

Derbyshire Joint Area Prescribing Committee (JAPC)

This is a countywide group covering NHS North Derbyshire, Southern Derbyshire, Hardwick and Erewash Clinical Commissioning Groups, Derbyshire Community Health Service Foundation Trust, Derbyshire Healthcare Foundation Trust, Derby Teaching Hospital and Chesterfield Royal Hospital foundation trusts. It provides recommendations on the prescribing and commissioning of drugs.

See <http://www.derbyshiremedicinesmanagement.nhs.uk/home>

KEY MESSAGES FROM THE JAPC JANUARY 2018 MEETING CLINICAL GUIDELINES

1. The Overactive Bladder Management (OAB) has been updated with current drug prices. The guideline includes pharmacological treatment, non-pharmacological conservative management including lifestyle advice. There is a reminder to clinicians of the anticholinergic burden (ACB) within this drug class. There is widespread acknowledgement of evidence linking ACB to cognitive impairment and mortality in the elderly. The guidance contains a useful link to resources on the anticholinergic burden including tools for assessment that clinicians will find helpful.

SHARED CARE GUIDELINES

None.

PATIENT GROUP DIRECTIONS

None.

Freestyle Libre (Brown after diabetic consultant/specialist initiation within a Derbyshire Diabetes service) Not to be initiated by GP's

The consultant diabetologists of CRHFT and DTHFT with support of their Drugs and Therapeutics Committees have proposed and had accepted by JAPC that Freestyle Libre sensors can now be prescribed in Derbyshire for patients with Type 1 diabetes according to strict criteria. The eligible cohorts of patients for Freestyle Libre are in line with the RMOG recommendations, and must show a benefit after 6 months of initiation and are the subject of audit criteria as recommended by the Association of British Clinical Diabetologists. Given the potential financial risk to CCGs the usage and on-going commissioning is subject to review dependent on the number of patients treated, compliance to audit standards and value for money to the NHSE.

Ophthalmology pathways

JAPC has ratified updated ophthalmology pathways that relate to High Cost Drugs excluded from Tariff that are usually administered in secondary care. These are for the treatment of; Age Related Macular Degeneration, Branch and Central Retinal Vein Occlusion, Diabetic Macular Oedema and non-posterior Uveitis. These guidelines are NICE TA compliant with some locally agreed variation.

RAISING AWARENESS

1. NHSE are revising guidance last issued in 1991(ELV (91) 127 'Responsibilities for Prescribing between Primary and Secondary Care' This essentially sets out the principles of shared care to which ours comply. Acute providers represented at JAPC were reminded of the good communication and agreement with primary care for patients required in transfer.
2. NICE has recently updated its diagnosis and management of asthma in adults and children. Local guidance is being updated but will require wide consultation. Two recent publications by the Primary care Respiratory Society (Nov 2017 briefing document) and an article in the Thorax 'Guidelines for the diagnosis and management of asthma: a look at the key differences between BTS/SIGN and NICE' were sources that explained to JAPC the differences between respected bodies and barriers to implement some of the recommendations.
3. The Derbyshire wide Prescribing Specification has been updated to include references that provider organisations will support recent QIPP plans that include promoting self-care and stopping gluten free prescribing.
4. CMO alert dated 19th December states that there is an increase in influenza cases in the community. GPs and other prescribers working in primary care may now prescribe anti-viral medicines for the prophylaxis and treatment of influenza at NHS expense.

QIPP

Crushing and dispersing (off-licence) standard oral prednisolone in water is routine practice in many hospitals and a cost effective option compared to soluble prednisolone tablets. Soluble prednisolone tablets should be reserved for patients with fine bore enteral tubes.

GUIDELINE GROUP KEY POINTS

1. Chapter 1 - Gastro-intestinal System has been updated
 - a. Mucogel replacing Maalox
 - b. Budesonide foam enema as an alternative in the short term supply problem with hydrocortisone enemas being unavailable
 - c. Reminder to prescribe ciclosporin and methotrexate injections (North only) by brand.

MHRA NOTICES RELEVANT TO PRIMARY CARE

None relevant to primary care

Information only:

- Gadolinium-containing contrast agents: removal of Omniscan and IV Magnevist, restrictions to the use of other linear agents
- Cladribine (Litak, Leustat) for leukaemia: reports of progressive multifocal encephalopathy (PML); stop treatment if PML suspected
- Radium-223 dichloride (Xofigo ▼): do not use in combination with abiraterone and prednisone/prednisolone, following clinical trial signal of increased risk of death and fractures
- Eluxadoline (Truberzi ▼): risk of pancreatitis; do not use in patients who have undergone cholecystectomy or in those with biliary disorders
- Fingolimod (Gilenya ▼): new contraindications in relation to cardiac risk
- Fingolimod (Gilenya ▼): updated advice about risk of cancers and serious infections

Drug	Date considered	Decision	Details
Freestyle Libre	January 2018	Brown after specialist initiation	Flash Glucose monitoring system. Replacement sensors prescribeable in line with RMOC recommendations. Requires ABCD audit form completion.
Guselkumab (Tremfya)	January 2018	Black	Treatment of moderate-to-severe plaque psoriasis in adults who are candidates for systemic therapy NICE TA expected Jun 2018
Naltrexone–bupropion	January 20018	Black	As per NICE TA 494 for managing overweight and obesity
Levocarnitine	January 2018	Red	RED as per NHSE commissioning intentions
Peginterferon alfa-2a (Pegasys)	January 2018	Red	RED as per NHSE commissioning intentions
Tenofovir disoproxil + cobicistat + elvitegravir + emtricitabine (Stribild)	January 2018	Red	RED as per NHSE commissioning intentions
Atezolizumab	January 2018	Red	As per NICE TA 492 RED and NHSE commissioning intentions for untreated locally advanced or metastatic urothelial cancer when cisplatin is unsuitable
Cladribine	January 2018	Red	As per NICE TA 493 and NHSE commissioning intentions for treating relapsing–remitting multiple sclerosis
Palbociclib with an aromatase inhibitor	January 2018	Red	As per NICE TA 495 and NHSE commissioning intentions for previously untreated, hormone receptor-positive, HER2-negative, locally advanced or metastatic breast cancer
Ribociclib, with an aromatase inhibitor	January 2018	Red	As per NICE TA 499 and NHSE commissioning intentions Ribociclib with an aromatase inhibitor for previously untreated, hormone receptorpositive, HER2-negative, locally advanced or metastatic breast cancer

Definitions:

RED: drugs are those where prescribing responsibility lies with a hospital consultant or a specialist.

AMBER: drugs are those that although usually initiated within a hospital setting, could appropriately become the responsibility of the GP, under a shared care agreement.

GREEN: drugs are regarded as suitable for primary care prescribing.

BROWN: drugs are those that JAPC does not recommend for use, except in exceptional circumstances, due to lack of data on safety, effectiveness, and/or cost-effectiveness.

BLACK: drugs are not routinely* recommended or commissioned (*unless agreed through the individual funding request route)

CONSULTANT/SPECIALIST INITIATION: consultant/specialist issues the first prescription usually following a consultation because:

- The patient requires specialist assessment before starting treatment and/ or
- Specialist short term assessment of the response to the drug is necessary.

GPs will be asked to continue prescribing when the patient is stable or predictably stable

CONSULTANT/SPECIALIST RECOMMENDATION: consultant/specialist requests GPs prescribe initial and on-going prescriptions, but ensures:

- There is no immediate need for the treatment and is line with discharge policies and
- The patient response to the treatment is predictable and safe

DERBYSHIRE MEDICINES MANAGEMENT, PRESCRIBING AND GUIDELINES WEBSITE

This website is the first port of call for information on local NHS decisions and guidance on medicines use. It includes: local prescribing formularies, JAPC decisions, traffic lights, shared care guidelines, medicines guidelines, newsletters, controlled drug resources, and other medicines management resources. The site improves upon previous sites in several ways. It is faster, more reliable, has its own search engine, and it is easier to find information. Content is constantly being updated and you can sign up for e-mail alerts to keep you up to date.