

This is a countywide group covering NHS Derby & Derbyshire Integrated Care Board, Derbyshire Community Health Service Foundation Trust, Derbyshire Healthcare Foundation Trust, University Hospital of Derby and Burton 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 June's JAPC meeting

[Domperidone position statement](#) – minor update of an existing position statement, which now includes a traffic light classification of GREY specialist initiation **or** recommendation for the use of domperidone for nursing mother to help promote lactation. This allows infant feeding specialists to liaise with health visitors who will in turn request GPs to prescribe domperidone. A maternal total daily dose of 30mg/day (10mg three times a day) is an accepted dose, with review at 7 days as per Breastfeeding Network.

[Riluzole shared care agreement](#) (SCA) – update of an existing Derbyshire SCA, to bring in line with the national regional medicines optimisation committee (RMOC) SCA for riluzole. The following sections have been aligned to the national SCA – patients who become pregnant or plan to become pregnant, their management should be referred back to the specialist; specialist to monitor U&E at baseline and a routine review every 6 months or as clinically needed and for GPs to order a chest x-ray and stop riluzole and inform specialist if findings are suggestive of interstitial lung disease.

[Lithium SCA](#) – minor update of existing SCA, to bring in line with the national RMOC SCA for lithium. Update includes tightening of wording around monitoring; pharmacy department contact details changed to community mental health teams; and inclusion of lithium app which should eventually replace the lithium purple book.

[Methotrexate SCA](#) - update of an existing Derbyshire SCA, to bring in line with the national RMOC SCA for methotrexate. Update includes patients who become pregnant or plan to become pregnant, their management should be referred back to the specialist; use of CrCl for monitoring renal function instead of eGFR, methotrexate booklet inclusion if needed; patient responsibility regarding moderate alcohol intake and use of appropriate contraception; and information on shingles and covid vaccine added for patients as per national guidance.

[Rotavirus vaccine Patient Group Direction \(PGD\)](#) – update includes HIV infants added to the inclusion section; facilities for management of anaphylaxis included in cautions section; deleted Rotarix® oral suspension in multi monodose as per the SPC; additional statements for use of the tube for clarity in the route and method of administration section; additional information in patient advice section as per SPC; and update of references.

[Diabetes – blood glucose and ketone test strips and lancets formulary](#)

A JAPC formulary for blood glucose and ketone test strips and lancets has been developed based on the [national commissioning recommendations](#). The local formulary includes 2 options for category 1 (type 1 diabetes and ketosis prone type 2 diabetes) and category 2 (type 2 diabetes). For **category 1** patients the preferred options include:

- GlucoFix Tech Sensors (blood glucose); GlucoFix Tech B-Ketone Sensors Test Strips and Glucoject Lancets Plus to fit the GlucoFix Tech GK meter.
- GlucoRx HCT (blood glucose) test strips; GlucoRx HCT ketone test strips; GlucoRx Lancets to fit the GlucoRx HCT meter

For **category 2** patients the preferred options include:

- On Call Extra Test Strips (blood glucose); and On Call Lancets to fit the On Call Extra Mobile meter.
- GlucoRx Q Test Strips (blood glucose); and GlucoRx Lancets to fit the GlucoRx Q meter.

If these options are not suitable then any meter with blood glucose strip costing <£9 for 50, ketone strips costing <£10 for 10 and lancets costing <£4 for 100 can be used from those which have been nationally recommended. Newly diagnosed eligible patients with diabetes should be initiated on one of the locally preferred options following assessment and training from a healthcare professional. Existing category 2 patients already using a meter and testing strips which are not locally recommended, should be offered an alternative meter and testing strips at the earliest opportunity with appropriate training on their use. Prescribers are reminded all suppliers will provide, free of charge, the recommended meters, lancing devices, and ongoing free control solutions to all healthcare settings across England in primary care, secondary care and to service users.

Please note for **category 1 patients** glucomen areo 2k and fora advanced proGD40 are not nationally recommended. Caresens dual is recommended in the national guidance but exceeds our local threshold of <£9 for 50 strips and therefore not recommended. For **category 2 patients** WaveSense Jazz is nationally recommended, costing <£9 for 50 strips. Tee2 is not nationally recommended.

Guideline Group key messages – traffic light amendments

Insulin Pen Needle - dual classification. **GREEN**- Insupen original, GlucoRx carepoint/ carepoint ultra are the formulary choices. If this is unsuitable consider other brands costing less than £5 per 100 needles. **Do Not Prescribe (DNP)**- All other insulin pen needles with acquisition cost > £5 per 100.

Dutasteride – **GREEN** for benign prostatic hyperplasia. **Carbamazepine** - **GREEN** for trigeminal neuralgia. See neuropathic pain guideline.

Hepatitis B vaccine - dual classification. **DNP**: For travel; **RED**: vaccination of at-risk patients with underlying medication conditions e.g., CKD undergoing dialysis. **Unclassified**: vaccination in primary care as part of national selective immunisation program e.g., babies born to hepatitis B infected mothers. See complete routine immunisation schedule. **Vaccines** –Covid-19 vaccine (VidPrevtyl Beta) – unclassified; Tozinameran + famtozinameran (Comirnaty Original/ Omicron BA.4/5) - unclassified; Elasmomeran + davesomeran (Spikevax bivalent original/ Omicron BA.4-5) – unclassified. **Micronised**

progesterone (vaginal) - dual classification. **Utrogestan vaginal capsule/ Cyclogest pessary**. **GREEN consultant/specialist initiation** for prevention of miscarriage as per NICE NG126 (off-label). **RED** for other indications e.g., supplementation of luteal phase during assisted reproductive technology cycles.

[Diabetes Glucose Monitoring Interim Position Statement](#) - Removed expected guideline publication date due to high volume of FOI requests.

Formulary skin chapter- Dithranol 0.1% (Dithrocream) discontinued- removed. Minor wording update to Out of Area Traffic Light guidance for clarification- for Derbyshire RED/ OOA Green box amended to include example of antiepileptics where JAPC provides specific advice to follow tertiary centre classification.

MHRA – Drug safety update

[Direct-acting oral anticoagulants \(DOACs\)](#); paediatric formulations; reminder of dose adjustments in patients with renal impairment. MHRA risk minimisation materials available to support the safe use of paediatric formulations of DOACs and asks healthcare professionals to ensure parents and caregivers are aware of these materials. MHRA also provide further clarity on dose adjustment of DOAC medicines stratified by renal function and asks all healthcare professionals to ensure all patients with renal impairment receive an appropriate DOAC dose and ongoing renal monitoring to ensure dose remains appropriate.

[Febuxostat](#): updated advice for the treatment of patients with a history of major cardiovascular disease. This is an update of a previous MHRA advice regarding febuxostat, used for gout, and caution use in patients with a history of major cardiovascular disease. In patients with pre-existing major cardiovascular diseases, febuxostat therapy should be used cautiously, particularly in those with evidence of high urate crystal and tophi burden or those initiating urate-lowering therapy.

Traffic light changes

Drug	Date considered	Decision	Details
Domperidone	June 23	GREY consultant/ specialist initiation or recommendation	For nursing mothers to promote lactation, can be initiated or recommended by specialist, with a review at 7 days.
Glucifix Tech sensors test strips	June 23	GREEN	Blood glucose testing strips for Glucifix Tech GK meter, for category 1– Type 1 diabetics and ketosis prone type 2 diabetics.
Glucifix Tech B-Ketone Sensors Test Strips	June 23	GREEN	Ketone testing strips for Glucifix Tech GK meter, for category 1 – Type 1 diabetics and ketosis prone type 2 diabetics.
Glucject Plus lancets	June 23	GREEN	Preferred lancets for Glucifix Tech GK system.
Glucorx HCT Glucose Test Strips	June 23	GREEN	Blood glucose testing strips for Glucorx HCT meter, for category 1 – Type 1 diabetics and ketosis prone type 2 diabetics
Glucorx HCT Ketone Test Strips	June 23	GREEN	Ketone testing strips for Glucorx HCT meter, for category 1 – Type 1 diabetics and ketosis prone type 2 diabetics
Glucorx Lancets	June 23	GREEN	Preferred lancets for Glucorx HCT system.
On Call Extra Test Strips – glucose	June 23	GREEN	Blood glucose testing strips for On Call Extra Mobile meter, for category 2 – Type 2 diabetics
On Call Lancets	June 23	GREEN	Preferred lancets for On Call Extra Mobile system.
Glucorx Q Test Strips – glucose	June 23	GREEN	Blood glucose testing strips for Glucorx Q meter, for category 2 – Type 2 diabetics
Glucorx Lancets	June 23	GREEN	Preferred lancets for Glucorx Q system.
Cholera vaccine (<i>Vaxchora</i>)	June 23	RED	Active immunisation against disease caused by <i>Vibrio cholerae</i> serogroup O1 in adults and children aged ≥2 years. NHSE commissioned
Hepatitis A vaccine (<i>Avaxim Junior</i>)	June 23	RED	Active immunisation against infection caused by hepatitis A virus in children aged 1 to 15 years. NHSE commissioned
Abaloparatide (<i>Eladynos</i>)	June 23	DNP	Treatment of osteoporosis in postmenopausal women at increased risk of fracture. ICB commissioned
Risankizumab	June 23	RED	NICE TA888 - Risankizumab for previously treated moderately to severely active Crohn's disease
Ripretinib	June 23	DNP	NICE TA881 - Ripretinib for treating advanced gastrointestinal stromal tumour after 3 or more treatments. NHSE commissioned
Voclosporin	June 23	RED	NICE TA882 - Voclosporin with mycophenolate mofetil for treating lupus nephritis. NHSE commissioned
Tafasitamab	June 23	DNP	NICE TA883 - Tafasitamab with lenalidomide for treating relapsed or refractory diffuse large B-cell lymphoma. NHSE commissioned
Capmatinib	June 23	DNP	NICE TA884 - Capmatinib for treating advanced non-small-cell lung cancer with MET exon 14 skipping (terminated appraisal). NHSE commissioned
Pembrolizumab	June 23	RED	NICE TA885 - Pembrolizumab plus chemotherapy with or without bevacizumab for persistent, recurrent or metastatic cervical cancer. NHSE commissioned
Olaparib	June 23	RED	NICE TA886 - Olaparib for adjuvant treatment of BRCA mutation-positive HER2-negative high-risk early breast cancer after chemotherapy. NHSE commissioned
Olaparib	June 23	RED	NICE TA887 - Olaparib for previously treated BRCA mutation-positive hormone-relapsed metastatic prostate cancer. NHSE commissioned
Ciltacabtagene autoleucel	June 23	DNP	NICE TA889 - Ciltacabtagene autoleucel for treating relapsed or refractory multiple myeloma (Terminated Appraisal). NHSE commissioned
Difelikefalin	June 23	RED	NICE TA890 - Difelikefalin for treating pruritus in people having haemodialysis. NHSE commissioned
Ibrutinib	June 23	RED	NICE TA891 - Ibrutinib with venetoclax for untreated chronic lymphocytic leukaemia. NHSE commissioned
Mosunetuzumab	June 23	DNP	NICE TA892 - Mosunetuzumab for treating relapsed or refractory follicular lymphoma. NHSE commissioned

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.

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.

GREY*: 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.

Do Not Prescribe (DNP)*: drugs, treatments or medical devices are **not** 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:

- a. The patient requires specialist assessment before starting treatment and/ or
- b. 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:

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