## **Humber Area Prescribing Committee**

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

## **Classification of products:**

| Status  | Description   |               |                     |             |   |  |  |
|---------|---|---------------|---------------------|-------------|---|--|--|
| GREEN   | Medicines suit  | able for rou  | utine use w         | ithin prim  | ary care and Secondary care. May be initiated   |  |  |
|         | within primary  | care withi    | n their licer       | nsed indic  | ation, in accordance with nationally recognised |  |  |
|         | formularies   |               |                     |             |   |  |  |
| AMB 1   | Specialist recommendation: These medicines are considered suitable for GP prescribing     |               |                     |             |   |  |  |
|         | following specialist recommendation or via an APC approved prescribing guideline.         |               |                     |             |   |  |  |
| AMB 2   | Specialist initia   | ation: Thes   | e medicine          | s are cons  | sidered suitable for GP prescribing following   |  |  |
|         | specialist initia   | ation, includ | ding titratio       | n of dose   | and assessment of efficacy. These medicines     |  |  |
|         | may also have an APC approved guideline to aid GPs in further prescribing.                |               |                     |             |   |  |  |
| AMB SCP | AMBER SHARE   | CARE PRO      | TOCOL- Sp           | ecialist in | itiation with ongoing monitoring: Medicines     |  |  |
|         | that must be initiated by a specialist, and which require significant monitoring on an    |               |                     |             |   |  |  |
|         | ongoing basis. Full agreement to share the care of each specific patient must be reached  |               |                     |             |   |  |  |
|         | under the shared care protocol which must be provided to the GP. If a commissioned shared |               |                     |             |   |  |  |
|         | care is not available in CCG/place then these drugs must be treated as red drug (hospital |               |                     |             |   |  |  |
|         | only).  |               |                     |             |   |  |  |
| RED     | Red-Hospital initiation and continuation only   |               |                     |             |   |  |  |
| GREY    | GREY- NON FORMULARY (As agreed by Area Prescribing Committee)                             |               |                     |             |   |  |  |
| PURPLE  | To be supplied from the appropriate commissioned provider.                                |               |                     |             |   |  |  |
| NR NR   | Not routinely commissioned  |               |                     |             |   |  |  |
| Pro     | duct  | Approved      | Decision<br>Refused | Deferred    | Comments/notes                                  |  |  |

| Product                                     |          | Decision |          | Comments/notes   |  |  |
|---|----------|----------|----------|--|--|--|
|   | Approved | Refused  | Deferred |  |  |  |
| 1) Requests deferred from previous meetings |          |          |          |  |  |  |
| Nil this month                              |          |          |          |  |  |  |
| 2) New Requests                             |          |          |          |  |  |  |
| Arikayce® (liposomal amikacin)              | RED      |          |          | As per NHSE commissioning statement (HUTH)                                   |  |  |
| Hylo-Dual Intense eye drops                 | AMB 1    |          |          | On recommendation of ophthalmology only hyaluronic acid (0.2%) and ectoin 2% |  |  |
| Adex gel                                    |          | X        |          |  |  |  |
| Target release budesonide                   | RED      |          |          | TA937  |  |  |

| Product  | Approved  | Decision<br>Refused | Deferred | Comments/notes  |
|--|-----------|---------------------|----------|---|
| Etrasimod  | RED       | rtorasca            | Deletted | TA956   |
| Nicorette (quick mist)   | PURPLE    |                     |          |   |
| Duraphat toothpaste  | PURPLE    |                     |          | AMB 1 on recommendation OMFS/restorative dentistry for patients without an NHS dentist.   |
| 3) New formulations &  | extensio  | ns to use           | •        |   |
| Nil this month   |           |                     |          |   |
|  |           |                     |          |   |
| 4) Products considered   | d by NICE |                     |          | L   |
| TA953: Fluocinolone acetonide intravitreal implant for treating chronic diabetic macular oedema                          | RED       |                     |          | The formulary will reflect the TAG – ICS is the responsible commissioner.   |
| TA954: Epcoritamab for treating relapsed or refractory diffuse large B-cell lymphoma after 2 or more systemic treatments | RED       |                     |          | The formulary will reflect the TAG – NHS England is the responsible commissioner.   |
| TA956: Etrasimod for treating moderately to severely active ulcerative colitis in people aged 16 and over                | RED       |                     |          | The formulary will reflect the TAG – ICS is the responsible commissioner.  Note: NHS England is the responsible commissioner for 16-17 years old.   |
| TA957: Momelotinib for treating myelofibrosis-related splenomegaly or symptoms   | RED       |                     |          | The formulary will reflect the TAG – NHS England is the responsible commissioner.   |
| TA958: Ritlecitinib for treating severe alopecia areata in people 12 years and over                                      | RED       |                     |          | The formulary will reflect the TAG – ICS is the responsible commissioner for adult patients. NHS England is the responsible commissioner for 12-17 years age groups.  Note: Referred to IPMOC due to financial impact / |
|  |           |                     |          | commissioning implications  |
| TA959: Daratumumab in combination for treating newly diagnosed systemic amyloid light-chain amyloidosis                  | RED       |                     |          | The formulary will reflect the TAG – NHS England is the responsible commissioner.   |

| Product  | Decision |         |          | Comments/notes  |
|--|----------|---------|----------|---|
|  | Approved | Refused | Deferred | 0 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1   |
| TA962: Olaparib for maintenance treatment of BRCA mutation-positive advanced ovarian, fallopian tube or peritoneal cancer after response to first-line platinum-based chemotherapy | RED      |         |          | The formulary will reflect the TAG – NHS England is the responsible commissioner. |
| 5) Appeals against earlier decisions by the APC  |          |         |          |   |
| Nil this month   |          |         |          |   |
| 6) Miscellaneous formulary decisions by the APC  |          |         |          |   |
| Nil this month   |          |         |          |   |

The following guidelines were presented to and approved at the May 2024 meeting of the APC:

- Ocular Lubricant
- IBD guideline (HUTH only)

The following Drug information leaflets were presented to and approved at the May 2024 meeting of the APC:

Nil this month

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

Nil this month

Other documents presented to and approved at the May 2024 meeting of the APC:

• Nil this month