

NHS Vale of York

Clinical Commissioning Group

Yorkshire and Humber Commissioning Support

Item 14.2

Recommendations from York and Scarborough Medicines Commissioning Committee June 2015 V1.1

| Drug name | Indication | Recommendation | Rationale for recommendation | Place in therapy | RAG status | Potential full year cost impact |
|--|--|----------------------|---|---|---------------------------------|---|
| Infliximab (Remsima®) IV infusion Lercanidipine | Ulcerative colitis, Crohn's Disease, rheumatoid arthritis as per NICE guidance. Hypertension | Approved Approved | More cost effective than originator product. Cost effective formulary | 1 st line choice for new initiation and existing patients in gastroenterology. New patients only within rheumatology. 2 nd line after | Red – hospital only Green | Projected savings £557,080 per annum subject to agreement Savings |
| tablets (various generics and Zanidip®) | | | option within its class | amlodipine | | may be achieved. |
| Mesalazine (Salofalk [®] MR) granules | Ulcerative colitis | Approved | Cost effective choice, granules offer a choice where unable to swallow tablets. | Salofalk is a 1 st line option alongside Pentasa [®] and Octasa [®] . | Green | May offer savings if used in preference to Pentasa® and Mezavant® XL. |
| Vitamin B Compound strong tablets | Alcohol detoxification | Approved | NICE guidance only recommends for re-feeding syndrome. TEWV and Leeds York mental health no longer routinely recommend this product. | Not commissioned for this indication. | Black | Savings could be achieved by stopping |

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|---|---|----------------|--|---|---|--|
| Tapentadol prolonged released tablets (Palexia SR®) | Chronic pain | Deferred | Further clarification required upon its place in therapy (review expected September 2015) | Not recommended for prescribing until formally reviewed | Grey | Nil |
| Vedolizumab (Entyvio®) IV infusion | Ulcerative colitis | Approved | Approved in line with <u>NICE</u> <u>TA 342</u> | Specialist prescribing | Red | £161,445 (based on 15 patients in year 1) without PAS scheme |
| Apixiban (Eliquis®) tablets | Treatment and secondary prevention of DVT/PE | Approved | Approved in line with NICE TA 341 | As a treatment option alongside other anticoagulant therapies. | Green | Drug cost similar to other NOACs. |
| Ustekinumab (Stelara®) s/c injection | Psoriatic arthritis | Approved | Approved in line with <u>NICE</u> <u>TA 340</u> | Specialist prescribing | Red | Costs similar to other biologics. |
| Fosfomycin (as Fosfomycin trometamol) 3g granules for oral solution | Antimicrobial | Approved | Licensed product now available | No change to formulary recommendation, only to use a licensed product. | Amber – following Clinical microbiologist recommendation | £58.55 |

| Drug name | Indication | Recommendation | Rationale for | Place in therapy | RAG status | Potential full |
|--|--------------|------------------------|--|---|---------------|------------------|
| | | | recommendation | | - | year cost impact |
| • • | • | flect amendments requi | ired to local formulary. Refer t | o COPD pathway for all treat | ment options. | Choices |
| reflect cost effective | | | | | | |
| Long acting antimusc | - | ts (LAMA). | 1 | | | |
| Umeclidinium | COPD | Approved | Cost effective choice with | 1st choice on COPD | Green | |
| 55mcg inhaler | | | Ellipta [®] device offering | pathway | | |
| (Incruse Ellipta [®]) | | | continuity of device type | | | |
| | | | through the pathway | | | |
| Glycopyrronium 44mcg inhaler (Seebri Breezhaler®) | COPD | Approved | Cost effective LAMA | 2 nd choice in COPD pathway | Green | |
| Tiotropium inhaler (Spiriva Handihaler [®] and Spiriva Respimat [®]) | COPD | Approved | Not a cost effective choice within available inhaled LAMA choices. | Continuation in existing patients only. Not listed on the COPD pathway. | Green | |
| Long acting beta ago | nists (LABA) | | | | | |
| Formoterol 6mcg and 12mcg (Oxis [®] turbohaler) | COPD | Approved | Not as cost effective choice as other available inhaled LABA choices. | Continuation in existing patients only. Not listed on the COPD pathway. | Green | |
| Formoterol 12mcg inhaler (Foradil®) | COPD | Approved | Not as cost effective choice as other available inhaled LABA choices. | Continuation in existing patients only. Not listed on the COPD pathway. | Green | |
| Indacaterol 150mcg & 300mcg inhaler (Onbrez Breezhaler®) | COPD | Approved | Cost effective choice, device offers continuity with other Breezhaler [®] devices included in COPD pathway | 3 rd choice LAMA on COPD pathway | Green | |

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|---|---------------------|------------------------|---|---|------------|---|
| Olodaterol 2.5mcg inhaler (Striverdi Respimat®) | COPD | Not approved | Not a cost effective choice within available inhaled LAMA choices. | Not commissioned | Black | |
| Salmeterol 25mcg generic MDI inhaler | COPD | Approved | Not as cost effective choice as other available inhaled LABA choices. | Continuation in existing patients only. Not listed on the COPD pathway. | Green | |
| Salmeterol 50mcg (Serevent accuhaler®) | COPD | Approved | Not as cost effective choice as other available inhaled LABA choices. | Continuation in existing patients only. Not listed on the COPD pathway. | Green | |
| Combination of long | acting beta agonist | s and long acting anti | muscarinic antagonists (LABA/L | AMA) | 1 | |
| Umeclidinium/ Vilanterol 55mcg/22mcg inhaler (Anoro Ellipta®) | COPD | Approved | Cost effective choice with Ellipta [®] device offering continuity of device type through the pathway | 1 st choice on COPD pathway | Green | There are cost savings compared to prescribing separate LABA/LAMA individual inhalers |
| Indacaterol/ Glycopyrronium 85mcg/43mcg (Ultibro Breezhaler®) | COPD | Approved | Cost effective choice, device offers continuity with other Breezhaler [®] devices included in COPD pathway. | 2 nd choice on COPD pathway | Green | There are cost savings compared to separate individual inhalers |

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|--|---------------------|------------------|---|---|------------|--|
| Aclidinium/ formoterol 340/12 inhaler (Duaklir Genuair [®]) | COPD | Approved | Cost effective choice. | 2 nd choice on pathway | Green | There are cost savings compared to separate individual inhalers |
| Long acting beta ago | nists and corticost | eroid (LABA/ICS) | | | | |
| Fluticasone/vilanter ol 92mcg/22mcg inhaler (Relvar Ellipta®) | COPD | Approved | Most cost-effective LABA/ICS combination and the Ellipta® device offers continuity of device type through the pathway | 1 st line LABA/ICS choice on pathway. | Green | |
| Beclometasone/for moterol 100/6 inhaler (Fostair®) | COPD | Approved | Cost effective MDI when patients cannot tolerate a DPI device. | 2 nd line LABA/ICS choice on pathway. | Green | |
| Budesonide/ formoterol 400/12 (Symbicort Turbohaler®) | COPD | Approved | Cost effective treatment option | 3 rd line choice on pathway. | Green | |
| Budesonide/ formoterol 320/9 (DuoResp Spiromax [®]) | COPD | Approved | Cost-effective equivalent of Symbicort Turbohaler [®] , noting device is different and patient education is required. | 3 rd line choice on pathway | Green | |

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| Fluticasone/ salmeterol 500/50 (Seretide Accuhaler®) | COPD | Approved | Continuation only for existing patients. | Continuation in existing patients only. Not listed on the COPD pathway. | Green | |
| Fluticasone/ salmeterol 250/25 (Seretide evohaler®) | COPD | Not approved | Not licensed for use in COPD, Fostair [®] is a licensed MDI for COPD. | Unlicensed. Not listed on the COPD pathway. | Black | |

Additional items:

Vale of York COPD pathway Stoma products – not approved by Vale of York CCG