipyridamole 200mg/5ml oral suspension sugar-free – **change to formulary green** (currently non-formulary provisional grey)

APC 20/20 MHRA DRUG SAFETY UPDATE (DECEMBER 2019)
The update was noted with the following information highlighted: -

Domperidone for nausea and vomiting: lack of efficacy in children; reminder of contraindications in adults and adolescents:
Domperidone is no longer licensed for use in children younger than 12 or those weighing less than 35 kg. Results from a placebo-controlled study in children younger than 12 years with acute gastroenteritis did not show any difference in efficacy at relieving nausea and vomiting compared with placebo.

APC 20/21 REGIONAL MEDICINES OPTIMISATION COMMITTEE (RMOC)
Position Statement : Oral vitamin B supplementation in alcoholism, November 2019
Received for information.

It was noted that local guidance is in place and on cross checking the 2 guidelines, the additional information below would be looked at for inclusion in the local guidance when reviewed later this year: -

…"Following successful alcohol withdrawal, thiamine should be continued for 6 weeks. If after this time the patient remains abstinent and has regained adequate nutritional status, thiamine should be discontinued…"

The LMC representative advised that vitamin B compound is still being prescribed in hospital for alcoholic patients and it was agreed that APC reports should be submitted if instances are identified. It was suggested than an Eclipse Live report would be generated to see who has been started in the last 3 months and look where the prescribing originates from.

Agreed action: -
- Run an Eclipse Live report to see who has been started in the last 3 months and where prescribing originates from. **CA**

APC 20/22 SOUTH YORKSHIRE AREA PRESCRIBING COMMITTEE MINUTES
No minutes available.

APC 20/23 ANY OTHER BUSINESS
20/23.1 Medicines Optimisation Scheme 2020-21
It was hoped that the plan would be presented at the next meeting.

20/23.2 Polypharmacy and Frail Patients ICS HSN

Following a query, the Head of Medicines Optimisation fed back that regionally the ICS are looking at pulling together information from all areas around structured medication reviews and Barnsley are submitting information from 5 reviews per practice which demonstrates significant benefits of carrying out the work which has involved structured medication reviews for patients 80 years old and on 15 or more medicines.

20/23.3 Roflumilast Traffic Light Classification

The Senior Interface Pharmacist (BHNFT) advised that the respiratory consultants wished to change the traffic light classification of Roflumilast from red to amber/amber G.

It was agreed that a briefing paper would be brought back to the next APC meeting to fully inform the Committee of the request. **LC**

APC 20/24 DATE AND TIME OF THE NEXT MEETING

The time and date of the next meeting was confirmed as Wednesday, 12th February 2020 at 12.30 – 2.30 pm in the Edith Perry Room at Barnsley Hospital NHS Foundation Trust.