

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 May's JAPC meeting

Eptinezumab for migraine: High-Cost Drug for secondary care ICB commissioned. Incorporation of eptinezumab to the commissioning algorithm for the prevention of migraine as per NICE TA871.

The following High-cost Drug, ICB commissioned algorithms have been reviewed and updated with minor amendments for 3 years:

- Sodium oxybate
- Uveitis
- Primary hypercholesterolaemia and mixed dyslipidaemia

Update for UKHSA **Hepatitis B vaccine Renal PGD**, which is RED in Derbyshire, includes reformatting, a note added regarding Engerix B® being supported for the indication and double dose by the SPC in dose and frequency section. Also included facilities for management for anaphylaxis statement in cautions section for consistency and removal of duplicate advice for individuals of side effects in the patient advice section

Actinic Keratosis: Routine review of the primary care actinic keratosis guidance, with minor changes including background prevalence and risk information updated as per Primary Care Dermatology Society (PCDS), pain/bleeding included under referral criteria in line with PCDS and references/ links updated.

Asthma management for adults and children: both guidelines have been updated with minor changes which include the number of SABA issued in a year to prompt asthma review has changed from 12 to 6, to be in line with Accelerated Access Collaborative (AAC guideline), inhaler choices have been aligned to formulary, option to step down included in the algorithm and references and all links updated.

Metoclopramide use in gastroparesis: routine review with no change to the position statement.

Oral thrush in babies and lactating women: The guideline has been updated in line with Breast Feeding Network/ CKS including advice that swabs may be useful to confirm diagnosis; and that other causes should be considered and excluded; separating surface thrush and ductal thrush in table for clarification and antibiotic regimen updated as per NICE- clarithromycin for penicillin allergy has been included.

National commissioning recommendations for blood glucose and ketone meters, testing strips and lancets

In the coming weeks, JAPC will be reviewing the NHSE commissioning recommendations for blood glucose and ketone meters, testing strips and lancets, with the view to adopting the national recommendations across Derbyshire.

The new guidance recommends 16 appliances from the 90 that are currently available, making prescribing practices simpler for healthcare professionals and providing both type 1 and type 2 patients with the best quality products, whilst driving millions of pounds in savings. A clinically led national assessment was undertaken to better understand the diabetes products available and how they meet the needs of all people living with diabetes. The intention of the national assessment includes equitable access to the same products for all eligible people, no matter where they live and support alignment prescribing practices across primary and secondary care.

Guideline Group key messages – traffic light amendments

Gabapentin & pregabalin: **GREEN** - 3rd line for neuropathic pain (previously 2nd line)

Nortriptyline: **GREY** - for use in neuropathic pain as alternative to amitriptyline if treatment effective but not tolerated. Remove requirement to trial imipramine before nortriptyline.

Metoclopramide/ domperidone oral solution have been removed from the formulary as they are expensive and infrequently used.

Opiodur is the preferred brand for fentanyl patch. Other brands previously recommended include Fencino, Matrifen and Mezolar, which may be used if Opiodur is not suitable or not available.

Onexila (once daily MR oxycodone) was classified DNP and has now been discontinued- therefore it has been removed.

Zolmitriptan has been removed from the formulary. Message added to notes- to consider orodispersible zolmitriptan in patients who cannot manage tablets. 5mg strength significantly more expensive

Neuropathic pain guideline- minor amendment post JAPC.

- Strengthen warning on tramadol- frequent interactions, adverse effects, and potential for abuse
- Link to antidepressant guideline- risk of hyponatraemia; advice on withdrawal
- Treatment pathway re-formatted incorporating PrescQIPP stepwise approach with existing prescribing advice.
- 2nd line TCA- based on cost. Current cost-effective choice is nortriptyline (previously imipramine)

Salazopyrin recommended as preferred cost-effective brand for sulfasalazine. Significant cost opportunity. Shared care guideline and formulary GI & MSK chapter updated.

Greener inhaler choice resource updated with minor change only. Patient information leaflet minor update to include message that lower carbon MDIs are lighter and may taste and feel different when used.

MHRA – Drug safety update

Isotretinoin (Roaccutane ▼): new safety measures to be introduced in the coming months, including additional oversight on initiation of treatment for patients under 18 years. HCPs are advised to continue to follow strict precautions on prescribing isotretinoin, including the conditions of the isotretinoin Pregnancy Prevention Programme, to fully inform patients about the potential risks and expected benefits.

Janus kinase (JAK) inhibitors: MHRA informs healthcare professionals of new risk minimisation measures for JAK inhibitors used to treat chronic inflammatory disorders, consistent with the measures introduced for tofacitinib (Xeljanz) in 2020, 2021. This advice affects abrocitinib (Cibinqo ▼), baricitinib (Olumiant), upadacitinib (Rinvoq ▼), and filgotinib (Jyseleca ▼) when used for chronic inflammatory disorders

Nitrofurantoin: Healthcare professionals prescribing nitrofurantoin should be alert to the risks of pulmonary and hepatic adverse drug reactions and advise patients to be vigilant for the signs and symptoms in need of further investigation.

Traffic light changes

Drug	Date considered	Decision	Details
Olaparib	May 2023	RED	For previously treated BRCA mutation-positive hormone-relapsed metastatic prostate cancer. NHSE commissioned
Ibrutinib with venetoclax	May 2023	RED	For untreated chronic lymphocytic leukemia. NHSE commissioned
Human protein C (Ceprotin)	May 2023	DNP	Use for prophylaxis and treatment of purpura fulminans, coumarin-induced skin necrosis and venous thrombotic events in patients with severe congenital protein C deficiency. Await national guidance.
Ripretinib (Qinlock)	May 2023	RED	Treatment of adults with advanced gastrointestinal stromal tumour who have received prior treatment with ≥ 3 kinase inhibitors, including imatinib. NHSE commissioned
Levomepromazine	May 2023	DNP	Suppression of psychomotor restlessness and agitation within the context of psychotic disorders, for acute agitation states in manic episodes, and as an adjunct therapy for the treatment of severe and/or chronic pain, in patients aged ≥ 16 years. Await clinician request.
Etranacogene dezaparvovec (Hemgenix)	May 2023	RED	Treatment of severe and moderately severe haemophilia B (congenital factor IX deficiency) in adults without a history of factor IX inhibitors. NHSE commissioned.
Onasemnogene abeparvovec	May 2023	RED	NICE HST24 - for treating presymptomatic spinal muscular atrophy. (Partial Review of HST15) NHSE commissioned
Lumasiran	May 2023	RED	NICE HST25 - For treating primary hyperoxaluria type 1. NHSE commissioned
Eladocogene exuparvovec	May 2023	RED	NICE HST26 - for treating aromatic L-amino acid decarboxylase deficiency. NHSE commissioned
Trastuzumab deruxtecan	May 2023	DNP	NICE TA879 - Trastuzumab deruxtecan for treating HER2-positive unresectable or metastatic gastric or gastro-oesophageal junction cancer after anti-HER2 treatment (Terminated appraisal)
Tezepelumab (Tezspire)	May 2023	RED	NICE TA880 - Tezepelumab for treating severe asthma

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:

- 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