

Minutes of the **Somerset Prescribing Forum** held via Microsoft Teams, on **Wednesday, 19th January 2022.**

Present:	Dr Clare Barlow (CB)	Chair D&TC, Somerset NHSFT
	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
	Jean Perry (JP)	Contracts Manager, NHS Somerset CCG
	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 (AZ)	Chief Pharmacist, Acute, Somerset NHSFT
Apologies:	Andrew Prowse (AP)	Chief Pharmacist and Controlled Drugs Accountable Officer, YDH NHSFT

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 10th November 2022

4.1 The Minutes of the meeting held on 10th November were agreed as a correct record.

4.2 Review of action points

Actions from Septembers meeting:

Discussion within group ensued around overdue follow ups.

Raised within the organisation, everyone is very aware.

5 Matters Arising

5.1

NIHR Signals

Research shows some types of HRT are linked to lower risks of breast cancer

SM gave an overview, highlighting the need for awareness that severe menopausal symptoms can have a detrimental effect on people. Have open conversations with patients so they can make informed decisions and choices.

The MM team have recently undertaken a significant piece of work in reviewing the formulary and webpage resources, including NICE guidance. It's hoped that this will empower primary care colleagues to have better knowledge over the treatment options listed.

The CCG have commissioned a trial service, with a GP Specialist in menopause and HRT.

SM would welcome any further thoughts around this area of work from secondary care and this group.

-Noted

6 Other Issues for Discussion

-None this month

7 Other Issues for Noting

-None this month

8 Additional Communications for Noting

These are items shared by the MMT with primary care colleagues, which may be of interest for trusts and the wider system.

8.1 DHSC Monthly Supply Issues Updates December 2021

Highlighted that this function is moving from the monthly list to a web-based search programme.

-Noted

8.2 Change to dose for Iron deficiency prescribing

Practices have been informed of the change in guidance for iron deficiency prescribing to one tablet/capsule once a day dosing as initial treatment, based on the British Society of Gastroenterology update. We have many patients prescribed doses above this who we would recommend are reviewed and reduced to once a day dosing as per the new guidance.

Moving to a once daily approach to improve patient concordance, whilst maintaining the same clinical benefit. Will also help with medication waste.

-Noted

Trusts to pick up with ward pharmacists and teams, including maternity teams. **Action: AP & AZ**

8.3 Prescribing recommendations from memory clinic

Recommendations, from the memory clinic around prescribing have been raised with the MM team by GP practices.

SG has raised this with Trusts, they should go through a due process for evidence review and approval.

-Noted

8.4 Adjustment to 2021-22 prescribing and quality improvement scheme

-Noted

8.5 Gliptin and GLP-1 agonist NOT recommended

-Noted

8.6 Diabetics prescribed Oramorph

-Noted

8.7 Repatriating high dose liraglutide prescribing

Prescribers are reminded that liraglutide as Saxenda® is TLS **RED** for specialist prescribing as per NICE.

-Noted

8.8 Amoxicillin 500mg TDS for 5 days only (most indications)

Flagged to primary care outlier prescribing of seven days duration of treatment rather than five days. To be monitored.

-Noted

8.9 Somerset flu outbreak

-Noted

8.10 COPD and HF SMRs

-Noted

8.11 B12 investigation and oral cyanocobalamin prescribing

Plan is to get patients back to injectable B12 following the switch to oral formulation during the pandemic period.

-Noted

8.12 **Antiviral pathway: Covid Medicine Delivery Units in Somerset**

-Noted

8.13 **Improving CVD outcomes - Thank you**

Somerset has had a significant shift over 18months to obtain the top 10% position nationally for high dose statin prescribing.

-Noted

8.14 **Understanding informed consent in medicines-related conversations**

Document produced by SPS, which highlights medico legal issues with regards to risk and benefits.

-Noted

9 Formulary Applications

9.1 [Lixiana Film-Coated Tablets](#) (edoxaban tosilate)

Indicated in prevention of stroke and systemic embolism in adult patients with nonvalvular atrial fibrillation (NVAf) with one or more risk factors, such as congestive heart failure, hypertension, age \geq 75 years, diabetes mellitus, prior stroke or transient ischaemic attack (TIA).

Also indicated in treatment of deep vein thrombosis (DVT) and pulmonary embolism (PE), and for the prevention of recurrent DVT and PE in adults (see section 4.4 for haemodynamically unstable PE patients).

Following the results of a national procurement process Edoxaban has been deemed the most cost effective DOAC and was confirmed at PAMM as formulary first line DOAC.

Most patients are managed in primary care, where there is an AF anticoagulation service.

AP had asked SDB to raise concerns, on his behalf around switching. Edoxaban will be included and discussed at February's SomersetFT DTC meeting.

Edoxaban was approved as the first line DOAC for AF, where its use is appropriate.

Update formulary

Action: DB

9.2 [Utrogestan®](#) 200mg vaginal capsules (micronised progesterone), Besins Healthcare (UK) Ltd.

As per updated NICE guidance [\[NG126\] Ectopic pregnancy and miscarriage: diagnosis and initial management recommendations:](#)

1.5.2 Offer vaginal micronised progesterone 400 mg twice daily to women with an intrauterine pregnancy confirmed by a scan, if they have vaginal bleeding and have previously had a miscarriage. [2021]

1.5.3 If a fetal heartbeat is confirmed, continue progesterone until 16 completed weeks of pregnancy. [2021]

Off-label use of vaginal micronised progesterone.

The updated NICE guidance has been discussed with the Trust. They have been asked to provide the initial supply, in order to avoid in any potential delay in treatment whilst the patient obtains a prescription from the GP. Discussed at this morning's PAMM and happy to support that it would be appropriate for the Trust to provide four weeks supply (or if the patient is over 12 weeks pregnant, then enough to last up until 16 weeks). If a four-week supply doesn't take the patient up to 16 weeks, then primary care could provide the remainder of the supply. This would require good communications from the Trust.

SPF group discussed and in principal trusts support.

The timeframes regarding issuing of supply to patients will be discussed in Februarys SomersetFT D&TC meeting.

Approved as TLS **AMBER** for this indication, subject to agreement from the Trust around supply as noted above.

Add to TLS **AMBER**, subject to agreement from the Trust around supply as noted above. **Action: ZTW**

9.3 **COVID 19 Treatments**

Update from GOV.UK for: Regulatory approval of Paxlovid

For approval

Approved as a **RED** drug for use by the Trust, with the pathway to be updated as per national guidance (NICE is out next week).

-Noted

Add to TLS RED drug.

Action: ZTW

10 **DTC decisions and other reports**

10.1 **Somerset NHS Foundation Trust Mental Health D&TC -**

Last meeting 07/12/21 Minutes not received

Discussed off label use of medicines.

The Trusts non-medical prescribers support patients with ADHD.

10.2 **YDH Medicines Committee -**

Last meetings 19/11/21 & 14/01/22 - November draft Minutes received
YDH have moved back to Moviprep® as had issues with Plenvu®
More PGDs were reviewed and updated.
Discussed the resources for women and children on valproate.
Reviewed and updated the oral methotrexate policy.

10.3 **Somerset NHSFT D&TC** - Last meeting -18/11/2021 Minutes not received
-Nothing to note

10.4 **Somerset Antimicrobial Stewardship Committee**
- Next meeting TBC

10.5 **Somerset ICS Medicines Optimisation (SIMO) Committee** - Next meeting 16/02/2022
-Noted

10.6 **RMOC Update**
-Noted

Part 2 – Items for Information or Noting

11 **NICE Guidance November & December**
-Noted

12 **NICE Technology Appraisals**

12.1 **[TA747] Nintedanib for treating progressive fibrosing interstitial lung diseases** - New

-Approved

NHSE Commissioned. Add to TLS RED Drug

Action: ZTW

12.2 **[TA746] Nivolumab for adjuvant treatment of resected oesophageal or gastro-oesophageal junction cancer** - New

-Approved

NHSE Commissioned. Add to TLS RED Drug

Action: ZTW

12.3 **[TA749] Liraglutide for managing obesity in people aged 12 to 17 years (terminated appraisal)**

-Noted

12.4 **[TA748] Mexiletine for treating the symptoms of myotonia in non-dystrophic myotonic disorders** -New

-Approved

NHSE Commissioned. Add to TLS RED Drug

Action: ZTW

- 12.5 **[TA751] Dupilumab for treating severe asthma with type 2 inflammation** - New
 -Approved
NHSE Commissioned. Add to TLS RED Drug Action: ZTW
- 12.6 **[TA750] Olaparib for maintenance treatment of BRCA mutation-positive metastatic pancreatic cancer after platinum-based chemotherapy (terminated appraisal)**
 -Noted
- 12.7 **[TA754] Mogamulizumab for previously treated mycosis fungoides and Sézary syndrome** - New
 -Approved
NHSE Commissioned. Add to TLS RED Drug Action: ZTW
- 12.8 **[TA753] Cenobamate for treating focal onset seizures in epilepsy** – New
 -Approved
CCG Commissioned. Providers are NHS hospital trusts and primary care providers. Add to TLS AMBER Drug Action: ZTW
- 12.9 **[TA752] Belimumab for treating active autoantibody-positive systemic lupus erythematosus** - New
 -Approved
NHSE Commissioned. Add to TLS RED Drug Action: ZTW
- 12.10 **[TA756] Fedratinib for treating disease-related splenomegaly or symptoms in myelofibrosis** -New
 within the Cancer Drugs Fund
 -Approved
NHSE Commissioned. Add to TLS RED Drug Action: ZTW
- 12.11 **[TA755] Risdiplam for treating spinal muscular atrophy** -New
 -Approved
NHSE Commissioned. Add to TLS RED drug Action: ZTW
- 12.12 **[TA757] Cabotegravir with rilpivirine for treating HIV-1** – New
 -Approved
NHSE Commissioned. Add to TLS RED Drug Action: ZTW

- 12.13 **[TA758] Solriamfetol for treating excessive daytime sleepiness caused by narcolepsy** - New
 -Approved
CCG Commissioned. Add to TLS RED – PBR excluded high-cost drug
Action: ZTW
- 12.14 **[TA759] Fostamatinib for treating refractory chronic immune thrombocytopenia** - New
 -Noted
Add to TLS Not Recommended. **Action: ZTW**
- 12.15 **[TA760] Selpercatinib for previously treated RET fusion-positive advanced non-small-cell lung cancer** -New
 within the Cancer Drugs Fund
 -Approved
NHSE Commissioned. Add to TLS RED Drug **Action: ZTW**
- 13 NICE Clinical Guidance**
- 13.1 **[NG188] COVID-19 rapid guideline: managing the long-term effects of COVID-19** - Update
 -Noted
- 13.2 **[NG208] Heart valve disease presenting in adults: investigation and management** - New
 -Noted
- 13.3 **[CG187] Acute heart failure: diagnosis and management** -Update
 -Noted
- 13.4 **[NG28] Type 2 diabetes in adults: management** - Update
 -Noted
- 13.5 **[NG203] Chronic kidney disease: assessment and management** - Update
 -Noted
- 13.6 **[NG126] Ectopic pregnancy and miscarriage: diagnosis and initial management** - Update
 -Noted

- 13.7 **[NG143] Fever in under 5s: assessment and initial management** - Update
-Noted
- 13.8 **[NG209] Tobacco: preventing uptake, promoting quitting and treating dependence** - New
Treating tobacco dependence programme of work is currently led by Public Health.
CR enquired if there is a plan for this to be led by Trusts.
A discussion between Public Health and Trusts would need to take place, CR will feedback this to her colleagues.
- 13.9 **[NG191] COVID-19 rapid guideline: managing COVID-19** - Update
-Noted
- 13.10 **[NG210] Pelvic floor dysfunction: prevention and non-surgical management** – New
-Noted
The MM team will review this guidance and include anything useful on our website. **Action: Sam Morris and Daniela Broughton**
- 13.11 **[NG151] Colorectal cancer** - Update
-Noted
- 13.12 **[NG131] Prostate cancer: diagnosis and management** - Update
SG suggested the group members might want to raise within their Trusts
-Noted
Raise with Trusts teams. Action: AP & AZ
- 13.13 **[NG12] Suspected cancer: recognition and referral** - Update
-Noted
- 13.14 **[CG150] Headaches in over 12s: diagnosis and management** - Update
-Noted
- 13.15 **[NG211] Rehabilitation after traumatic injury** -New
Rehabilitation services are commissioned by CCGs. Providers are NHS hospital trusts, community providers and primary care providers.

-Noted

14 Specialist Commissioning

Talk of specialist commissioning coming back to ICS commissioning in the future.

An area for consideration at future meetings.

15 Risk review and management

15.1 COVID 19 Treatments

16 Safety Items, NPSA Alerts and Signals

16.1 MHRA Drug Safety Update Nov 2021 and Dec 2021

-Noted

16.2 Adrenaline auto-injectors: reminder for prescribers to support safe and effective use

The CCG adrenaline auto-injector advice on use for GPs and patients has been updated to include a link to this Drug Safety Update.

-Noted

16.3 Yellow fever vaccine (Stamaril): new pre-vaccination checklist

-Noted

16.4 Dapagliflozin (Forxiga): no longer authorised for treatment of type 1 diabetes mellitus

Communications have been issued around this.

-Noted

16.5 Venetoclax (Venclyxto ▼): updated recommendations on tumour lysis syndrome (TLS)

-Noted

16.6 Haloperidol (Haldol): reminder of risks when used in elderly patients for the acute treatment of delirium

-Noted

16.7 COVID-19 Therapeutic Alert: Withdrawal of the Recommendation for Consideration of Inhaled Budesonide as a Treatment Option for COVID-19

-Noted

16.8 NIHR Evidence - Persistent throat symptoms should not be treated with pills that reduce stomach acid

SG asked Trusts to raise with their GI and ENT teams.
-Noted.

Raise with GI and ENT teams

Action: AP & AZ

17 High-Cost drugs

17.1

CCG currently in block contracts.
Internal discussions underway around the process to be put in place for next year.
A turnaround implying a return to PBR.

Await position.

-Noted

18 Any Other Business

SG highlighted a document due out with a greater focus on the opioid problem re: addiction and misuse.

Work across the interface to try and address / stop patients becoming addicted and misusing prescribed medications including opioids, hypnotics etc.

Stopping patients becoming addicted after an acute procedure.

Pressure to manage the outcomes of poor prescribing.

Work together across all the services, focus on inequalities and deprivation.

DATE OF NEXT MEETING

16th March 2022

MEETING DATES FOR 2022

11th May

13th July

14th September

16th November