NHS
Derby and Derbyshire
Integrated Care Board

JOINT AREA PRESCRIBING COMMITTEE (JAPC) DECISION AND JUSTIFICATION LOG

Meeting Date: 11th November 2025 **Updated by:** Policy Team

Ethical Framework

Chair to ensure that all decisions made are in line with the ICBs Ethical Framework, following examples of evidence of clinical and cost effectiveness, health care need and capacity to benefit, policy driver/strategic fit.

Declarations of Interest

Committee members are reminded of their obligation to declare any interest they may have on any issues arising at committee meetings which might conflict with the business of the ICB.
Declarations declared by members of the JAPC are listed in the Register of Interests and included with the meeting papers. The ICB's Registers of Interests are also available via the ICB's Corporate Governance Manager.

Agenda Item number	Agenda Item Title	Owner	Summary of Discussion	Decision & Justification	Action(s)
	Confirmation of Quoracy	Chair	Confirmed – Grace Gough (CRH) joined the meeting at 14:08		
1	Apologies	Chair	None		
2	Conflict of interest declarations a. Register of interests	Chair	A financial conflict of interest was noted for GP partners with item 8d Chair referred to the register for information	 Noted	
3	Declarations of any other business	Chair	None		
4	JAPC Decision & Justification Log October 2025	Emily Khatib	For ratification	Ratified	Publish on website
5	JAPC Bulletin DRAFT October 2025	All	For ratification	Ratified	Publish on website

6	JAPC Action Summary November 2025	Chair	For ratification	Ratified	
7	JAPC Local Horizon Scan and Planning	Emily Khatib	No update this month		
8	Traffic Light Classification Changes and Additions				
	a. NICE Template October 2025	Emily Khatib	Update as per below in line with NICE TAs: **TA937:** (update) Targeted-release budesonide for treating primary IgA nephropathy. No change to TLC **TA1074:** (update) Sparsentan for treating primary IgA nephropathy. No change to TLC **TA1099:** Durvalumab for treating limited-stage small-cell lung cancer after platinum-based chemoradiotherapy. Already **RED**, add TA1099 **TA1100:** (terminated appraisal) Mirabegron for treating neurogenic detrusor overactivity in people 3 to 17 years. Add **DNP** for TA1100 **TA1101**: Garadacimab for preventing recurrent attacks of hereditary angioedema in people 12 years and over. Classify **RED** **TA1102:** Iptacopan for treating complement 3 glomerulopathy. Classify **DNP** **TA1103**: (Updates and replaces TA909) Lorlatinib for ALK-positive advanced non-small-cell lung cancer that has not been treated with an ALK inhibitor **TA1104:** (terminated appraisal) Sarilumab for treating polyarticular or oligoarticular juvenile idiopathic arthritis in people 2 to 17 years. Add **DNP** for TA1104	Agreed	Update on website

			TA1105: (terminated appraisal) Clascoterone for treating acne vulgaris in people 12 years and over. Classify **DNP**		
	b. SPS Monthly Horizon Scan September 2025	Emily Khatib	Each month SPS publishes its new drugs monthly newsletter. This agenda item is for JAPC to acknowledge new drug launches and to agree or comment upon the suggested actions. **TLC:** Levodopa (Inbrija) 33mg capsule for inhalation. Classify **DNP**, **await clinician request**	Agreed	Update on website
	c. Methotrexate sub-cutaneous injection	Emily Khatib	As a result of the local horizon scan process, a proposal has been made to align management of methotrexate in South Derbyshire with that in North Derbyshire to provide equitable care. Methotrexate injections are currently managed under shared care in North Derbyshire with GPs undertaking prescribing, monitoring and disposal of cytotoxic sharps bins. In South Derbyshire it is classified RED with prescribing, monitoring and management of cytotoxic bins being undertaken by the hospital. Dispensing is provided by Pride Pharmacy. Cluster ICBs Lincoln and Nottingham & Nottinghamshire currently classify methotrexate injections as RED and manage via homecare. JAPC members discussed the financial considerations and the need for costing models, comparing the GP LES (Local Enhanced Service) with hospital/homecare management. Therefore, it was agreed to discuss this change again at a future JAPC meeting with further information.	Further information to be presented at a future meeting	

			Should this change be approved at a later date, this would be subject to a clear implementation plan and adequate lead-in time for GP practices.		
	d. Lokelma (sodium zirconium cyclosilicate)	Emily Khatib	Lokelma is currently classified RED for the management of chronic persistent hyperkalaemia, as per NICE TA599. Re-classification was previously discussed at the August 2025 JAPC meeting where an AMBER (shared care) classification was proposed pending a shared care agreement. Lokelma has been used in UHDB by the renal and cardiology departments successfully for over 3 years. Most patients on maintenance Lokelma are seen in secondary care every 3-4 months. The proposal to move to shared care, enabling continuing prescribing of Lokelma in primary care, would potentially reduce the need for stable patients to attend frequent specialist follow-up appointments in secondary care. The shared care agreement was approved at the October Guideline Group meeting, subject to clarification of consultant monitoring responsibilities prior to patients being considered stable and suitable for transfer to share care. This update was included in the presented share care agreement. In advance of the meeting, comments were received from LMC Chair and MD Dr Ben Milton stating that more work needs to be done to understand the impact of this work on General Practice and ensure the activity is funded properly either by first completing the shared care LES review or by recommending that an additional LES is considered for this drug.	Further information on the outcome of discussions with the LMC to be presented at a future meeting.	

			The committee agreed that further engagement with the LMC was required on this prior to agreement.		
9	Clinical and Shared Care Guidelines		None this month		
10	PGDs		None this month		
11	Subgroups of JAPC				
	Guideline Group a. Traffic Light Changes	Emily Khatib	DNP classification for **Fluoride dental products** was changed to GREY specialist recommendation, ONLY for patients who are undergoing radiotherapy to the head and neck region not registered with an NHS dentist. On recommendation of oncology/radiology. **EURneffy** (adrenaline single-use spray) classified DNP (awaiting clinician request). **Neomycin/chlorhexidine** nasal cream classified GREEN. **Beclometasone 50mcg/dose** nasal spray and **Budesonide 64mcg/dose** nasal spray were removed from the formulary as no longer recommended in local guidelines.	Noted	
	b. Guideline Updates		**Formulary Chapter 1 – ENT** **Information added:** Encouragement of self-care with Earcalm spray. MHRA alert regarding aminoglycosides (2021). Advice for treatment failure and recurrent acute otitis media, with NICE CKS link. Directions for prednisolone or betamethasone use in chronic otitis externa without infection. Pharmacy First referral information for children with acute otitis media.	Noted	

			Immediate antibiotic prescription guidance for high-risk patients with acute otitis media. Neilmed sinus rinse noted as OTC only, with link to homemade solution instructions. Updated peanut allergy warning for nasal preparations. Correct use guidance for topical treatments for oral candidiasis. Prescribing information for fluoride dental products and link to BNF dental formulary. **Traffic Light Changes/Inclusions:** Olive oil and sodium bicarbonate 5% ear drops classified as GREY. Mometasone and fluticasone furoate nasal sprays are GREEN. Betamethasone 0.1% nasal drops as step 2 in chronic rhinosinusitis pathway. Gentamicin, gentamicin/hydrocortisone, and flumetasone/clioquinol ear drops listed as GREY. Reference to Avamys, Dymista, and Ryaltris brands removed; now prescribed generically for cost-effectiveness. Reference to Bactroban brand removed (discontinued); generic mupirocin available. **Clinical guidelines (minor updates) & website changes** Updates to the **antidepressant guideline** include removal of the table from the hyponatraemia risk section as non-exhaustive and lists classes of antidepressants, within which all have different risks. Depression with anxiety and psychotic depression sections added. Esketamine added to reflect prescribing position. Citalopram information removed as QT prolongation risk is not limited to citalopram. QT risk section added with reference links.		

			Updates to the **overactive bladder guideline** include the addition of gender-specific assessments in the 'initial assessment' section of flow chart on page 2, criteria for referral to urology/urogynaecology added and link to Derbyshire Shared Care Pathology Guideline on haematuria also added. Information on self-referral to adult continence services added with link to DCHS website for PILs and other useful resources. Vagirux brand of estradiol vaginal tablets changed to generic as brand discontinued. The order of drugs in the comparison table (page 7) amended due to price changes. Trospium MR tablets are now the most expensive treatment option. Blerone XL brand of tolterodine MR capsules has been discontinued. This should now be prescribed generically. In lieu of a full update to the local **adult asthma guideline**, amendments have been made to bring advice more in line with NICE NG245 until a full review can be undertaken. This includes replacement of the previous treatment algorithm with a link to the local Adult Asthma Treatment Algorithm (NICE 2024 update), removal of reference to ICS monotherapy in the stepping down criteria and removal of information on LAMA use in asthma, both replaced with link to the updated algorithm. A link to Asthma + Lung UK has been added for information on treating acute asthma attacks in people following AIR or MART regimes. MHRA alert (April 2025) added re risks of SABA overuse in asthma. The **shared care agreements for naltrexone, disulfiram and acamprosate** for the maintenance of alcohol abstinence have been reviewed with no changes to clinical information. Reference to RMOC SCAs removed from all.		

			The **position statement for self-care with vitamin D** has been reviewed. Recommended doses have been clarified in line with the BNF & a link to the NHS Healthy Start website has been added. The **patient information leaflet for use of unlicensed medicines** has been reviewed with no changes. From 1st October 2025 restrictions on the prescribing of generic tadalafil & vardenafil for erectile dysfunction (ED) have been lifted meaning that generically written prescriptions for tadalafil & vardenafil no longer require the annotation "SLS". Traffic light classifications remain GREY & DNP depending on the preparation. Levitra brand of vardenafil has been discontinued in the UK (there is a parallel import) so does not need a TLC. The oro-dispersible vardenafil has also been discontinued so has been removed from the website. Allergic rhinitis guideline minor updates: steroid nasal spray prices updated, fluticasone/azelastine made first-choice combination nasal spray, reference to nasal spray brands removed (Avamys, Dymista, Ryaltris) as now cost-effective to prescribe generically Chronic rhinosinusitis guideline minor updates: mometasone nasal spray price updated, reference to Avamys brand of fluticasone furoate nasal spray removed A link to SPS information on supporting safe use of adrenal crisis emergency management kits has been added to the endocrine chapter page. Local (CCG) resource for adrenal crisis in adults removed and link to		

			SPS / Society for Endocrinology advice also removed as no longer hosted by SPS Patient information leaflets for Atrial Fibrillation, Lowering Cholesterol to Reduce the risk of Coronary Heart Disease and Stroke and Non-vitamin K Antagonist Oral Anticoagulation (NOAC) have been removed from the website as they duplicated other patient resources that are more up to date & accessible from primary care clinical systems. Localised ADHD medication shortage resources have been removed from the website leaving only a link to SPS as this is the most up-to-date and reliable source of information Mention of gentamicin nebule preparation removed from the TLC page as nebules are not available. **Clinical guidelines retired** • COPD Detailing Aid • UTI in CKD		

<table>
<tr><td>12</td><td>High-cost drug (HCD) working group
a. Biosimilar Uptake Reporting</td><td>Alison Muir</td><td>
<table>
<tr><td colspan="6">Monthly uptake for all Ustekinumab</td></tr>
<tr><td>Trust</td><td>Drug</td><td>Aug-25</td><td>Sep-25</td><td>Oct-25</td><td>Nov-25</td></tr>
<tr><td>CRH</td><td>Ustekinumab (Wezenla)
Cumulative % uptake</td><td>completed</td><td>completed</td><td>all switched & at target</td><td>completed</td></tr>
<tr><td>UHDB</td><td>Ustekinumab (Pyzchiva)
Cumulative % uptake</td><td></td><td>Non UC=83%
UC=76% pen=go live 15/9/25 awaiting data</td><td></td><td>Non UC=85%
UC=71%
Pen 31%</td></tr>
<tr><td colspan="6">Monthly uptake for all Adalimumab</td></tr>
<tr><td>CRH</td><td>Adalimumab (Yuflyma)
Cumulative % uptake</td><td>completed</td><td>completed</td><td>all switched & at target</td><td>completed</td></tr>
<tr><td>UHDB</td><td>Adalimumab (Yuflyma)
Cumulative % uptake</td><td></td><td>Derm=79% gastro 76% Rheum 56%</td><td></td><td>Derm=84%
gastro 80%
Rheum 59%
ongoing</td></tr>
<tr><td colspan="6">Monthly uptake for all Tocilizumab</td></tr>
<tr><td>CRH</td><td>Tocilizumab (Tyenne biosimilar)
Cumulative % uptake</td><td>completed</td><td>completed</td><td>completed</td><td>completed</td></tr>
<tr><td>UHDB</td><td>Tocilizumab (Tyenne biosimilar)
Cumulative % uptake</td><td></td><td>91%</td><td></td><td>91%</td></tr>
</table>
</td><td>Noted</td><td></td></tr>
<tr><td></td><td>b. HCD working group decisions</td><td>Alison Muir</td><td>

The HCD treatment algorithm for Ankylosing spondylitis has been updated to include the standard abbreviations for ankylosing spondylitis (AS) and non-radiographic axial spondyloarthritis (nr-axSpA), the treatment arms have also been swapped round so that they match the columns in the table below. No clinical information has been changed.
NICE updated the units of measurement for urine protein-to-creatinine ratio to mg/mmol from g/g on both TA1074 Sparsentan for treating primary IgA nephropathy and TA937 Targeted-release budesonide for treating primary IgA nephropathy. We do not have HCD treatment algorithms for this indication, but the Blueteq system forms have been updated.

</td><td>Noted</td><td></td></tr>
<tr><td>13</td><td>Miscellaneous</td><td></td><td>None this month</td><td></td><td></td></tr>
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FOR INFORMATION AND REPORT BY EXCEPTION					
14	a. MHRA Drug Safety Roundup October 2025	Chair	For information	Noted	
15	Specialised circulars		For information	Noted	
16	MORAG		No update this month		
17	Minutes of other prescribing committees a. CRH D&T Minutes September 2025 b. DHcFT Minutes (draft) September 2025	Emily Khatib	For information	Noted	
	AOB		None		

Date of Next meeting: Tuesday 9th December 2025