

Nottinghamshire Area Prescribing Committee

APC meeting 19th March 2020, due to the Covid-19 Pandemic a decision was made to virtually approve the papers as per the agenda. The following minutes provide an account of the decisions and comments made by the APC members

All attendees should be aware that public authorities are legally required to comply with the Freedom of Information Act 2000. The minutes and papers from this meeting could be published on the Publication Scheme or internet with all names included, unless notified to the Chair before the meeting commences or included in a pre-agreed confidential section due to the sensitive nature of the topic.

Provided comment:

Laura Catt (LC)	Prescribing Interface Advisor	Representing County CCGs
Steve Haigh (SH)	Medicine Information Pharmacist	Sherwood Forest Hospitals NHS Foundation Trust
Matt Elswood (ME)	Chief Pharmacist	Nottinghamshire Healthcare Trust
Tim Hills (TH)	Interim Assistant Head of Pharmacy	Nottingham University Hospitals Trust
David Kellock (DK)	Chair SFH Drug and Therapeutics Committee	Sherwood Forest Hospitals NHS Foundation Trust
Sarah Northeast (SN)	Advanced Nurse Practitioner	CityCare
Amanda Roberts (AR)	Patient representative	
David Wicks (DW)	GP	Newark and Sherwood CCG
Khalid Butt (KB)	GP, LMC representative	Mansfield and Ashfield CCG
Debbie Storer (DS)	Medicine Information Pharmacist	Nottingham University Hospitals Trust

1. **Apologies:** N/A

2. **Declarations of interest**
None declared.

3. **Minutes of the last meeting/matters arising**
The minutes from the previous meeting (Jan2020) were attached within the papers sent for virtual approval. No comments for correction were returned and as such the minutes were taken to be reviewed and agreed as accurate.

Matters arising:

Melatonin –

- Working group continues to progress work on sleep and melatonin guideline with an aim to bring to APC in May.

- Commissioners continue to work with the trusts to determine pass through capping arrangements
- Melatonin to retain current traffic light status for now.

Phosphate binders shared care protocol

- Awaiting a review from NUH renal pharmacist

DOAC patient alert card

- Completed but awaiting a quote for printing and a final version to be submitted for uploading on the APC website.

Childrens monitoring guidance (blood pressure and pulse)

- No progress on this currently

Bronchiectasis Self-Management plan

- Still awaiting finalised version from the author(s) before uploading

****All other actions were either complete or on the agenda****

4. FOR RATIFICATION – Antimicrobial Guidelines; diverticulitis (Update)

AR requested clarification as to who is assessing the patient.

DK asked for the repeated entry regarding immunosuppressants to be removed.

ACTION: KR to amend and upload to the Antimicrobial Guidelines

5. FOR RATIFICATION – Antimicrobial Guidelines; Impetigo (Update)

Approved with minor corrections.

DW requested promotion of the recommendation to use hydrogen peroxide cream first line as many GPs will be unfamiliar with it. A note will be added to the bulletin and to the joint formulary newsfeed

**ACTION: JT to amend and upload to the Antimicrobial Guidelines
JT to add hydrogen peroxide to the Joint Formulary**

6. FOR RATIFICATION – Opioid deprescribing guide (New)

The opioid deprescribing guide was written by JT with clinical input from local specialists. Roger Knaggs, Specialist Pharmacist in Pain Management, was the main contributor. The purpose of the guideline is to provide guidance to primary care prescribers on tapering opioid doses in persistent non-cancer pain.

The committee approved the new guideline.

ACTION: JT to upload to APC website

7. FOR RATIFICATION – Liothyronine position statement (Update)

The liothyronine position statement was updated in line with guidance from NHS England. The associated APC patient information leaflet has been replaced by the NHS England / PrescQIPP leaflet (linked from the position statement).

The committee approved the updated position statement.

ACTION: JT to upload to APC website

8. **FOR RATIFICATION – Methylphenidate and atomoxetine in Adults SCP (New)**
9. **FOR DISCUSSION – Prescribing for adults with ADHD and no other mental health conditions**

(Items 8 and 9 together) Minor comments were received on the shared care documents and will be reviewed. However the overall principal of having shared care for one cohort and a separate GP only pathway for another cohort was not accepted. Safety concerns were raised with regards to GPs managing without specialist input which goes against NICE guidance which recommends shared care.

ACTION: LC to feed back to the mental health commissioning team that the APC will progress the shared care protocol for ALL adult patients once the commissioning arrangements have been put in place.

10. **FOR RATIFICATION – Nausea and Vomiting in pregnancy guideline (Update following ondansetron safety alert)**

In response to a MHRA safety alert regarding ondansetron and a potential increased risk of oral clefts when used during the first trimester of pregnancy, an interim update of the guideline had been proposed, pending a full guideline review that is in progress by a SFH specialist. MHRA advice is that ondansetron should only be used if other treatments are not suitable and women are fully informed of risks and benefits. Therefore ondansetron had been removed as a treatment option for initiation in primary care. This interim update was approved and it was requested that NUH involvement be sought.

ACTION: Interim update to be uploaded to APC website and traffic light classification of ondansetron to be amended to Amber 2.

LK to work with the author to update guideline and seek NUH involvement

11. **FOR RATIFICATION – Type 2 diabetes (March 2020) (Update)**

Rosamund Bell, diabetes specialist pharmacist at NUH, has updated the type 2 diabetes guideline with support from consultants and input from Sherwood Forest Hospitals and primary care. The update was based on European Association for the Study of Diabetes and the American Diabetes Association (EASD-ADA) guidelines and Diabetes Canada Clinical practice guideline, which have superseded the current NICE guidance.

The updated guideline was approved subject to minor amendments.

ACTION: LK/JT to liaise with Rosamund Bell to make changes and then upload to APC website

12. **FOR RATIFICATION - Continence formulary (Update)**

The Nottinghamshire integrated Continence primary care formulary has been reviewed and updated following area wide consultation.

DS and TH queried if there been consultation with NUH specialists. LC clarified that secondary care were not involved as they have their own continence formulary.

The committee approved the updated formulary.

ACTION: LC to upload to the APC website ensuring it is clear that it is a primary care formulary

13. **FOR RATIFICATION – Gynaecomastia guideline (Update)**

Some minor amendments suggested and clarity around aripiprazole dose and continuation.

ACTION: HG to update the document and upload

14. RMOG update

Nothing noted

15. Formulary amendments and horizon scanning

a. Formulary amendments

- **Gestone**® (progesterone) for menstrual disorders changed from RED to GREY following discontinuation.
- **Antimicrobials:** clindamycin, co-trimoxazole, vancomycin caps and tinidazole changed from AMBER 2 to AMBER 3 for use in line with antimicrobial guidelines.
- **Domperidone** following licensing change
 - for GI motility in children under 12 years – traffic light changed from GREEN to AMBER 2.
 - For nausea & vomiting in children under 12 years – traffic light changed from GREEN to GREY.
- **Melatonin** – GREY for short term treatment of jet-lag in adults.
- **Melatonin** 1mg/mL oral solution and 3mg film coated tablets – GREY
- **Pregabalin** – AMBER 3 for restless legs and add link to algorithm
- **Sucralfate oral suspension** (sugar free) 1g/ 5mL – Licensed liquid now available again and to be added as AMBER 2 for gastric / duodenal ulceration and gastritis.
- **Cyclopentolate** - request to add 0.5% cyclopentolate eye drops to formulary in line with other strengths

b. Horizon scanning

- **Spravato**® 28 mg nasal spray (esketamine hydrochloride) - JFG suggested GREY, but ME confirmed that it has been agreed as RED for use within Notts Healthcare Trust.
- **Sunosi**® 75 mg tablets (solriamfetol Hydrochloride) for narcolepsy – GREY – no formal assessment

ACTION: KR & JT to update the Joint Formulary

16. New Submissions

a. **Betesil**® (Betamethasone) Plaster

There were mixed opinions on the traffic light status of this item so an e mail vote was called for. The majority of the members present (according to the Terms of Reference) voted for an Amber 2 classification with restrictions - for patients with inflammatory skin disorders which do not respond to treatment with less potent corticosteroids, such as eczema, lichenification, lichen planus, granuloma annulare, palmoplantar pustulosis, mycosis fungoides and chronic recalcitrant plaque psoriasis

ACTION: KR to update the joint formulary and add to the JFG action plan for a follow up audit of use in 6 months.

b. **Apomorphine** (Dacepton®)

Request to add Dacepton® (apomorphine) injection and infusion to the formulary as in addition to

Apo-Go[®] for Parkinson's Disease, The choice of which product to use will be left to the consultants and specialist nurses taking into account patient preference.

The committee approved Dacepton[®] for addition to the formulary with an AMBER 1 (shared care) classification.

ACTION: DT to add to the existing shared care protocol and amend the formulary highlighting the need to prescribe by brand

c. Chloral Betaine

A formulary submission was received from NUH, for the use of Chloral Betaine tablets for paediatric use for the treatment of insomnia, where chloral hydrate liquid is unsuitable due to ketogenic diet. The committee approved chloral betaine as AMBER 2 for the above indication

ACTION: KR to update the formulary

d. Verkazia[®] eye drops

Request from the ophthalmology team at NUH to add ciclosporin 0.1% eye drops (Verkazia[®]) to the formulary for the following indications:

- Vernal keratoconjunctivitis (VKC) in children from 4 years and adolescents
- Allergic Keratoconjunctivitis (AKC) – unlicensed indication, but is licensed for VKC in children over 4 and adolescents. Currently Ikervis[®] is being used unlicensed for AKC and is not licensed in children and adolescents.

The committee approved a change of classification from GREY – no formal assessment to AMBER 2 for the above indications. JFG requested that a supporting leaflet be produced including instruction to prescribe by brand and additional clarity on follow-up arrangements.

ACTION: DT to ask the submitter to produce a prescribing information sheet for this specific brand, once complete KR to add to the formulary as Amber 2

e. Cinacalcet traffic light update

Request to change from RED to AMBER 2 classification for the following indications:

- For people with primary hyperparathyroidism (PHPT) if surgery has been unsuccessful, is unsuitable or has been declined, and if their albumin adjusted calcium level is either:
 - 2.85mmol/litre or above with symptoms of hypercalcaemia or
 - 3.00mmol/litre or above with or without symptoms of hypercalcaemia

The committee approved an AMBER 2 classification for the above indication. Although treatment will be lifelong and on-going specialist review is not required, it was felt important that a point of contact back to secondary care be highlighted.

The patient should be first stabilised by a specialist before discharge. Then with a clear plan for ongoing monitoring requirements and easy to access specialist support should problems arise.

ACTION: DT to update the formulary and provide an Amber 2 information sheet. Interface team to add to the action log to audit additional usage and primary care impact in 6 months

17. APC forward work plan

Noted, with two documents requested for review date extension with no changes required:

- Buccal Midazolam for children (costs updated) approved
- Nebulised Colomycin approved

ACTION: LC to check all links and update the review date

18. Dates of Future Meeting

21st May 2020 – Virtual meeting planned at present