

North Yorkshire & York Area Prescribing Committee

Summary of decisions made regarding new product requests considered at a meeting of the Committee on the 6th July 2022

Classification of products:

- G** **Green drug** - Can be initiated and prescribed in all care settings **○**- Second line / alternative green drug
- ASR** **Amber Specialist Recommendation drug** - Can be recommended by a specialist for initiation in primary care
- ASI** **Amber Specialist Initiation drug** – Initiated by a specialist and transferred to primary care once the patient stabilised. In some cases there may be a further restriction for use outlined - these will be defined in each case.
- ASC** **Amber Shared Care drug** - These are specialist drugs which must be initiated by the specialist, but with the potential to transfer to primary care within written and agreed shared care protocols and according to the agreed process for transfer of care
- R** **Red drug** - Drugs that should remain under the total responsibility of the specialist. Usually considered as “hospital only” drugs
- BLACK Not Approved** - Drugs that have been considered by the APC or other approved body and are not approved for prescribing within North Yorkshire & York.
- GREY Not Reviewed** - Drugs that haven't been reviewed by the APC yet. This usually means that no application has been received or that an application is in progress. These drugs are not normally considered appropriate for prescribing in North Yorkshire & York.



Product	Decision			Comments/notes
	Approved	Refused	Deferred	
1) Requests deferred from previous meetings				
Nil				
2) New Requests				
Fluorouracil (Efudix®) and imiquimod cream for Bowen's Disease	✓			Decision: approved as reflects current prescribing practice. Changes approved as follows: <ul style="list-style-type: none"> Fluorouracil 5% cream (Efudix) as GREEN on formulary for Bowen's disease (NY+Y formularies) keratosis Imiquimod 5% cream (Aldara) as AMBER SR for Bowen's disease (NY+Y formularies) – unlicensed Imiquimod 5% cream (Aldara) as AMBER SR for Actinic keratosis and basal cell carcinoma (for Harrogate formulary – formulary alignment) Imiquimod 5% cream (Aldara) as RED for genital warts (for Harrogate formulary – formulary alignment)
OTIGO ear drops	✓ G			Decision: approved as per Otitis media (acute): antimicrobial prescribing NICE guideline [NG91]

DECISION SUMMARY

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	Approved	Refused	Deferred	
Estradiol transdermal spray (Lenzetto®)	✓ G			Decision: Lenzetto transdermal spray formulation was approved as an alternative transdermal treatment option in patients who are unable to comply with the instructions for use of other topical HRT products on the formulary (such as patches or gels) or experience adverse formulation reactions from other topical HRT preparations, such as local irritation.
Drugs for POTS (ivabradine, fludrocortisone, desmopressin, midodrine, pyridostigmine)			✓	Decision: decision deferred to seek views of ICB Clinical Network and confirm current commissioning arrangements for POTS clinic at York & Scarborough Trust.
3) New formulations & extensions to use				
Nil this month				
5) Products considered by NICE				
TA783: Daratumumab monotherapy for treating relapsed and refractory multiple myeloma	✓ R			The formulary will reflect the TAG – NHS England is the responsible commissioner.
TA784: Niraparib for maintenance treatment of relapsed, platinum-sensitive ovarian, fallopian tube and peritoneal cancer	✓ R			The formulary will reflect the TAG – NHS England is the responsible commissioner.
TA785: Nivolumab with cabozantinib for untreated advanced renal cell carcinoma (terminated appraisal)	✓ BLACK for this indication			The formulary will reflect the TAG – NHS England is the responsible commissioner.
TA786: Tucatinib with trastuzumab and capecitabine for treating HER2-positive advanced breast cancer after 2 or more anti-HER2 therapies	✓ R			The formulary will reflect the TAG – NHS England is the responsible commissioner.
TA787: Venetoclax with low dose cytarabine for untreated acute myeloid leukaemia when intensive chemotherapy is unsuitable	✓ R			The formulary will reflect the TAG – NHS England is the responsible commissioner.

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HST19: Elosulfase alfa for treating mucopolysaccharidosis type 4A	✓ R			The formulary will reflect the TAG – NHS England is the responsible commissioner.
TA788: Avelumab for maintenance treatment of locally advanced or metastatic urothelial cancer after platinum-based chemotherapy	✓ R			The formulary will reflect the TAG – NHS England is the responsible commissioner.
TA789: Tepotinib for treating advanced non-small-cell lung cancer with MET gene alterations	✓ R			The formulary will reflect the TAG – NHS England is the responsible commissioner.
TA791: Romosozumab for treating severe osteoporosis			✓	
HST20: Selumetinib for treating symptomatic and inoperable plexiform neurofibromas associated with type 1 neurofibromatosis in children aged 3 and over	✓ R			The formulary will reflect the TAG – NHS England is the responsible commissioner.
6) Appeals against earlier decisions by the APC				
None				
7) Miscellaneous formulary decisions by the APC				
Lyxumia® (lixisenatide) - Discontinuation of Treatment Initiation Pack and 10 micrograms Solution	✓			Decision: To remove lixisenatide from formulary for new patients. To remain on the formulary for existing patients only.

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RAG status of phosphate binders - Sucroferric, sevelemer and lanthanum	 ASC			<p>Decision: formulary should be brought in line with that of neighbouring Trusts and the RED status phosphate binders should be changed to AMBER SC.</p> <p>This would apply to all patients who currently have their other medication prescribed by the GP:</p> <ul style="list-style-type: none"> • non- dialysis patients • patients on continuous ambulatory peritoneal dialysis (CAPD) - at home • a minority of patients on haemodialysis (the majority have all medication supplied by the renal team and this is collected when they attend for their dialysis sessions. The RAG status would remain RED for this group)
Eye Chapter Formulary Alignment				

The following guidelines were presented to and approved at the July 2022 meeting of the APC:

- TEWV Prescribing drugs with potential to prolong QTc interval
- Type 2 diabetes guidance incorporating earlier place in therapy of SGLT2 inhibitors

The following shared care guidelines were presented to and received for information at the July 2022 meeting of the APC:

- Nil this month.

Other documents presented to and approved at the July 2022 meeting of the APC:

- NY&Y APC Annual Report 2021-22
- North Yorkshire and York APC – Updated Terms of Reference and Scheme of Delegation