

DONCASTER & BASSETLAW AREA PRESCRIBING COMMITTEE (APC)

Action Notes and Log

Thursday 31st March 2023 at 12 Noon,
Meeting Held over Microsoft Teams

Present:

Mr Rob Wise	Senior Pharmacist NNICB - Bassetlaw Place Partnership, APC chair
Mrs Charlotte McMurray	NHS SYICB Doncaster Place Interim Chief Pharmacist, Deputy APC chair
Dr Rachel Hubbard	Clinical lead for Doncaster place
Mr Lee Wilson	Consultant Pharmacist DBTHFT
Mrs Ashley Hill	NHS SYICB Doncaster Place Senior Medicines Optimisation Technician (Secretary)
Miss Faiza Ali	Pharmacist NHS SYICB Doncaster Place Locality Lead Pharmacist
Dr Dean Eggitt	Local Medical Committee Representative

In attendance:

Miss Eve Bucktrout	Pre-reg Technician (introduction)
Ms Kelli Waite	Pre-reg Technician (introduction)
Mrs Helen Cunningham	NHS SYICB Doncaster Place Senior Medicines Optimisation Technician
Miss Ewa Gabzdyl	NHS SYICB Doncaster Place Locality Lead Pharmacist

Minutes only:

Dr Rupert Suckling	
Mr Victor Joseph	DMBC Representatives

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Agenda Ref	Subject / Action Required	Action Required By	Timescale	Status of Action (RAG) and Date
03/23/1	Apologies for Absence: Rachel Wilson – DBTHFT Chief Pharmacist Lucy Pearl– Consultant DBTHFT Nick Hunter – LPC Dr Mallicka Chakrabarty- Bassetlaw GP Representative Dr Runit Shah- Local Medical Committee Representative Mr Steve Davis- RDaSH Chief Pharmacist			
03/23/2	Declarations of Interest: CM has been in a meeting with Lilly regarding CGM			
03/23/2.1	Fire Alarm Procedure: NA meeting held online			
03/23/2.2	Notification of Any Other Business: AH requested to discuss the updated shared care protocol for growth hormones in Children to include Somatrogen			
03/23/3	Notes of the Meeting held on: Thursday 23rd February 2023 It was noted that in 01/23/8.1- Debbie Maughn job title is FH nurse not diabetic nurse. Action initial for 02/23/20 under discussion between EW and MC for COPD information the incorrect initial (CM) was in the action box it should be MC. With the above amendments the Thursday 23rd February 2023 minutes were agreed as a true and accurate record and will be made available on the medicines management website.			
03/23/4	Matters Arising not on the agenda			
02/23/2.2	Any other business EG was going to send LW posters and flyers that could be place in the pharmacy outpatient department after the February’s meeting. EG will follow up			

	<p>sending out posters and flyers to LW. It was agreed that this could be closed from an APC perspective & did not need to return.</p>			
01/23/8.1	<p>FH/Lipid Clinic pathway RH discussed that it was taken to MOG where it has now been approved and is on the MPD website.</p>			
02/23/20	<p>Any other business</p> <p>RS in February's APC enquired about patents on the thyroid register. CM discussed that this has been put on hold at the moment while they extract the data and establish which patients who cannot be passed onto primary care. CM to bring back to the APC committee once further information is available.</p> <p>PIL and Ramadan leaflets have ben approved at last APC and went to MOG for information and have now been uploaded onto the medicines management website.</p> <p>COPD Guidance - EW confirmed that MC had forwarded Nott's COPD pathway. This was helpful, however currently looking to adopt Sheffield's document subject to some amendments. This work is in progress.</p> <p>AH asked if it was possible to circulate to the APC committee the horizon scanning sheets that Barnsley have prepared for IMOC meeting to be discussed on Wednesday 5thApril, as a final decision will be made. The chair agreed that it was suitable due to the quick turnaround to circulate the documents for any comments.</p>	AH	April 2023	

03/23/4.1	Matters Arising			
10/22/7.2	<p>Goserelin (Zoladex)- Breast Cancer & Endometriosis</p> <p>FA discussed with the committee that Sharron Kebell at STH was leading on this. The original proposal had been rejected at STH in 2021, but Sharron is currently working on moving this forward. FA had contacted several DBTH consultants regarding using Goserelin over the licensed six months period but had no response. It was also to discuss with consultants in the prescribing use in endometriosis. The committee commented that they would like to receive some acknowledgement and/or comments from DBTH consultants on both uses of Goserelin. LW to forward FA any other DBTH consultants contacts. To return to once there is an update.</p>	NHS-LW/FA	May 2023	
07/22/8.1	<p>Cinacalcet SCP</p> <p>CM gave the committee an update that the Cinacalcet SCP that had been discussed at March's MOG. It had previously been agreed at the APC had a dual TLS status Amber SCP and Amber G for frail, elderly patients unable to attend hospital appointments. Due to contractual and commissioning arrangements in Doncaster it was agreed that at the moment it would stay as Amber and could be reviewed in the future. CM shared with the committee the SCP on the MPD with the proforma for the secondary care clinicians to use. The committee noted that it was unfortunate that the commissioning arrangements had, for the time being, blocked the option of Amber G for certain patients. Amber TLS was therefore agreed for all patients.</p>			
03/23/5	<p>Drugs for Review</p> <p>Eptinezumab (VYEPTI)- Migraine agreed Red, 1,8 TLS due to NICE TA871</p>			

	<p>Pergolide (Celance)- Parkinson's disease agreed Grey TLS as product has now been discontinued. The committee further discussed that as this product is no longer available it should be removed from the MPD. Following the recent IMOC TLDL status there is no longer a discontinued TLS status. The committee discussed in detail the option to grey list v remove and agreed that the product should be removed from the MPD completely.</p> <p>Tiagabine (Gabitril)- Anticonvulsant. FA discussed that it was currently not supported in the adult epilepsy shared care protocol but was included in the children's shared care protocol that Doncaster and Bassetlaw currently support it as Amber G document. Committee were informed that in adults, the consultants considered it would be red, but don't actually use it. The committee queried that as Tiagabine can be prescribed in children over the age of 12, what would happen to those patients when they are transferred to the adult services. It was agreed that further information was need regarding the transition of prescribing between paediatrics and adults to help inform a decision. FA to contact paediatric & adult teams, to establish what the pathway is.</p> <p>Somatrogon (Ngenla)- Growth Hormone for children agreed as Amber TLS as this product is to be added to the Shared care protocol (see AOB)</p>	FA	April 2023	
03/23/6	<p>Officers' Actions and returning drugs</p> <p>Officers' actions :</p> <p>LW commented that Insulin aspart (Fiasp)- for diabetes is green and formulary and not non- formulary. The spreadsheet will be updated to reflect this. All other officer's action drugs were agreed and will be updated on the MPD by Jen Cox.</p> <p>Returning drugs:</p> <p>The chair discussed the agreed TLS of Alprazolam (Xanan)- Anxiety was traffic lighted as Red due to it not being allowed to be prescribed on an NHS prescription but can be prescribed on a private prescription. FA to check if is available in the UK and if so, should have a grey TLS.</p>	AH		

	<p>Post meeting note: CM has checked with community pharmacy contact, and it is blacklisted to be prescribed on an NHS prescription, but the product is available by a private prescription. Will send to MOG as a Grey TLS.</p>			
03/23/7	<p>Drugs for Consideration</p> <p>TLS categorized at APC to go to MOG final approval:</p> <p>Semaglutide (Wegovy)-Managing overweight and obesity the committee agreed Red TLS. CM requested AH to send this to Barnsley to be picked up on horizon scanning for discussion at IMOC for an ICB approach as patients will be prescribed this by private clinics, and this will ensure that primary care will not be prescribing.</p> <p>Betamethasone Valerate Plaster (Betesil) plaster- Inflammatory skin conditions LW discussed that this was discussed at D&T committee in 2019 but has been missed off the MPD. The committee agreed the Green TLS non formulary.</p>	AH		

03/23/8	New Business			
03/23/8.1	<p>Shared Care Protocol for Topical testosterone replacement therapy in menopausal women- update</p> <p>RH discussed that from the last month's APC it was picked up that Sheffield had made some minor changes to their SCP and wanted the most up to date guidance on the MPD. The updates were an MHRA information regarding transfer of topical testosterone to men, children and pets and the Tostran® pump dose. DE discussed with the committee that many prescribers may not be comfortable with prescribing testosterone for menopausal woman as likely will not be an area of medicine they are familiar with. RH responded that there are two traffic light statuses Amber G, i.e. specialist initiated and Green G for prescribers who do have experience and do have knowledge to prescribe this for patients. The committee discussed that it would be helpful if there was more education for prescribers on this topic, both in Doncaster and Bassetlaw. There was discussion re the Amber G status as in Sheffield the document is considered to be shared care. RH agreed to contact Dr Sue Stillwell for further information to help consider this as well as possibility of education sessions and will bring back to April's APC. DE raised a concern re the effect of APCs decisions and how they are interpreted by other parties, e.g. commissioners. With regard to testosterone for women he could not be certain that this had been adequately discussed with GP colleagues. DE to liaise with LMC colleagues regarding the prescribing aspects of the document.</p>	NHS-RH	April 2023	
03/23/8.3	<p>Lithium national protocol with Doncaster & Rotherham Place additions</p> <p>FA discussed with the committee the latest version on the lithium SCP that has been to the APC previously. There has been some formatting changes and responsibilities made clear. There are a few minor changes to be made since this version such as the NICE guidance has been updated to NICE NG222 and contact details need to be added. Although an RDaSH representative was not present at the APC the protocol had already had their approval. RH requested if an individual target lithium level could be added to the proforma letter, as this will be scanned into the patients record and it would be useful for prescribers to easily see a patients lithium target level is. The committee agreed as the original document was dated 2015 and as there were some significant monitoring</p>	NHS-FA	April 2023	

	changes the document would be approved today without RDaSH with the above changes made by FA and RDaSH informed of the changes and to confirm agreement. Then to MOG and return to APC in April for information.			
03/23/8.4	<p>Transitioning Melatonin patients</p> <p>LW discussed that during the drugs and therapeutic committee meeting he was asked to raise the commissioning issues of children who are prescribed melatonin by the paediatric team until they reach the age of 18. The consultant wanted to know what should be done for those patients that are no longer appropriate to be seen in paediatrics but where there is a long waiting list to be seen by CAMHS or the necessary specialist adult service they require. The committee agreed that there was no safety aspect of prescribing melatonin and is currently grey listed in prescribing in adults as no evidence or national recommendations for use in general adult population. As this was a commissioning discussion it was not for the APC to discuss or decide. It was agreed that perhaps it would be better suited to be discussed at IMOC to have a clinical and commissioning discussion altogether with other places. It was agreed that at the moment LW and FA to liaise with other place counterparts on how they are managing this.</p>	NHS LW/FA		
03/23/8.5	<p>Acepro effervescent tabs (acetylcysteine) formulary submission</p> <p>EG discussed acetylcysteine 600mg effervescent tablets to be traffic lighted as Green formulary choice and to remove the current shared document for Idiopathic pulmonary fibrosis as EW has discussed with Helen Meynell at DBTH that the shared care protocol could be removed as when the document was written the products were unlicensed they are now licenced products around this indication. Committee agreed with suggestion to change from shared care to green. As this is a new product CM suggested that the LPC should be informed to ensure that all pharmacies are able to obtain stock. It was also noted that this would also need to be taken to the next FLG meeting to be added to the formulary. LW to take this action the next FLG meeting. AH to run a central search to ensure that there are no patients currently on the shared care protocol and if not to be archived and removed from the MPD.</p>	NHS-EG NHS-LW NHS-AH		
03/23/8.6	<p>IMOC process & Proforma update</p> <p>CM discussed at the last IMOC meeting the IMOC TLDL was agreed and is now hosted on the IMOC website, the biggest change for Doncaster and Bassetlaw is</p>			

	<p>the removal of Green G TLS. The use of proformas was discussed at the IMOC meeting and well received, as Rotherham had left the meeting at that point an approval to use proformas could not be obtained. It was determined that a meeting was required outside of IMOC to discuss the use of proformas with wider stakeholders and head of places and LPC and potentially digital solution. CM will report back to APC with any updates</p>			
03/23/8.7	<p>Efmody®- IMOC Grey status</p> <p>This was discussed at the March's IMOC meeting with the view to make it Amber G. It is Hydrocortisone M/R preparation licensed by the MHRA, and his views for congenital adrenal hyperplasia children and adults and for to be classified as Amber on the traffic light drug list. Currently in Doncaster we have TLS it as Amber. The IMOC committee discussed that further review of clinical information was required, and as there was no financial representative and Rotherham were not present it could not be agreed. To be re discussed at April's IMOC meeting.</p>			
03/23/8.9	<p>Formulary status – Sativex</p> <p>The Chair discussed that a FOI was requested regarding the formulary status of this product it is currently Red non – formulary for MS – Spasticity and whether this could be changed to formulary which is currently what STH have it listed as. It was decided that this would need to be discussed at FLG in May and will return to the APC once a formulary status has been agreed.</p>	NHS-RW	May 2023	
03/23/8.10	<p>Testosterone replacement therapy in men with hypogonadism and testosterone deficiency. SCP</p> <p>RH shared an updated SCP that had been reviewed by secondary care clinicians. The SCP is designed for new patients who have testosterone deficiency and have been referred from GPs to endocrinology at DBTHFT. It is not intended for existing patients, started on testosterone by the Leger clinic and no longer under a specialist. It was discussed that this SCP could be used as a guidance document for those individuals. This was owing to their being no alternative specialist care being currently commissioned.</p> <p>It was noted that there were a few slight amendments to the document required i.e. permission from the author for use of the table in section 10 and contact</p>	NHS-RH		

	name and numbers to be added in section 13. The committee agreed the SCP subject to these amendments being made. It will be sent to the next MOG meeting and then uploaded to the MPD.			
03/23/9	DBTHFT D&TC Update The committee received minutes from the February's meeting			
03/23/10	Formulary Liaison Group Update There were no recent minutes received			
03/23/11	Doncaster Place MOG The Committee received minutes from the meeting held in March 2023			
03/23/12	RDASH FT Medicines Management Committee update The Committee received minutes from the meeting held January 2023			
03/23/13	Barnsley Area Prescribing Committee Update The Committee received minutes from the meeting held February 2023			
03/23/14	Rotherham Medicines Optimisation Group Update The committee received minutes from the meeting held in March 2023			
03/23/15	Sheffield Area Prescribing Committee Update The committee received minutes from the meeting held February 2023			
03/23/16	Nottingham Area Prescribing Committee Update The committee received minutes from the meeting held February 2023			
03/23/17	SY& B ICS Medicines Optimisation Work-stream Steering Group There were no recent minutes received			
03/23/18	Northern Regional Medicines Optimisation Committee There were no recent minutes received			
03/23/19	IMOC meeting The committee received minutes from the meeting held in March 2023			
03/23/20	Any Other Business LW discussed the Growth Hormone in Children shared care protocol that was circulated after the agenda paper. It included an update with the addition of Somatrogen injection which is a long-acting form of somatropin. Somatropin is already included in the SCP. Somatrogen is a once weekly preparation that is long lasting and will be preferable for patients. It is currently Red on the MPD. The highlighted parts in the SCP are the updates to reflect the new medicine.	NHS-AH	April 2023	

	<p>The committee agreed to the changes and to update the traffic light status to of Somatrogon to Amber. It was also noted that the SCP was due for renewal in August and agreed that an IMOC approach would be suitable; however, owing to the time this may take to achieve, to update the current Doncaster and Bassetlaw SCP with the new medicine. To be sent to the next MOG meeting.</p> <p>CM also informed the committee that she will not be present at Aprils APC meeting.</p>			
03/23/21	<p>Date and Time of Next Meeting</p> <p>12 noon prompt Thursday 27th April 2023 Meeting to be held Via Microsoft Teams</p>			

KEY

Completed / Closed	
In Progress	To be actioned but date not yet due