# North Yorkshire & York Area Prescribing Committee

Summary of decisions made regarding new product requests considered at a meeting of the Committee on the 2nd November 2022

## Classification of products:

G **Green drug** - Can be initiated and prescribed in all care settings O- 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 have not 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 meeting** | | | | |
| **Diazoxide for Chronic Intractable hypoglycaemia** | ✓ ASC | | ✓ | **Decision:** approved as AMBER SC drug following feedback from clinicians. Shared Care Guideline in development. |
| **TA807: Roxadustat for treating symptomatic anaemia in chronic kidney disease** | ✓ R | | | **Decision:** the formulary will reflect the TAG – ICS is the responsible commissioner. Local uptake expected to be low. |
| **2) New Requests** | | | | |
| **Glucagon prefilled pen (Ogluo®)** | | ✓ | | Requested for treatment of severe hypoglycaemia in children aged 2 years and over with diabetes mellitus. To be used in childrens services only.<br><br>**Decision:** application refused on basis of significant cost difference over current Glucagen® product and no defined cohort of patients who been benefit the most presented in the application. |
| **Hydrocortisone MR (Efomdy®)** | | | ✓ | Requested for treatment of Congenital Adrenal Hyperplasia (CAH) in adolescents aged 12 years and over and adults.<br><br>Decision deferred to fully appraise evidence around diurnal variation and steroid sparing effect. |

| Product | Decision | | | Comments/notes |
|---|---|---|---|---|
| | Approved | Refused | Deferred | |
| **3) New formulations & extensions to use** | | | | |
| **Nil this month** | | | | |
| **5) Products considered by NICE** | | | | |
| **TA822: Melphalan for haematological diseases before allogeneic haematopoietic stem cell transplant (terminated appraisal)** | ✓ BLACK for this indication | | | The formulary will reflect the TAG – NHS England is the responsible commissioner. |
| **TA823: Atezolizumab for adjuvant treatment of resected non-small-cell lung cancer** | ✓ R | | | The formulary will reflect the TAG – NHS England is the responsible commissioner. |
| **TA824: Dexamethasone intravitreal implant for treating diabetic macular oedema** | ✓ R | | | The formulary will reflect the TAG – ICS is the responsible commissioner. |
| **TA825: Avacopan for treating severe active granulomatosis with polyangiitis or microscopic polyangiitis** | ✓ R | | | The formulary will reflect the TAG – NHS England is the responsible commissioner. |
| **TA826: Vedolizumab for treating chronic refractory pouchitis after surgery for ulcerative colitis (terminated appraisal)** | ✓ BLACK for this indication | | | The formulary will reflect the TAG – ICS is the responsible commissioner. |
| **TA827 and TA828 were not published in September 2022** | | | | |
| **TA829: Upadacitinib for treating active ankylosing spondylitis** | ✓ R | | | The formulary will reflect the TAG – ICS is the responsible commissioner. |
| **6) Appeals against earlier decisions by the APC** | | | | |
| None | | | | |

| Product | Decision | | | Comments/notes |
|---|---|---|---|---|
| | Approved | Refused | Deferred | |
| **7) Miscellaneous formulary decisions by the APC** | | | | |
| **Rituximab for the treatment in acute Thrombotic Thrombocytopenic Purpura (TTP) and elective therapy to prevent TTP relapse** | ✓ R | | | **Decision:** The formulary will reflect the national commissioning policy – NHS England is the responsible commissioner. |
| **Freestyle Libre 1 discontinuation Dec 2022** | ✓ | | | **Decision:** to remove from formulary as FSL1 being discontinued. FSL2 to remain on the formulary. |

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

- NY&Y APC Biologics Pathway for Axial Spondyloarthritis (Ankylosing Spondylitis) & Non-Radiographic Axial Spondyloarthritis – updated
- NY&Y Guidance for families and carers of palliative patients who may be at risk of bleeding
- NY&Y Lipid Pathway

The following guidelines were presented to and recommended for approval to the HNY IMOC at the November 2022 meeting of the APC:

- Nil this month.

The following shared care guidelines were presented to and approved at the November 2022 meeting of the APC:

- Lanthanum
- Sevelamer

The following documents were presented to and approved at the November 2022 meeting of the APC:

- Nil this month.