NHS North Yorkshire and York Area Prescribing Committee

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Summary of decisions made regarding new product requests considered at a meeting of the Committee on the 3rd April 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				
Aflibercept 8mg Intravitreal Injection	✓ R			Requested for Neovascular Age -related Macular Degeneration (nAMD) and Diabetic Macular Oedema (DMO) as per relevant NICE TAs **Decision:** approve Eylea 8mg 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. To be used in place of Aflibercept 2mg for nAMD and DMO: 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.

Product	Decision			Comments/notes
	Approved	Refused	Deferred	
Trifarotene (Aklief®) 50 microgram/g cream	✓ G			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. **Decision:** approved 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.
3) New formulations & extensions to use				
None				
5) Products considered by NICE				
TA949: Belumosudil for treating chronic graft-versus-host disease after 2 or more systemic treatments in people 12 years and over	✓ R			The formulary will reflect the TAG – NHS England is the responsible commissioner.
TA950: Nivolumab–relatlimab for untreated unresectable or metastatic melanoma in people 12 years and over	✓ R			The formulary will reflect the TAG – NHS England is the responsible commissioner.
TA951: Olaparib with abiraterone for untreated hormone-relapsed metastatic prostate cancer	✓ R			The formulary will reflect the TAG – NHS England is the responsible commissioner.
TA952: Talazoparib for treating HER2-negative advanced breast cancer with germline BRCA mutations	✓ R			The formulary will reflect the TAG – NHS England is the responsible commissioner.
TA953: Fluocinolone acetonide intravitreal implant for treating chronic diabetic macular oedema	✓ R			The formulary will reflect the TAG – ICB is the responsible commissioner.
TA956: Etrasimod for treating moderately to severely active ulcerative colitis in people aged 16 and over	✓ R			The formulary will reflect the TAG – ICB is the responsible commissioner.

Product	Decision			Comments/notes
	Approved	Refused	Deferred	
6) Appeals against earlier decisions by the APC				
None				
7) Miscellaneous formulary decisions by the APC				
None				

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

- NY&Y Clinical decision-making tool for embolism prophylaxis for patients with non-valvular atrial fibrillation (updated)
- NY&Y Heart Failure medicines management pathway – updated to reflect latest NICE TAs for SGLT2i.
- NY&Y Formulary Chapter 15: Anaesthesia
- NY&Y APC Guideline/Shared Care Guideline approval checklist.

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

- Nil

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

- Nil

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

- Nil