

North Yorkshire & York Area Prescribing Committee

Summary of decisions made regarding new product requests considered at a meeting of the Committee on the 7th February 2024

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				
None				
2) New Requests				
Riluzole orodispersible tablets	✓ ASC			Decision: Standard tablets remain the formulation of choice in those who can safely swallow them. The orodispersible tablets would be an alternative option to oral liquid for those patients with swallowing difficulties unable to take tablets (whole or crushed). Not for enteral feeding tube administration.
Colesevelam for pruritis with cholestatic liver disease	✓ ASI			Decision: approved as 2 nd line option after cholestyramine. Colesevelam is another anion binding resin with a seven fold higher bile acid binding capacity than colestyramine. Colesevelam is thought to be better tolerated than colestyramine which often causes bloating, constipation and abdominal discomfort. Colesevelam is much simpler and pleasant to take as it is a tablet formulation, compared to a unpleasant insoluble powder/drink. To be initiated in liver clinic for 2 month trial before transfer to GPs if tolerated and effective.
3) New formulations & extensions to use				
None				

DECISION SUMMARY

Product	Decision			Comments/notes
	Approved	Refused	Deferred	
5) Products considered by NICE				
TA935: Secukinumab for treating moderate to severe hidradenitis suppurativa	✓ R			The formulary will reflect the TAG – NHS England is the responsible commissioner.
TA937: Targeted-release budesonide for treating primary IgA nephropathy	✓ R			The formulary will reflect the TAG – ICB is the responsible commissioner.
TA938: Dupilumab for treating eosinophilic oesophagitis in people 12 years and over (terminated appraisal)				The formulary will reflect the TAG – NHS England is the responsible commissioner. Received for information.
TA939: Pembrolizumab plus chemotherapy with or without bevacizumab for persistent, recurrent or metastatic cervical cancer	✓ R			The formulary will reflect the TAG – NHS England is the responsible commissioner.
TA940: Ravulizumab for treating generalised myasthenia gravis (terminated appraisal)				The formulary will reflect the TAG – NHS England is the responsible commissioner. Received for information.
TA941: Ravulizumab for treating AQP4 antibody-positive neuromyelitis optica spectrum disorder (terminated appraisal)				The formulary will reflect the TAG – NHS England is the responsible commissioner. Received for information.
TA942: Empagliflozin for treating chronic kidney disease	✓ G			The formulary will reflect the TAG – ICB is the responsible commissioner.
6) Appeals against earlier decisions by the APC				
None				
7) Miscellaneous formulary decisions by the APC				
Bowel screening LMWH bridging therapy	✓ R			Decision: agreed that as with all other LMWH bridging therapy responsibility for prescribing rests with secondary care.

DECISION SUMMARY

The following documents/guidelines were presented to and approved at the February 2024 meeting of the APC:

- HDFT Osteoporosis Guidelines – Full version and Flow chart – update – approved for use across NY&Y.

The following guidelines were presented to and recommended for approval to the HNY IPMOC at the February 2024 meeting of the APC:

- Y&H A Guide to Symptom Management in Palliative Care – subject to confirmation that all involved in palliative care in NY&Y have been consulted.

The following shared care guidelines were presented to and approved at the February 2024 meeting of the APC:

- Riluzole shared care (updated)

The following documents/guidelines were presented to the February 2024 meeting of the APC for comment:

- HNY DOAC proposal