Recommendations from York and Scarborough Medicines Commissioning Committee 21 May 2014

Drug and Brand name	Indication	Recommendation	Place in therapy	RAG status	Potential full year cost impact VOYCCG
Alogliptin (Vipidia)	Adults with Type 2 diabetes	Not approved	Not routinely commissioned following consultation with the Vale of York diabetes implementation group.	Black	Nil
Nomegestrol/ Estrodiol (Zoely)	Combined oral contraceptive	Not approved	Not routinely commissioned. Significantly more expensive than other agents with insufficient evidence of clinical benefits over other alternatives.	Black	Nil
Fluticasone furoate/vilanterol (Relvar)	Asthma	Not approved	Not routinely commissioned. Safety concerns have been raised, together with practical concerns highlighted around patient factors and its place in asthma guidelines	Black	Nil
Fluticasone furoate/vilanterol (Relvar)	COPD	Not approved	Not routinely commissioned. Limited evidence comparing with licensed alternatives. Safety concerns have been raised and need to be addressed.	Black	Nil
Triptorelin SR (Decapeptyl SR)	Prostate cancer	Approved	Recommended as the agent of choice in this class. Lower cost agent with the advantage of reduced injection frequency.	Amber – specialist recommendation	A saving of £2,688/year based on uptake of 2 new patients/month across York & Scarborough Trust
Inhaled colistimethate (Promixin)	Non-CF bronchiectasis (unlicensed)	Not approved	Not routinely commissioned. Lack of robust clinical and cost effectiveness to support its use.	Black	Nil
Metformin oral sachets (Glucophage)	Type 2 diabetes	Discontinued by manufacturer	Product no longer manufactured, replacement product (oral solution) more costly.	n/a	Cost pressure of approximately £54,000

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Flutter device (approved in March without estimated numbers – now provided)	Oscillating positive pressure device to improve/ease airway clearance	Approved by SMT in March (without estimated numbers)	Treatment aid in COPD	Amber – specialist initiation	£40.50/unit for approx. 20 patients per annum initially so cost pressure of £1215 per annum
Teriflunomide – GP blood testing	Multiple sclerosis	Blood monitoring agreed	Agreed that CCG should support primary care based blood testing for this drug. The CCG must clarify the position for future similar requests.	Red drug with GP surgery appointments for blood testing	f204 approximately based on 2 patients per month across York and Scarborough Trust Annual cost - £2,448 There is also an activity based cost pressure from additional outpatient follow up* Finance and contracting colleagues to note, see additional paper on this.

Reminder of Outstanding NICE Technology Appraisals – all were reported to 15 April SMT								
TA298 Ranibizumab November 2013	Approved by NICE as an option for treating visual impairment due to choroidal neovascularisation secondary to myopia when the manufacturer provides the drug with the discount agreed in the patient access scheme	http://publications.nice.org.uk/ranibizu mab-for-treating-choroidal- neovascularisation-associated-with- pathological-myopia-ta298	Red	Hospital pharmacists reported that Ophthalmology directorate colleagues had not had confirmation from the CCG that these drugs were commissioned.				
TA301 Fluocinolone acetonide intravitreal implant November 2013	Approved by NICE as an option for treating chronic diabetic macular oedema that is insufficiently responsive to available therapies only if: • The implant is to be used in an eye with an intraocular (pseudophakic) lens and • The manufacturer provides fluocinolone acetonide intravitreal implant with the discount agreed in the patient access scheme	http://guidance.nice.org.uk/TA301	Red	For finance and contracting colleagues to be aware of this. The CCG is not compliant with NICE for these drugs if hospital colleagues are not yet using when appropriate.				