

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

Lipid guideline updated following NICE NG238 Cardiovascular disease: risk assessment and reduction, including lipid modification (December 2023, replacing NICE guideline CG181). Key updates are the inclusion of new lipid target for secondary prevention (low-density lipoprotein (LDL) cholesterol levels of 2.0 mmol per litre or less, or non-HDL cholesterol levels of 2.6 mmol per litre or less) and MHRA drug safety alert on omega-3-esters.

## Guideline Group key messages

**Fezolinetant (Veoza)**- DNP pending national review (NICE TA expected 2024/25) and clinician request. New treatment indicated for moderate to severe vasomotor symptoms associated with menopause.

**Gelclair**- RED for the management of painful symptoms of oral mucositis caused by chemotherapy and radiotherapy.

Formulary CNS chapter- remove advice zolmitriptan orodispersible 5mg is significantly more expensive.

Glycopyrronium Bromide- for adults: Assicco added as the preferred cost-effective brand.

Beclometasone & formoterol metered dose inhalers- Bibecfo added along Luforbec as another cost-effective brand.

Medicines in short supply code of practice document updated- new title 'Working together to minimise the impact of medicines shortages' and signposting to SPS Medicines supply tool. See Other useful guideline section on MM website.

Link to SPS- calculating kidney function information page added to renal resource section on MM website.

## MHRA – Drug safety update

[Finasteride: reminder of the risk of psychiatric side effects and of sexual side effects \(which may persist after discontinuation of treatment\)](#)

- Finasteride has been associated with depression, suicidal thoughts and sexual dysfunction
- patients have reported that sexual dysfunction (including decreased libido and erectile dysfunction) has persisted even after treatment was stopped.
- before prescribing finasteride, ask patients if they have a history of depression or suicidal ideation
- advise patients to stop finasteride 1mg (Propecia) for male pattern hair loss immediately if they develop depression or suicidal thoughts and to contact their doctor as soon as possible
- advise patients prescribed finasteride 5mg (Proscar) for benign prostatic hyperplasia to consult their doctor for further medical advice as soon as possible if they develop depression or suicidal thoughts
- monitor patients for psychiatric and sexual side effects

[Montelukast: Reminder of the risk of neuropsychiatric reactions](#)

- be alert for neuropsychiatric reactions in patients taking montelukast; events have been reported in adults, adolescents, and children
- discontinue montelukast if patients experience new or worsening symptoms of neuropsychiatric reactions
- advise patients and their caregivers to carefully read the list of neuropsychiatric reactions in the Patient Information Leaflet and to seek medical advice immediately should they occur.

## Traffic light changes

Drug	Decision	Details
<b>Dostarlimab with platinum-based chemotherapy</b>	<b>RED</b>	NICE TA963 for treating advanced or recurrent endometrial cancer with high microsatellite instability or mismatch repair deficiency. NHSE commissioned.
<b>Cabozantinib with nivolumab</b>	<b>RED</b>	NICE TA964 for untreated advanced renal cell carcinoma. NHSE commissioned.
<b>Pembrolizumab with gemcitabine and cisplatin</b>	<b>DNP</b>	NICE TA966 for untreated advanced biliary tract cancer (Terminated Appraisal)
<b>Melphalan flufenamide with dexamethasone</b>	<b>DNP</b>	NICE TA968 for treating relapsed or refractory multiple myeloma. (Terminated Appraisal)
<b>Gefapixant</b>	<b>DNP</b>	NICE TA969 for treating refractory or unexplained chronic cough. (Terminated Appraisal)
<b>Selinexor with dexamethasone</b>	<b>RED</b>	SSC2641 for treating relapsed or refractory multiple myeloma after 4 or more treatments as per NHSE commissioning intentions

Tisagenlecleucel	RED	SSC2644 for treating relapsed or refractory B-cell acute lymphoblastic leukaemia in people 25 years and under (MA review of TA554) as per NHSE commissioning intentions.
Dabrafenib with trametinib	RED	SSC2649 for treating BRAF V600E mutation-positive glioma in children and young people aged 1 year and over as per NHSE commissioning intentions.
Diphtheria + tetanus + pertussis vaccine (Adacel)	Unclassified	NHSE commissioned
Zilucoplan (Zilbrysq)	RED	As per NHSE commissioning intentions

#### 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