

## North Yorkshire & York Area Prescribing Committee

Summary of decisions made regarding new product requests considered at a meeting of the Committee on the 7<sup>th</sup> December 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 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.

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Product	Decision			Comments/notes
	Approved	Refused	Deferred	
<b>1) Requests deferred from previous meeting</b>				
<b>Hydrocortisone MR (Efomdy®)</b>	✓ <b>ASI</b>			<p>Requested for treatment of Congenital Adrenal Hyperplasia (CAH) in adolescents aged 12 years and over and adults.</p> <p><b>Decision:</b> approved as AMBER Specialist Initiation drug as follows:</p> <ul style="list-style-type: none"> <li>in adolescents, it is second line to normal HC as not recommended to use prednisolone in this age group. Would be under guidance of specialist- likely in those with poor control or compliance issues.</li> <li>In adults with CAH would use hydrocortisone first line, if patients are unwell on this then tend to try prednisolone. If patients have poor control or develop adrenal rests - tend to try them on BD prednisolone eg 5 mg in the morning and 1mg in the evening (to try and avoid the morning ACTH surge). Efomody could be used in specialist cases of CAH after discussion at endocrine MDT- particularly in patients with poor control who have not done well on prednisolone or who are struggling with adrenal rests or fertility issues.</li> </ul>

DECISION SUMMARY

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	Approved	Refused	Deferred	
<b>2) New Requests</b>				
<b>5-aminolaevulinic acid (5-ALA) (Alacare®)</b>	✓ R			<b>Decision:</b> approved as a single use treatment of mild actinic keratosis lesions with a maximum diameter of 1.8cm on the face and scalp (hairless areas). Photosensitiser for photodynamic therapy on anatomical sites where current method of application (Metvix) is difficult to apply and secure, potentially reducing delivery and efficacy.
<b>Tostran® gel for delayed puberty</b>	✓ ASI			Delayed puberty in boys (unlicensed indication) – Tostran is not indicated for use in children and has not been clinically evaluated in males under 18 years of age. Included for this indication in BSPED Guideline: Testosterone Therapy in Infancy and Adolescence Jan 2018.  <b>Decision:</b> approved for use as an alternative to injection if patients do not wish to have injections / needle phobic patients. For 4 months treatment duration then review. Further treatment course may be required
<b>3) New formulations &amp; extensions to use</b>				
<b>Nil this month</b>				
<b>5) Products considered by NICE</b>				
<b>TA827: Oral azacitidine for maintenance treatment of acute myeloid leukaemia after induction therapy</b>	✓ R			The formulary will reflect the TAG – NHS England is the responsible commissioner.
<b>TA828: Ozanimod for treating moderately to severely active ulcerative colitis</b>	✓ R			The formulary will reflect the TAG – ICS is the responsible commissioner.
<b>TA830: Pembrolizumab for adjuvant treatment of renal cell carcinoma Commissioning: NHSE</b>	✓ R			The formulary will reflect the TAG – NHS England is the responsible commissioner.
<b>TA831: Olaparib for previously treated BRCA mutation-positive hormone-relapsed metastatic prostate cancer</b>	✓ BLACK for this indication			The formulary will reflect the TAG – NHS England is the responsible commissioner.

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	Approved	Refused	Deferred	
<b>TA832: Relugolix–estradiol–norethisterone acetate for treating moderate to severe symptoms of uterine fibroids</b>	✓ <b>ASI</b>			The formulary will reflect the TAG – ICS is the responsible commissioner.
<b>TA833: Zanubrutinib for treating Waldenstrom’s macroglobulinaemia</b>	✓ <b>R</b>			The formulary will reflect the TAG – NHS England is the responsible commissioner.
<b>TA834: SQ HDM SLIT for treating allergic rhinitis and allergic asthma caused by house dust mites (terminated appraisal)</b>	✓			The formulary will reflect the TAG – ICS is the responsible commissioner.
<b>TA835: Fostamatinib for treating refractory chronic immune thrombocytopenia</b>	✓ <b>R</b>			The formulary will reflect the TAG – ICS is the responsible commissioner. Subject to IMOC sign off as above financial threshold of APC for decision making.
<b>TA836: Palbociclib with fulvestrant for treating hormone receptor-positive, HER2-negative advanced breast cancer after endocrine therapy</b>	✓ <b>R</b>			The formulary will reflect the TAG – NHS England is the responsible commissioner.
<b>TA837: Pembrolizumab for adjuvant treatment of resected stage 2B or 2C melanoma</b>	✓ <b>R</b>			The formulary will reflect the TAG – NHS England is the responsible commissioner.
<b>6) Appeals against earlier decisions by the APC</b>				
None				
<b>7) Miscellaneous formulary decisions by the APC</b>				
Nil this month				

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

- NY&Y Biologics Pathway for severe active Crohn’s & moderate to severe Ulcerative Colitis
- Guideline for the administration of subcutaneous furosemide (North Yorkshire, York and Vale)

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

- Nil this month.

#### DECISION SUMMARY

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

- Nil this month

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

- Nil this month.