

Minutes of the **Somerset Prescribing Forum** held via Microsoft Teams, on **Wednesday, 10<sup>th</sup> November 2021**.

Present:	Steve DuBois (SDB)	Chief Pharmacist, Somerset NHSFT
	Shaun Green (SG)	Deputy Director of Clinical Effectiveness and Medicines Management, CCG
	Sam Morris (SM)	Medicines Manager, CCG
	Andrew Prowse (AP)	Chief Pharmacist and Controlled Drugs Accountable Officer, YDH NHS FT
	Dr Carla Robinson (CR)	Public Health Registrar, Somerset County Council
	Caroline Taylor (CT)	Prescribing Technician, CCG
	Dr Andrew Tresidder (AT)	Chair, CCG GP Patient Safety Lead
	Antony Zorzi	Chief Pharmacist, Acute, Somerset NHSFT
Apologies:	Dr Clare Barlow (CB)	Chair D&TC, Somerset NHSFT
	Jean Perry (JP)	Contracts Manager, NHS Somerset CCG

## **1 APOLOGIES FOR ABSENCE AND INTRODUCTIONS**

As detailed above

## **2 REGISTER OF MEMBERS' INTERESTS**

- 2.1 The Somerset Prescribing Forum received the Register of Members' Interests relevant to its membership.

There were no further amendments to the Register.

The Somerset Prescribing Forum noted the Register of Members' Interests.

## **3 DECLARATIONS OF INTEREST RELATING TO ITEMS ON THE AGENDA**

- 3.1 Under the CCG's arrangements for managing conflicts of interest, any member making a declaration of interest is able to participate in the discussion of the particular agenda item concerned, where appropriate, but is excluded from the decision-making and voting process if a vote is required. In these circumstances, there must be confirmation that the meeting remains quorate in order for voting to proceed. If a conflict of interest is declared by the Chairman, the agenda item in question would be chaired by a nominated member of the Somerset Prescribing Forum.

There were no declarations of interest relating to items on the agenda.

## **4 MINUTES OF THE MEETING HELD ON 8<sup>th</sup> September 2021**

4.1 The Minutes of the meeting held on 8<sup>th</sup> September were agreed as a correct record.

#### 4.2 **Review of action points**

The following points were specifically noted:

##### **4. DHSC Monthly Supply Issues**

Supply issue around Clexane<sup>®</sup> discussed.

AP has raised Inhixa<sup>®</sup> awareness within the teams & with clinical pharmacists.

AZ has requested SomersetFT software default to Inhixa<sup>®</sup>.

##### **8. Overdue Follow-ups**

Actions to be brought back to January's meeting.

**Action: CT**

#### **5 Matters Arising**

##### 5.1 **Sativex<sup>®</sup> for the treatment of spasticity due to multiple sclerosis**

Approved for use by Musgrove (SomersetFT), Somerset Prescribing Forum and YDH.

AZ informed the group they have only one patient treated so far via SFT.

**Add to March's SPF / PAMM agenda for shared care. Action: DB / CT**

##### 5.2 **Risk review and Management – COVID 19**

COVID vaccination programme in school aged children is included in the Risk Register – discussed.

AZ felt it was going fairly well, during the half-term vaccinations centres were offering the service. Antony will obtain an update for SPF around any issues and progress from the team.

There has been an overlap of patients from different counties which will have an impact (Somerset / Dorset)

It was noted that for health & social care staff vaccination will be mandatory.

#### **6 Other Issues for Discussion**

-None this month

#### **7 Other Issues for Noting**

##### 7.1 **Study of mirtazapine for agitated behaviours in dementia (SYMBAD): a randomised, double-blind, placebo-controlled trial -The Lancet**

Study highlights the lack benefit in using mirtazapine.

Shared amongst primary care colleagues, to raise awareness that prescribers need to review and deprescribe inappropriate prescribing in dementia / LD patients.

For discussion at Mental Health DTC's next meeting.

## 7.2 **Antipsychotics Shared Care Guidance**

An update of the existing SCG document, with minor adjustments including details on:

- improving the mental health & physical health in patients with a Serious Mental Illness (SMI).
- Liberty Protection Safeguards (planned to come into force in April 2022) which will replace the Deprivation of Liberty Safeguards (DoLS) system

SCG Approved as fit for purpose at October's PAMM meeting.

**Agreed by SPF, to be shared.**

**Action: SM**

Thanks were given to Sam Morris & Hel's Bennett for their work on this and to Steve DuBois for his feedback

## 8 **Additional Communications for Noting**

### 8.1 **DHSC Monthly Supply Issues Updates Oct & Nov 2021**

-Noted

Raised awareness of the Specialist Pharmacy Service (SPS) 'Medicines Supply Tool', which gives latest information on supply issues, actions to take, alternatives to use & expected resolution dates. Content provided by DHSC and CMU.

Registration for access to the website is available to UK healthcare professionals and organisations providing NHS healthcare.

**Add link to SPS: 'Medicines Supply Tool' to our website**

**Action: DB**

### 8.2 **Congratulations on massive improvement - statin potency**

-Noted

Work around this is included in the primary care 2021-22 Incentive Scheme. Giving the huge shift in work carried out, there shouldn't be as many patients moving over to the newer more expensive medications. CVD is a national priority.

### 8.3 **Liberty Protection Safeguards - CQC - Chemical restraint**

-Noted

A review of drugs prescribed to patients for mental health is being carried out at GP practices by the Care Quality Commission (CQC)

If a medication review is not in place, then prescribers run the potential risk of not putting in Liberty Protection Safeguards (planned to come into force in April 2022). Liberty Protection Safeguards will replace the Deprivation of Liberty Safeguards (DoLS) system.

Access to patients' full medical records will shortly be available.

### 8.4 **Untreated Familial Hypercholesterolemia**

-Noted

Somerset CCG have workstreams in place for this condition. Eclipse Live have identified patients who have a readcode for FH but not being treated. The condition requires pharmacological intervention.

There is currently over a 12 month wait to see the lipid specialist in Somerset. Alex Bickerton is the only lipid specialist in Somerset and this is seen as a patient risk.

#### 8.5 **PCN responsibilities from October**

-Noted

Raised awareness to secondary care colleagues. There are 13 PCNs across Somerset.

#### 8.6 **Improving CVD outcomes and SGLT2 options**

-Noted

This workstream is included in the PCN specification. PCNs are commissioned to look at FH, QRISK scores, HF, identify unmet need, tackling inequalities, along with shared decision making and Social Prescribing.

CR commented she is aware of the health inequalities.

A thank you to primary care for all the ongoing work to improve cardiovascular outcomes via uptake of more potent statins, ezetimibe and SGLT2 inhibitors instead of gliptins in our Type-2 Diabetic population with CVD, HF and renal co-morbidity.

#### 8.7 **Valproate monitoring**

-Noted

Somerset have done really well in implementing the national alert for annual checks and pregnancy prevention program for women of childbearing age prescribed valproate products.

Raised with practices the requirement to ensure that valproate patients have annual FBC / LFT checks which creates a risk to them.

Adopted the SPS blood monitoring guidance.

#### 8.8 **Formulary approval of Inclisiran**

-Noted

Practices informed of the formulary approval of Inclisiran and its place in the lipid pathway.

Inclisiran to be reserved for the more difficult patients, ensuring all the other drugs have been tried first.

GP Dispensing practices may push prescribing back to secondary care due to cost implications.

**8.9 Metoclopramide max 5 days**

-Noted

Shared safety agenda with primary care colleagues.

**8.10 Domperidone safety**

-Noted

Shared safety agenda with primary care colleagues.

**8.11 Ordering Repatha - Evolocumab**

-Noted

Somerset is the first system in the country to move prescribing of Evolocumab and Alirocumab into primary care as part of our strategy to improve treatment and outcomes for patients with Familial hypercholesterolaemia or high-risk CVD with hypercholesterolaemia. Numbers are currently small and transfer for most patients has progressed smoothly. However, one or two practices and patients have encountered difficulties with ordering Repatha.

Advice has been shared with practices around how to order Repatha directly.

**8.12 B12 investigation and oral cyanocobalamin prescribing**

-Noted

Due to Covid, patients receiving I.M. hydroxocobalamin had been switched to oral cyanocobalamin.

Prescribers are reminded that the BSH guidance for non-dietary vitamin B12 deficiency is oral cyanocobalamin can be offered at a dose of 1mg per day until regular IM hydroxocobalamin can be resumed.

Based on the current mixture of doses being used, moving to oral cyanocobalamin 1mg would also be cost saving on average compared to using 50micrograms or 100microgram tablets and would ensure less risk of sub optimal dosing.

AZ mentioned that some doses he's seen in his trust are a dose which might not be absorbed.

**8.13 Long term nitrofurantoin - why it should be avoided and monitoring requirements if it is prescribed**

-Noted

Members of PAMM felt sometimes requests for this are made by Urology colleagues.

**Raise long term nitrofurantoin use with Urology. Action: Shaun Green**

## 9 Formulary Applications

### 9.1 Testosterone prescribing for menopause

[\[NG23\] Menopause: diagnosis and management](#)

Discussed at PAMM Novembers meeting. Testosterone guidance can be found on the Somerset CCG website, detailed information linking in with the British Menopause Society and NICE.

Approved

Add to TLS **GREEN** 'on advice of a GP with additional training in menopause / hormone replacement therapy' or a suitable specialist.

**Action: Zoe Talbot-White**

### 9.2 **Trimbow NEXThaler (DPI) 88 micrograms/5 micrograms/9 micrograms per actuation inhalation powder**

-Approved

**Add to formulary**

**Add to TLS **GREEN****

**Add to VENN diagram**

**Action: DB**

**Action: ZTW**

**Action: CT**

### 9.3 **Eyeaze® Sodium Hyaluronate 0.1%, 0.2% & 0.4% PF eye drops x 10ml**

Treatment of dry eyes.

Approved. Added to formulary

### 9.4 **Staladex 10.72 mg Implant (as leuprorelin acetate 11.25 mg)**

-Approved

**Add to TLS **AMBER****

**Action: ZTW**

### 9.5 **BIJUVE 1mg/100mg Capsules, soft**

1 mg estradiol (as estradiol hemihydrate) and 100 mg progesterone.

-Approved

**Add to formulary**

**Add to TLS **GREEN****

**Action: DB**

**Action: ZTW**

### 9.6 **WockAIR® (budesonide/formoterol) breath-actuated dry powder inhaler**

-Approved

**Add to formulary**

**Add to TLS **GREEN****

**Add to VENN diagram**

**Action: DB**

**Action: ZTW**

**Action: CT**

### 9.7 **Avenor® (salmeterol/fluticasone) pressurized inhalation, suspension**

-Approved

**Add to formulary**

**Add to TLS **GREEN****

**Add to VENN diagram**

**Action: DB**

**Action: ZTW**

**Action: CT**

### 9.8 **Epesri® (ethosuximide) 250mg capsules**

-Approved  
**Add to TLS AMBER**

**Action: ZTW**

9.9 **Lagevrio®** (molnupiravir) 200 mg hard capsules

Lagevrio® is indicated for treatment of mild to moderate coronavirus disease 2019 (COVID-19) in adults with a positive SARS-COV-2 diagnostic test and who have at least one risk factor for developing severe illness (see sections 4.2 and 5.1 of SPC for information on posology and limits of clinical trial population).

Somerset CCG need to put a process in place in the next few weeks, which would include a pathway for delivering to isolating patients.  
CR questioned timescales with wholesalers holding stock.

Approved, in line with national guidance. Awaiting implementation plan / further deployment information.

TLS **Green** subject to national roll out plan

**10 DTC decisions and other reports**

10.1 **Somerset NHS Foundation Trust Mental Health D&TC** -Next meeting 07/12/21

-Discussed & noted

10.2 **YDH Medicines Committee** - Next meeting 19/11/21

Sativex® approved post meeting see item 5.1 on agenda.

10.3 **Somerset NHSFT D&TC** - Next meeting 18/11/2021

-Nothing to note

10.4 **Somerset Antimicrobial Stewardship Committee** - Next meeting planned for November, unlikely to go ahead due to staffing issues.

N/A

10.5 **Somerset ICS Medicines Optimisation (SIMO) Committee** - Next meeting 08/12/2021

-Nothing to note

10.6 **RMOC function on SPS website**

-Noted

Andrew Tresidder attended a recent RMOC meeting and is the Somerset system representative.

**Part 2 – Items for Information or Noting**

**11 NICE Guidance October & November**

-Noted

- 12 NICE Technology Appraisals**
- 12.1 **[TA725] Abemaciclib with fulvestrant for treating hormone receptor-positive, HER2-negative advanced breast cancer after endocrine therapy**  
- New  
-Approved  
**NHSE Commissioned. Add to TLS RED Drug** **Action: ZTW**
- 12.2 **[TA729] Sapropterin for treating hyperphenylalaninaemia in phenylketonuria** - New  
-Approved  
**NHSE Commissioned. Add to TLS RED Drug** **Action: ZTW**
- 12.3 **[TA728] Midostaurin for treating advanced systemic mastocytosis** – New  
-Approved  
**NHSE Commissioned. Add to TLS RED Drug** **Action: ZTW**
- 12.4 **[TA727] Isatuximab with carfilzomib and dexamethasone for treating relapsed or refractory multiple myeloma (terminated appraisal)**  
-Noted  
Add to TLS Terminated Appraisal **Action: ZTW**
- 12.5 **[TA726] Daratumumab with pomalidomide and dexamethasone for treating relapsed or refractory multiple myeloma (terminated appraisal)**  
-Noted  
Add to TLS Terminated Appraisal **Action: ZTW**
- 12.6 **[TA731] Vericiguat for treating chronic heart failure with reduced ejection fraction (terminated appraisal)**  
-Noted  
Add to TLS Terminated Appraisal **Action: ZTW**
- 12.7 **[TA730] Avapritinib for treating unresectable or metastatic gastrointestinal stromal tumours (terminated appraisal)**  
-Noted  
Add to TLS Terminated Appraisal **Action: ZTW**
- 12.8 **[TA733] Inclisiran for treating primary hypercholesterolaemia or mixed dyslipidaemia**  
-Approved, as a Green drug criteria as per NICE - system requested to support Statin potency optimisation and addition of ezetimibe before inclisiran initiation.  
**CCG Commissioned. Providers are primary care services.**  
**Add to TLS GREEN** **Action: ZTW**



- 12.9 **[TA732] Baloxavir marboxil for treating acute uncomplicated influenza (terminated appraisal)**  
 -Noted  
 Add to TLS Terminated Appraisal Action: ZTW
- 12.10 **[TA734] Secukinumab for treating moderate to severe plaque psoriasis in children and young people - New**  
 -Approved  
**CCG Commissioned. Add to TLS RED drug** Action: ZTW
- 12.11 **[TA738] Berotralstat for preventing recurrent attacks of hereditary angioedema -New**  
 -Approved  
**NHSE Commissioned. Add to TLS RED Drug** Action: ZTW
- 12.12 **[TA737] Pembrolizumab with platinum- and fluoropyrimidine-based chemotherapy for untreated advanced oesophageal and gastro-oesophageal junction cancer - New**  
 -Approved  
**NHSE Commissioned. Add to TLS RED Drug** Action: ZTW
- 12.13 **[TA736] Nivolumab for treating recurrent or metastatic squamous cell carcinoma of the head and neck after platinum-based chemotherapy - New**  
 -Approved  
**NHSE Commissioned. Add to TLS RED Drug** Action: ZTW
- 12.14 **[TA735] Tofacitinib for treating juvenile idiopathic arthritis - New**  
 -Approved  
**NHSE Commissioned. Add to TLS RED Drug** Action: ZTW
- 12.15 **[TA739] Atezolizumab for untreated PD-L1-positive advanced urothelial cancer when cisplatin is unsuitable -New**  
 -Approved  
**NHSE Commissioned. Add to TLS RED Drug** Action: ZTW
- 12.16 **[TA741] Apalutamide with androgen deprivation therapy for treating hormone-sensitive metastatic prostate cancer -New**  
 -Approved

- NHSE Commissioned. Add to TLS RED Drug** **Action: ZTW**
- 12.17 **[TA740] Apalutamide with androgen deprivation therapy for treating high-risk hormone-relapsed non-metastatic prostate cancer** -New  
 -Approved  
**NHSE Commissioned. Add to TLS RED Drug** **Action: ZTW**
- 12.18 **[TA743] Crizanlizumab for preventing sickle cell crises in sickle cell disease** -New  
 -Approved  
**NHSE Commissioned. Add to TLS RED Drug** **Action: ZTW**
- 12.19 **[TA742] Selpercatinib for treating advanced thyroid cancer with RET alterations** - New / Cancer Drugs Fund  
 -Approved  
**NHSE Commissioned. Add to TLS RED Drug** **Action: ZTW**
- 12.20 **[TA744] Upadacitinib for treating moderate rheumatoid arthritis** – New  
 -Approved  
 Noting 1.3:  
 If more than 1 treatment is suitable, start treatment with the least expensive drug (taking into account administration costs, dose needed and product price per dose). This may vary because of differences in how the drugs are used and treatment schedule  
 And an expectation biosimilars would be attempted before this in pathway  
**CCG Commissioned. Add to TLS RED drug** **Action: ZTW**
- 12.21 **[TA745] NBTXR-3 for treating advanced soft tissue sarcoma (terminated appraisal)** – New  
 -Noted  
 Add to TLS Terminated Appraisal **Action: ZTW**
- 13 NICE Clinical Guidance**
- 13.1 **[NG191] COVID-19 rapid guideline: managing COVID-19** -Updated  
 -Noted  
 AZ may see an increase in use. Turnaround time for results it quite long.  
 Logistical issues on issuing in pts homes.
- 13.2 **[CG181] Cardiovascular disease: risk assessment and reduction, including lipid modification** - Updated  
 -Noted

Added recommendation 1.3.52 in response to the publication of [NICE's technology appraisal guidance on inclisiran for treating primary hypercholesterolaemia or mixed dyslipidaemia](#)

**Update Somerset CCG guidance**

**Action: Steve Moore**

13.3 **[NG205] Looked-after children and young people** - New

-Noted

SG has shared guidance with LAC leads.

13.4 **[NG206] Myalgic encephalomyelitis (or encephalopathy)/chronic fatigue syndrome: diagnosis and management** - New

-Noted

No prescribing recommendations are included.

13.5 **[NG207] Inducing labour** -New

-Noted

SG has shared guidance with maternity lead.

From a medicines point of view AZ may want to check if there's anything relevant, he may want to pick up.

**14 Specialist Commissioning**

None to discuss this meeting

**15 Risk review and management**

15.1 **Risk review and Management - COVID 19**

Standing item on the risk register are financial / high-cost drugs.

**16 Safety Items, NPSA Alerts and Signals**

16.1 **MHRA Drug Safety Update Set & Oct**

-Noted

16.2 **Topical corticosteroids: information on the risk of topical steroid withdrawal reactions**

-Noted

British Association of Dermatologists have a patient information leaflet on their website.

**Raise awareness of alert to dermatology department & dermatology Nurse Specialists in Somerset.**

**Action: Andrew Prowse**

16.3 **Chloral hydrate, cloral betaine (Welldorm): restriction of paediatric indication**

-Noted

Restricted to short-term treatment (maximum 2 weeks) in specific patient groups.

16.4 **Tofacitinib (Xeljanz<sup>▼</sup>): new measures to minimise risk of major adverse cardiovascular events and malignancies**

-Noted

16.5 **NIHR Alert: Statins do not commonly cause muscle pain and stiffness**

-Noted

**17 BNF Changes**

17.1 **BNF Updates for Sept & Oct**

-Noted

**18 Any Other Business**

18.1 AZ asked for the group's opinion on his proposal that he would be putting out to advert recruit a post for consultant microbiologist pharmacist.

It would be advertised as an AMS Lead 8C Job specification  
SG supported.

**DATE OF NEXT MEETING**

19<sup>th</sup> January 2022

**MEETING DATES FOR 2022**

16<sup>th</sup> March

11<sup>th</sup> May

13<sup>th</sup> July

14<sup>th</sup> September

16<sup>th</sup> November