

North Yorkshire & York Area Prescribing Committee

Wednesday 3rd April 2024
2pm – 2.49pm, virtual meeting via Microsoft Teams

Present

Name	Job Title	Organisation	Voting Member	Oct 2023	Dec 2023	Feb 2024	Mar 2024	Apr 2024
Ken Latta	Head of Medicines Optimisation	North Yorkshire Place	Y	Y	Y	Y	Y	Rachel Ainger
Dr Tim Rider	GP Prescribing Lead	North Yorkshire Place	Y	Y	Y	Y	Y	Y
Chris Ranson	Lead Medicines Management Pharmacist: Commissioning and Formulary – NY&Y	City of York Place	Y	Y	Y	Y	Y	Y
Dr William Ovenden	GP	City of York Place	Y	Y	Y	Y	Y	Y
Kate Woodrow	Chief Pharmacist	Harrogate and District NHS Foundation Trust	Y	Sara Moore	Apols	Y	Y	Sara Moore
Dr Joanna Cunnington (from Sep 2023)	Consultant and D&T Chair	Harrogate and District NHS Foundation Trust	Y	Y	Y	Y	Y	Y
Stuart Parkes	Chief Pharmacist	York & Scarborough Teaching Hospitals NHS Foundation Trust	Y	Y	Y	Y	Y	Y
Dr Chris Hayes	Consultant and D&T Chair	York & Scarborough Teaching Hospitals NHS Foundation Trust	Y	X	X	Y	From 2.50pm	Apols
Tracy Percival	Formulary Pharmacist	South Tees Hospitals NHS Foundation Trust	Y	Apols	Y	Apols	Y	Y
Richard Morris	Deputy Chief Pharmacist	Tees, Esk and Wear Valleys NHS Foundation Trust	Y	From 3.30pm	Until 3.08pm	Apols	Y	Chris Williams
Angela Hall	Public Health representative	North Yorkshire County Council	Y	Kurt Ramsden	Kurt Ramsden	Apols	Kurt Ramsden	Kurt Ramsden
Alison Levin	Finance representative	North Yorkshire Place	Y	Jo Horsfall	Jo Horsfall	Jo Horsfall	Apols	Apols
Hazel Mitford	Lay/patient representative		Y	Y	X	Y	Y	Apols
Gavin Mankin (Professional Secretary)	Principal Pharmacist Medicines Management	Regional Drug & Therapeutics Centre, Newcastle	N	Y	Y	Y	Y	Y
Laura Angus	Chief Pharmacist at Humber, & North Yorkshire ICS	HNY ICM	N	From 3.25pm	From 3.36pm	From 3.15pm	From 3.05pm	X
Faisal Majothi	Medicines Optimisation Pharmacist	City of York Place	N	Y	Y	Y	Y	Y
Jane Crewe	Formulary Pharmacist	York & Scarborough Teaching Hospitals NHS Foundation Trust	N	Y	Y	Y	Y	Apols
Sara Abbas-Llewelyn	Formulary Pharmacist	Harrogate and District NHS Foundation Trust	N	Apols	Apols	Apols	Apols	Apols
Ian Dean	LPC Representative		N	Apols	Y	Y	Apols	Apols
Dr Jane Raja	LMC Representative		N	Y	Y	Y	Y	Y
Sara Moore	Deputy Chief Pharmacist	Harrogate and District NHS Foundation Trust	N	Y	Apols	Apols	From 3.15pm	Y

The meeting was quorate with 10 out of 13 currently appointed voting members (or their deputies) in attendance and present throughout.

APC members and attendees were reminded to keep detailed discussions confidential to allow free and full debate to inform unencumbered decision-making. Discretion should be used when discussing meetings with non-attendees, and papers should not be shared without agreement of the chair or professional secretary, to ensure confidentiality is maintained.

The meeting was chaired by Tim Rider.

Part 1

1. **Apologies for absence and quoracy check**

Sara Abbas-Llewelyn, Ian Dean, Jane Crewe, Kate Woodrow, Ken Latta, Chris Hayes, Richard Morris, Jo Horsfall, Hazel Mifford

The meeting was quorate.

2. **Declarations of interest**

Declarations of interest:

The Chair reminded subgroup members of their obligation to declare any interest they may have on any issue arising at committee meetings which might conflict with the business of the APC.

Declarations declared by members of the APC are listed in the APC's Register of Interests. The Register is available via the professional secretary.

Declarations of interest from today's meeting:

CR – Item 12 – family member currently being treated for wAMD so secluded himself from decision making regarding aflibercept.

SP – Item 12 – noted interests from YSFT Ophthalmology declared on cover sheet for aflibercept and agreed no action required.

3. **Minutes of previous APC & decision summary of meeting held on 6th March 2024**

The minutes of the March 2024 APC were approved as a true and accurate record.

4. **Outcome of items referred to September and October 2023 IPMOC**

- TA937: Targeted-release budesonide for treating primary IgA nephropathy – *still awaiting ICB Executive sign off. Also awaiting confirmation that will be a tariff excluded drug.*
- TA942: Empagliflozin for treating chronic kidney disease– *still awaiting ICB Executive sign off.*
- Tirbanibulin ointment: *IPMOC requested review of application by Humber APC, outcome data of NY&Y audit on first 6 months of use, and updated local costings.*
- NY&Y Iron deficiency pathway and Ferric Maltol: *IPMOC requested review by Humber APC.*

5. **Matters arising not on the agenda & declarations of AOB**

Humber and North Yorkshire Integrated Care System - One System Formulary

APC noted the letter sent to all NY&Y and Humber APCs on the 12th March 2024 regarding this proposal. Members were asked to complete an online form to feedback on their thoughts on one Humber and North Yorkshire system wide formulary. The form will remain open for consultation until Tuesday 2nd April 2024, then ICB will pull the feedback together in one report.

6. **Action log**

Y&H A Guide to Symptom Management in Palliative Care

LA still to confirm IPMOC happy to approve and communicate IPMOC decision to Y&H Palliative

Care Network so that they can disseminate final approved version of guideline. Was included in the APC decision summary to IPMOC in March 2024.

TA902: Dapagliflozin for treating chronic heart failure with preserved or mildly reduced ejection fraction.

NY&Y updated heart failure pathway on today's agenda for approval.

Subcutaneous sodium valproate in palliative care

SP still to do a second clinical of guideline to support subcutaneous sodium valproate in palliative care so that it can be presented for approval at May 2024 NY&Y APC.

NY&Y Iron deficiency pathway

Awaiting approval by IPMOC. Whilst not a financial concern this also demonstrated variation in approach across HNY geographies. The NY&Y Iron Deficiency Pathway had not yet been discussed at Humber APC which would enable consideration of ferric maltol and RAG status. LA agreed to take to Humber APC for discussion.

HNY ICS inhaler equivalence table

CR has circulated final approved version. ITEM NOW CLOSED.

Levetiracetam syringe driver guidance (update)

JC still to circulate final approved version.

Proton pump inhibitors in syringe driver guidance (update)

JC still to find another pharmacist to do a second clinical of guideline to support subcutaneous sodium valproate in palliative care so that it can be presented for approval at April 2024 NY&Y APC.

NY&Y APC need for clinical guideline/shared care guideline approval checklist

On today's agenda.

Formulary Updates Approved at Mar 2024 APC

JC/SAL have updated Y&S and Harrogate formularies. ITEM NOW CLOSED.

Outstanding actions from previous APC meetings

Oral minoxidil for androgenic alopecia

ICB policy alignment group have confirmed they will review this particular policy across the ICB when the NICE TA for baricitinib is published. Agreed no further action for item for APC until this policy is reviewed by the ICB.

Melatonin prescribing paper

NY MO team still to complete paper to submit to future APC outlining the current issues with melatonin prescribing for consideration alongside the request to change the status. APC noted though that this work is starting to progress.

Modafinil for fatigue in MS – request to reconsider traffic light classification and follow up from October 2023 meeting

Actions still to progress.

HDFT Fragility Fracture – Secondary prevention Guidelines – update

Changes requested have been made and now signed off by APC. ITEM NOW CLOSED.

Hydroxychloroquine and chloroquine retinopathy: Recommendations on monitoring 16 December 2020 – updated RCOphth guidelines

Work on adopting national shared care template is ongoing in NY&Y.

Part 2 – Governance

7. NY&Y APC need for clinical guideline/shared care guideline approval checklist

It was suggested at the March 2024 NY&Y APC that a NY&Y APC clinical guideline/shared care guideline approval checklist would be useful to ensure good governance when APC asked to approve guidelines. Will also ensure that adequate clinical checks of the content of guidelines have take place before guidelines are presented to the APC for approval.

A draft which has been consulted on with APC members via email since the last APC was presented to and approved by the APC.

The APC also discussed need for any guidance to be identified and scoped prior to any guideline being developed so that guidance topics can be prioritised plus avoid duplication of guidance that may already be available nationally.

ACTION:

- **RDTG to share final approved version of NY&Y APC guideline approval checklist.**

Part 3 – Mental Health

8. Nil this month

Part 4 – Formulary issues

9. Appeals against previous APC decisions

Nil this month.

10. Formulary NICE TAs and MHRA Drug Safety Update – February 2024

The drugs in the following TAs to be reflected in the formulary as RED drugs in the relevant chapters with links to the TAs:

- TA949: Belumosudil for treating chronic graft-versus-host disease after 2 or more systemic treatments in people 12 years and over
- TA950: Nivolumab–relatlimab for untreated unresectable or metastatic melanoma in people 12 years and over
- TA951: Olaparib with abiraterone for untreated hormone-relapsed metastatic prostate cancer
- TA952: Talazoparib for treating HER2-negative advanced breast cancer with germline BRCA mutations

All the above TAs are NHSE-commissioned and would therefore have no cost impact to the ICB.

The drugs in the following 30 day TAs published in March 2024 which are ICB commissioned to be reflected in the formulary as RED drugs in the relevant chapters with links to the TAs:

- TA953: Fluocinolone acetonide intravitreal implant for treating chronic diabetic macular oedema
- TA956: Etrasimod for treating moderately to severely active ulcerative colitis in people aged 16 and over

Medicines Safety MHRA Drug Safety Update – February 2024

The group noted the drug safety updates for February 2024. The links are to be added to the relevant sections of the formulary.

ACTION:

- **JC/SAL to update the formulary websites.**

11. Other formulary issues

Nil this month.

12. **New Drug Applications**

Trifarotene (Aklief®) 50 microgram/g cream

Aklief® is indicated for the cutaneous treatment of acne vulgaris of the face and/or the trunk in patients from 12 years of age and older, when many comedones, papules and pustules are present.

The APC discussed the application and approved as GREEN as an alternative to other available retinoids in patients with facial and / or truncal acne, either in combination with other oral or topical therapies, or as monotherapy where a fixed combination product is not tolerated, or one component is contraindicated. It noted that no cost impact is expected as cost is the same as for adapalene, and has evidence base for truncal acne unlike the alternatives. Formulation in a pump dispenser may also allow more accurate and easier dosing by patients.

ACTION:

- **JC/SAL to update the formulary websites.**

Aflibercept 8mg Intravitreal Injection

Requested for Neovascular Age -related Macular Degeneration (nAMD) and Diabetic Macular Oedema (DMO) as per relevant NICE Tas and to be used in place of Aflibercept 2mg for nAMD and DMO in

- A. All new DMO and AMD patients start – 3 loading at 4-5 weeks and then 8 weeks F2F. Treat and extend from there.
- B. All existing nAMD and DMO patients on aflibercept 2mg/ Faricimab and achieving treatments intervals of 8 weeks or less.

The APC discussed the application and approved as RED drug within the criteria defined by NICE and that outcome data is collected for review by the committee in 12 months time. Outcome data will be important when reviewing pathways when aflibercept biosimilars are available in November 2025. The APC noted no cost impact expected as currently costs the same as 2mg product.

ACTION:

- **JC/SAL to update the formulary websites.**

13. **Compassionate use/free of charge scheme requests**

Nil this month.

Part 5 – Shared Care and Guidelines (non-mental health)

14. **Shared care guidelines for approval**

Nil this month.

15. **NY&Y Clinical decision-making tool for embolism prophylaxis for patients with non-valvular atrial fibrillation (updated)**

A paper was presented at the February Area prescribing committee around the proposal to make Apixaban our first line DOAC choice for non-valvular atrial fibrillation in our ICB. This was supported by both our APCs and also approved by the Humber & North Yorkshire ICB Integrated Pharmacy and Medicines Optimisation Committee.

This has resulted in a need for further update of our existing Clinical decision-making tool for embolism prophylaxis for patients with non-valvular atrial fibrillation to reflect this. There had already been a wide consultation around the proposal to make apixaban first line which had wide support.

The clinical content has not changed but have moved the apixaban flow chart to come first and highlighting that it is now first choice.

There is going to be a further piece of work around which weight to use in the CG equation to calculate CrCl specifically for obese patients as there is no absolute national guidance on this point. An ICB meeting will be set up and a separate consensus statement will be brought back to both APCs on this issue. At present our existing guidance states that actual body weight should

be used in the majority of patients but adjusted body weight used for patients with a BMI above 30.

The APC approved the updated clinical decision-making tool for embolism prophylaxis for patients with non-valvular atrial fibrillation to allow this to be in line with our formulary recommendations to make apixaban first line.

ACTION:

- **CR to circulate final approved version.**

16. NY&Y Heart Failure medicines management pathway

Agreed ahead of today's APC to table the updated pathway for approval minus the sentence around Entresto outside of NICE guidance. This is because original ask was to update existing NY& pathway in line with latest NICE TAs for SGLT2i. This is only version likely to get approval from NY&Y APC at this stage it is felt.

Then in time ICB can review and develop a HNY wide pathway that incorporates the Entresto issue.

In terms of the Entresto issue raised at March 2024 APC. A summary from conversation post APC is as follows:

- No UK national guidance is placing Entresto before ACEi or ARBs
- Not aware of any other areas in UK that does this either
- ICB Cardio Network wants to only use ACEi or ARB if Entresto isn't appropriate
- ICB Cardio Network and its cardio/HF specialists want endorsement of what they mainly do already, i.e. go straight to Entresto (unless not appropriate). It has been highlighted to them that this would require a submission to both APCs/IMPOC with supporting evidence and cost impact assessment.

The APC therefore agreed to approved the updated NY&Y APC heart failure pathway to reflect the latest NICE TAs for SGL2i's. It noted the Humber APC pathway has also been update in similar way and is going to their APC today. The APC agreed to make no changes to the pathway with regard to Entresto until such time that formulary submission is received for its use outside of NICE i.e. ahead of an ACEi or ARB.

ACTION:

- **CR to circulate final approved version.**

Part 6 – Other items of business

17. NY&Y Formulary Chapter 15: Anaesthesia

The next chapter of the formulary that has been harmonized across NY&Y was presented to and approved by the APC.

ACTION:

- **JC/SAL to update the formulary websites.**

Part 7 – Standing items (for information only)

18. IPMOC minutes – February 2024

Circulated for information.

19. TEWV D&T minutes – since November 2023

Not yet available.

20. York & Scarborough Trust Drug and Therapeutics Committee minutes – February 2024

Circulated for information.

21. **Harrogate Trust Medicines and Therapeutics Group minutes – since September 2022**
Not yet available.
22. **West Yorkshire ICS APC Minutes – since March 2023**
Not yet available.
23. **Humber APC minutes – February 2024**
Circulated for information.
24. **Humber APC decisions & recommendations – February 2024**
Circulated for information.
25. **RDTC Monthly Horizon scanning – March 2024**
Circulated for information.
28. **NENC Medicines Committee decision Summary – April 2024**
Not yet available.

Any Other Business

Nil

Date and time of next meeting

Wednesday 1st May 2024, 2pm – 4.30pm, virtual meeting via Microsoft Teams