

NHS Greater Glasgow and Clyde: New Medicines Decisions

In Scotland, a newly licensed medicine is routinely available in a health board only after it has been:

- accepted for use in NHSScotland by the Scottish Medicines Consortium (SMC), and
- accepted for use by the health board's Area Drug and Therapeutics Committee (ADTC).

All medicines accepted by SMC are available in Scotland, but may not be considered 'routinely available' within NHS Greater Glasgow and Clyde (NHSGG&C) because of available services and preferences.

'Routinely available' means that a medicine can be prescribed by the appropriately qualified person within a health board.

Each health board has an ADTC. The Greater Glasgow and Clyde ADTC is responsible for advising the NHSGG&C health board on all aspects of the use of medicines.

Medicines routinely available within NHSGG&C are usually included in the GGC Formulary. The Formulary is a list of medicines for use in the health board that has been agreed by ADTC in consultation with healthcare professionals to prescribe for common medical conditions. The GGC Formulary can help improve safety as prescribers are likely to become more familiar with the medicines included. Medicines included are consistent across the health board.

How does NHSGG&C decide which new medicines to make routinely available for patients?

The ADTC in NHSGG&C will consider national and local guidance before deciding whether to make a new medicine routinely available.

What national guidance does the ADTC consider?

- SMC advice: The SMC considers newly licensed medicines and advises health boards in Scotland whether they should be available. When SMC considers a new medicine for the NHS in Scotland
 - how well the medicine works,
 - which patients might benefit from it,
 - whether it is as good or better than medicines the NHS already uses to treat the medical condition, and
 - whether it is good value for money.
- In the table below, national guidance usually refers to SMC advice. Links to SMC advice for individual medicines are also included in the table.
- In some cases, other agencies may also provide guidance on how medicines should be used. For example, Healthcare Improvement Scotland issues alerts to advise if National Institute for Health and Care Excellence (NICE) appraisals (NICE MTAs) are applicable in Scotland.

What local guidance does the ADTC consider?

- Advice from local clinical experts who would be expected to prescribe a particular medicine, where that service is available in NHSGG&C.

Why is a particular medicine not routinely available in NHSGG&C?

- This is usually because the medicine is not recommended for use in NHSScotland by the SMC.
- The medicine may not be routinely available in a health board, particularly in smaller health boards, because there is not a suitable specialist who may use the medicine.
- There may also be differences in which medicines are preferred in health boards. Sometimes SMC accepts more than one medicine for treating a specific medical condition. Clinical experts in each health board advise on preferred medicines to their formulary and advise the ADTC. Sometimes it is agreed that established medicines are a better choice than new medicines.

Medicine	Condition being treated	NHSGGC Decision	Date of decision
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<p>Apalutamide tablets</p> <p>Erleada®</p> <p>SMC2472</p>	<p>Treatment of adults with metastatic hormone-sensitive prostate cancer (mHSPC) in combination with androgen deprivation therapy (ADT).</p>	<p>Routinely available in line with local or regional guidance</p>	<p>10/10/2022</p>
<p>Brolucizumab injection</p> <p>Beovu®</p> <p>SMC2508</p>	<p>In adults for the treatment of visual impairment due to diabetic macular oedema.</p>	<p>Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by: 12/12/2022</p>	<p>10/10/2022</p>
<p>Defatted Arachis hypogaea L. powder in capsules</p> <p>Palforzia®</p> <p>SMC2487</p>	<p>treatment of patients aged 4 to 17 years with a confirmed diagnosis of peanut allergy. Palforzia® may be continued in patients 18 years of age and older. Palforzia® should be used in conjunction with a peanut-avoidant diet.</p>	<p>Not routinely available as not recommended for use in NHSScotland</p>	<p>10/10/2022</p>
<p>Delta-9-tetrahydrocannabinol, cannabidiol oromucosal spray</p> <p>Sativex®</p> <p>SMC2473</p>	<p>treatment for symptom improvement in adult patients with moderate to severe spasticity due to multiple sclerosis (MS) who have not responded adequately to other anti-spasticity medication and who demonstrate clinically significant improvement in spasticity related symptoms during an initial trial of therapy.</p>	<p>Routinely available in line with national guidance</p>	<p>10/10/2022</p>

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Estradiol, micronised progesterone capsule Bijuve® SMC2502	: continuous combined hormone replacement therapy (HRT) for estrogen deficiency symptoms in postmenopausal women with intact uterus and with at least 12 months since last menses. The experience in treating women older than 65 years is limited.	Routinely available in line with national guidance	10/10/2022
Filgotinib tablets Jyseleca® SMC2475	for the treatment of moderate to severe active rheumatoid arthritis in adult patients who have responded inadequately to, or who are intolerant to one or more disease-modifying anti-rheumatic drugs (DMARDs). Filgotinib may be used as monotherapy or in combination with methotrexate.	Routinely available in line with local or regional guidance	10/10/2022
Imlifidase infusion Idefix® SMC2445	desensitisation treatment of highly sensitised adult kidney transplant patients with positive crossmatch against an available deceased donor. The use of imlifidase should be reserved for patients unlikely to be transplanted under the available kidney allocation system including prioritisation programmes for highly sensitised patients.	Routinely available in line with national guidance	10/10/2022
Nivolumab infusion Opdivo® SMC2458	In combination with fluoropyrimidine- and platinum-based combination chemotherapy for the first-line treatment of adult patients with HER2-negative advanced or metastatic gastric, gastro-oesophageal junction or oesophageal adenocarcinoma whose tumours express PD-L1 with a combined positive score (CPS) ≥ 5	Routinely available in line with local or regional guidance	10/10/2022

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<p>Ozanimod capsules</p> <p>Zeposia®</p> <p>SMC2478</p>	<p>for the treatment of adult patients with moderately to severely active ulcerative colitis (UC) who have had an inadequate response, lost response, or were intolerant to either conventional therapy or a biologic agent.</p>	<p>Routinely available in line with national guidance</p>	<p>10/10/2022</p>
<p>Pembrolizumab infusion</p> <p>Keytruda®</p> <p>SMC2479</p>	<p>As monotherapy for the adjuvant treatment of adults with renal cell carcinoma (RCC) at increased risk of recurrence following nephrectomy, or following nephrectomy and resection of metastatic lesions.</p>	<p>Routinely available in line with local or regional guidance</p>	<p>10/10/2022</p>
<p>Pembrolizumab infusion</p> <p>Keytruda®</p> <p>SMC2460</p>	<p>in combination with chemotherapy, for the treatment of locally recurrent unresectable or metastatic triple-negative breast cancer in adults whose tumours express PD-L1 with a CPS \geq 10 and who have not received prior chemotherapy for metastatic disease.</p>	<p>Routinely available in line with local or regional guidance</p>	<p>10/10/2022</p>
<p>Pembrolizumab infusion</p> <p>Keytruda®</p> <p>SMC2474</p>	<p>In combination with lenvatinib, for the treatment of advanced or recurrent endometrial carcinoma in adults who have disease progression on or following prior treatment with a platinum-containing therapy in any setting and who are not candidates for curative surgery or radiation.</p>	<p>Routinely available in line with local or regional guidance</p>	<p>10/10/2022</p>

Medicine	Condition being treated	NHSGGC Decision	Date of decision
<p>Relugolix, estradiol, norethisterone tablets Ryeqo® SMC2442</p>	<p>Treatment of moderate to severe symptoms of uterine fibroids in adult women of reproductive age.</p>	<p>Routinely available in line with national guidance</p>	<p>10/10/2022</p>
<p>Tofacitinib tablets Xeljanz® SMC2463</p>	<p>Treatment of adult patients with active ankylosing spondylitis (AS) who have responded inadequately to conventional therapy</p>	<p>Routinely available in line with local or regional guidance</p>	<p>10/10/2022</p>
<p>Trifarotene cream Aklief® SMC2441</p>	<p>Cutaneous treatment of acne vulgaris of the face and/or the trunk in patients from 12 years of age and older, when many comedones, papules and pustules are present.</p>	<p>Routinely available in line with national guidance</p>	<p>10/10/2022</p>
<p>Upadacitinib tablet Rinvoq® SMC2510</p>	<p>Treatment of adult patients with moderately to severely active ulcerative colitis who have had an inadequate response, lost response or were intolerant to either conventional therapy or a biologic agent.</p>	<p>Routinely available in line with national guidance</p>	<p>10/10/2022</p>

Medicine	Condition being treated	NHSGGC Decision	Date of decision
Zanubrutinib capsules Brukinsa® SMC2452	Monotherapy for the treatment of adult patients with Waldenström's macroglobulinaemia (WM) who have received at least one prior therapy, or in first line treatment for patients unsuitable for chemo-immunotherapy.	Not routinely available as not recommended for use in NHSScotland	10/10/2022