

# 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 the ADTC on their 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><b>Budesonide</b> MR tablet  Cortiment®  SMC 2448</p>	<p>Induction of remission in patients with active microscopic colitis</p>	<p>Routinely available in line with national guidance</p>	<p>21/02/2022</p>
<p><b>Cannabidiol</b> oral solution  Epidyolex®  SMC2402</p>	<p>Use as adjunctive therapy of seizures associated with tuberous sclerosis complex (TSC) for patients 2 years of age and older.</p>	<p>Routinely available in line with national guidance</p>	<p>21/02/2022</p>
<p><b>Cenobamate</b> tablets  Ontozry®  SMC2408</p>	<p>Adjunctive treatment of focal-onset seizures with or without secondary generalisation in adult patients with epilepsy who have not been adequately controlled despite treatment with at least 2 anti-epileptic medicinal products.</p>	<p>Routinely available in line with national guidance</p>	<p>21/02/2022</p>
<p><b>Diroximel fumarate</b> capsule  Vumerity®  SMC2444</p>	<p>Treatment of adult patients with relapsing remitting multiple sclerosis.</p>	<p>Routinely available in line with national guidance</p>	<p>21/02/2022</p>
<p><b>Eculizumab</b> infusion  Soliris®  SMC2456</p>	<p>Treatment of adults with neuromyelitis optica spectrum disorder in patients who are anti-aquaporin-4 antibody-positive with a relapsing course of the disease</p>	<p>Not routinely available as not recommended for use in NHSScotland</p>	<p>21/02/2022</p>

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<b>Enzalutamide</b> tablets Xtandi® SMC2400	Treatment of adults with metastatic hormone-sensitive prostate cancer (mHSPC) in combination with androgen deprivation therapy (ADT)	Routinely available in line with local or regional guidance	21/02/2022
<b>Nivolumab</b> infusion Opdivo® SMC2397	In combination with ipilimumab and 2 cycles of platinum-based chemotherapy for the first-line treatment of metastatic non-small cell lung cancer in adults whose tumours have no sensitising EGFR mutation or ALK translocation.	Not routinely available as not recommended for use in NHSScotland	21/02/2022
<b>Nivolumab</b> infusion Opdivo® SMC2385	In combination with ipilimumab for the first-line treatment of adult patients with unresectable malignant pleural mesothelioma (MPM).	Routinely available in line with local or regional guidance	21/02/2022
<b>Olaparib</b> tablets Lynparza® SMC2366	Monotherapy for the treatment of adult patients with metastatic castration-resistant prostate cancer and BRCA1/2-mutations (germline and/or somatic) who have progressed following prior therapy that included a new hormonal agent	Not routinely available as local implementation plans are being developed or ADTC is waiting for further advice from local clinical experts - Decision expected by: 28/02/2022	21/02/2022

Medicine	Condition being treated	NHSGGC Decision	Date of decision
<p><b>Opicapone</b> capsules</p> <p>Ongentys®</p> <p>SMC2430</p>	<p>As adjunctive therapy to preparations of levodopa/DOPA decarboxylase inhibitors (DDCI) in adult patients with Parkinson's disease and end-of-dose motor fluctuations who cannot be stabilised on those combinations</p>	<p>Routinely available in line with national guidance</p>	<p>21/02/2022</p>
<p><b>Osimertinib</b> tablet</p> <p>Tagrisso®</p> <p>SMC2382</p>	<p>As monotherapy for the first-line treatment of adult patients with locally advanced or metastatic non-small cell lung cancer (NSCLC) with activating epidermal growth factor receptor (EGFR) mutations.</p>	<p>Routinely available in line with local or regional guidance</p>	<p>21/02/2022</p>
<p><b>Pemigatinib</b> tablets</p> <p>Pemazyre®</p> <p>SMC2399</p>	<p>Treatment of adults with locally advanced or metastatic cholangiocarcinoma with a fibroblast growth factor receptor 2 (FGFR2) fusion or rearrangement that have progressed after at least one prior line of systemic therapy.</p>	<p>Routinely available in line with local or regional guidance</p>	<p>21/02/2022</p>
<p><b>Risdiplam</b> oral solution</p> <p>Evrysdi®</p> <p>SMC2401</p>	<p>Treatment of 5q spinal muscular atrophy (SMA) in patients 2 months of age and older, with a clinical diagnosis of SMA type 1, type 2 or type 3 or with one to four SMN2 [survival of motor neuron 2] copies.</p>	<p>Routinely available in line with national guidance</p>	<p>21/02/2022</p>

Medicine	Condition being treated	NHSGGC Decision	Date of decision
<b>Tralokinumab</b> pre-filled syringe Adtralza® SMC2403	Treatment of moderate-to-severe atopic dermatitis in adult patients who are candidates for systemic therapy.	Routinely available in line with national guidance	21/02/2022
<b>Trastuzumab deruxtecan</b> infusion Enhertu® SMC2388	As monotherapy for the treatment of adult patients with unresectable or metastatic human epidermal growth factor receptor 2 (HER2)-positive breast cancer who have received two or more prior anti-HER2-based regimens.	Routinely available in line with local or regional guidance	21/02/2022
<b>Tucatinib</b> tablets Tukysa® SMC2398	In combination with trastuzumab and capecitabine for the treatment of adult patients with HER2-positive locally advanced or metastatic breast cancer who have received at least two prior anti-HER2 treatment regimens.	Routinely available in line with local or regional guidance	21/02/2022