

**Minutes of Medicines Commissioning Committee Meeting,
Wednesday 16 July 2014
Severus Room, West Offices, York**

1. Apologies / Attendance

		FEB	MAR	MAY	JUN	JUL	AUG
Chair & GP Prescribing Lead - VoYCCG	Dr Shaun O'Connell (SO'C)	✓	✓	✓	A	✓	
Strategic Lead Pharmacist- CSU	Mrs R Ainger (RA)	✓	✓	A	✓	✓	
GP Prescribing Lead – S&RCCG	Dr G Black (GB)	✓	✓	✓	✓	✓	
Principal Pharmacist - Medicines Information	Mrs J.E. Crewe (JEC)	✓	✓	✓	✓	✓	
Senior Innovation & Improvement Manager	Mrs B Case (BC)	A	✓	A	A	A	
Consultant Anaesthetist	Dr P Hall (PH)	✓	✓	✓	✓	A	
Deputy Chair & Consultant Physician	Dr D Humphriss (DH)	A	A	X	A	A	
Chief Pharmacist	Mr D Pitkin (DP)	✓	A	X	A	A	
GP Vale of York CCG	Dr W Ovenden			✓	✓	A	
Senior Pharmacist - Clinical Effectiveness, CSU	Mrs D Tomlinson (DT)	✓	✓	✓	✓	✓	
Consultant Physician	Dr PE Jennings (PJ)	✓	A	A	✓	✓	
Deputy Chief Pharmacist	Mr S Parkes (SP)	A	✓	✓	✓	A	
Consultant Rheumatologist	Dr M Quinn (MAQ)	✓	A	X	A	A	
Management Assistant – VoYCCG	Rachael Murray (RM)	✓	✓	✓	A	A	
Team Administrator	Heather McPherson-Lee (HML)			✓	A	A	
Deputy Chief Pharmacist Tees Esk and Wear Mental Health Trust (TEWV)	Richard Morris (RM)				✓	A	

Item		Action
1	<p>General business</p> <p>Apologies Dr Peter Hall, Stuart Parkes, Dr William Ovenden, Elaine Weston, Richard Morris</p> <p>Dr Greg Black chaired the meeting</p> <p>Declarations of Conflicts of Interest None noted</p>	
2	<p>Minutes of last meeting</p> <p>Correction to minutes – to record under the item of Shared Care Guideline (SCG) that additional evidence is required to support the inclusion of ulcerative colitis in the ciclosporin SCG.</p>	

	Otherwise, the minutes were accepted as an accurate record of the meeting.	
3	<p>Matters arising</p> <p>a) Chairpersons actions to report: nil to note</p> <p>b) COPD guidance – noted that SRCCG is currently reviewing the existing VoY guidance. Furthermore it was noted that there are various new products to discuss e.g. Fostair. It is anticipated that there would be some new product requests going forward. It was noted that CCGs and the acute trust should ensure that due consideration of safety issues in relation to asthma (as recently published) has been undertaken and this should be linked to the asthma formulary review process.</p> <p>c) Eflornithine 11.5% cream – Vaniqa. SRCCG are minded to commission this as green. This will be formally discussed at VoYCCG SMT shortly. GP information leaflet to be amended to include more information regarding monitoring. SOC indicated it was reasonable to prescribe on the basis of an underlying medical condition.</p> <p>d) VTE prophylaxis in lower limb injury (continued from June meeting / Acute Trust D&T). It was agreed that a leaflet for patients and information sheet for GPs and communication pathway is required. It was also agreed that a two week supply of the drug should be given at clinic.</p> <p>e) Gender dysphoria document – noted. Referred to also under Vaniqa submission. PEJ is happy to provide advice and support to GPs on prescribing for gender dysphoria if required.</p> <p>f) Network view on familial breast cancer guidance – noted that this had been addressed in VoY through Referral Support Service (RSS). No further action required at this stage.</p>	<p>GB MM team Acute Trust Res- piratory Group</p> <p>CCGs</p> <p>Acute Trust</p>
4	<p>North Yorkshire and Humber Treatment Advisory Group (TAG) recommendations – update on CCG agreed/outstanding decisions</p> <p>a) Picato Gel –update of pathway: draft to be produced for next meeting.</p> <p>Further TAG recommendations are awaited.</p>	SOC
5	<p>NICE Technology Appraisals</p> <p>a) NICE compliance sheet – to be updated following latest TAs.</p> <p>b) Canagliflozin http://www.nice.org.uk/Guidance/TA315. This was published at the end of June. It is noted that VoY and SR CCGs commission this drug according to NICE guidance.</p> <p>c) NICE Update –Summary of NICE guidance</p> <ul style="list-style-type: none"> • NICE Bites – MI secondary prevention – to follow. • NICE Bites – prostate cancer: KE to meet with Mr Wilson in late July. • NICE Bites – neuropathic pain – for September meeting. <p>ACTION: spreadsheet to be updated. NICE commissioning positions to be recorded and actioned accordingly.</p>	Send to VOY diabetes implemen- tation group

6	<p>New submission (include new therapies and changes to existing policy positions)</p> <p>a) Loperamide for high stoma output – JC to check whether Gastroenterologists are happy to prescribe loperamide capsules rather than tablet formulation.</p> <p>Recommendation: To come back to next meeting.</p>	JC
7	<p>Other medicines issues (local and/or national)</p> <p>a) Biologics – immunosuppression/management of infections GP information – some minor alterations</p> <p>b) NHS England specialist circular June 2014 updated policies – noted that Duodopa has been updated and the commissioning arrangements are now the responsibility of NHS England.</p> <ul style="list-style-type: none"> • New CCG QIPP topics – RA to share before next meeting 	To be put on VOY website RA
8	<p>Formulary items</p> <p>a) Diabetes chapter – agreed subject to adding non-needle devices as black. Link to formulary to be circulated to GPs and practice nurses.</p> <p>b) Update on progress / future considerations including:</p> <p>a. Respiratory chapter – asthma and COPD review. SOC to encourage progression of asthma review.</p> <p>b. Epilepsy chapter – to incorporate MHRA review: it is anticipated that this will be completed in September.</p>	Action RA/DT DT/JC
9	<p>Shared Care Guidelines</p> <ul style="list-style-type: none"> • Cinacalcet outstanding. • Renal SCGs outstanding. • Dronedarone for AF – expired and awaiting update. • Dalteparin – in draft, commissioning positions to be discussed at next meeting • Modafanil – updated drafted. There is a NICE unlicensed review in draft, not recommended for MS. Extend expiry date pending NICE review. • Acetylcysteine for pulmonary fibrosis – no monitoring required. To consider need for a GP information leaflet. • Flutamide – awaiting decision of RAG status – is there any ongoing monitoring? <p>ACTION: SCG to be updated / reissued accordingly and report to next meeting.</p>	
10	<p>Red and Black Drug Exception Reporting</p> <p>Nil to report</p>	
11	<p>Mental Health Medicines Commissioning</p> <p>Nil to note</p>	

12	<p>Medicines safety</p> <p>a) Latest MHRA Drug Safety update – communication to practices to check co-prescribing of renin angiotensin system drugs as a one off letter to practices</p> <p>b) Roche BM stick machines – noted.</p> <p>c) Methotrexate – it was agreed that the CCGs should cease to commission 10mg tablet prescribing. Communication plan required including community pharmacy, also 28 day maximum amount prescribed was proposed.</p> <p>It was also noted that there were administration changes for Metoject – it is now a prefilled autoinjector.</p>	
13	<p>Local pathways</p> <p>Nil to report</p>	
14	<p>Baseline data</p> <p>To follow – no usage data available at present</p>	
15	<p>Horizon scanning</p> <p>Nil to report</p>	
16	<p>Patient and clinical communications</p> <p>Nil to report</p>	
17	<p>AOB</p> <ul style="list-style-type: none"> • Further request made to a GP to prescribe mepacrine – to accelerate the commissioning position decision • Domperidone to stimulate lactation – acute trust pharmacist to check that recommendations from specialist nurse are in line with recent MHRA advice • Glycopyrronium for hyperhidrosis – new product request is required as this drug is currently not commissioned • Triptorelin – updating of paperwork regarding choice of GnRH. SO following this up with Mr Wilson. 	
	<p>Date of next meeting:</p> <p>August meeting cancelled.</p> <p>Next meeting Wednesday 17 September, 10am-12pm, Severus Room, West Offices, Station Rise, York, YO1 6GA</p>	

Recommendations from York and Scarborough Medicines Commissioning Committee July 2014

Drug and Brand name	Indication	Recommendation	Place in therapy	RAG status	Potential full year cost impact Scarborough and Ryedale CCG
Eflornithine 11.5% cream (Vaniqa®)	Facial hirsutism in women	Approved	Supported existing local position for specialist initiation in patients as a treatment until systemic therapy demonstrates effectiveness.	RAG status to be discussed	Represents a review of existing position. Spend April 13 to April 14 £7,600.
Canagliflozin (Invokana®)	Oral therapy for type 2 diabetes	Approved – NICE Appraisal	Please see attached NICE Update	Green	Uptake likely less than NICE predict. Prescribing data shows for the period of May'13 to April'14 there have been only 1 prescribed items of dapagliflozin in SR CCG (spend = £33.80), which is treatment within the same drug class as canagliflozin.
Methotrexate 10mg tablets	All indications for oral therapy	Not approved	Recommended that only methotrexate 2.5mg tablets remain formulary choice on patient safety grounds.	As per amber shared care guidelines	
Duodopa® intestinal gel (levodopa/carbidopa)	Parkinson's Disease	Change in commissioning responsibilities	NHS England now responsible for the commissioning arrangements for this specialist treatment	As per NHS England recommendation. Not suitable for GP prescribing.	Nil