

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, which 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>Avelumab infusion</p> <p>Bavencio®</p> <p>SMC2248</p>	<p>in combination with axitinib for the first-line treatment of adult patients with advanced renal cell carcinoma (RCC).</p>	<p>Routinely available in line with local or regional guidance</p>	<p>26/10/2020</p>
<p>Budesonide orodispersible tablets</p> <p>Jorveza®</p> <p>SMC2158</p>	<p>Treatment of eosinophilic oesophagitis (EoE) in adults (older than 18 years of age).</p>	<p>Routinely available in line with national guidance</p>	<p>26/10/2020</p>
<p>Cannabidiol oral solution</p> <p>Epidyolex®</p> <p>SMC2263</p>	<p>For use as adjunctive therapy of seizures associated with Lennox-Gastaut syndrome, in conjunction with clobazam, for patients 2 years of age and older.</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: 30/04/2021</p>	<p>26/10/2020</p>
<p>Cannabidiol oral solution</p> <p>Epidyolex®</p> <p>SMC2262</p>	<p>For use as adjunctive therapy of seizures associated with Dravet syndrome, in conjunction with clobazam, for patients 2 years of age and older.</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: 30/04/2021</p>	<p>26/10/2020</p>
<p>Carfilzomib infusion</p> <p>Kyprolis®</p> <p>SMC2290</p>	<p>in combination with lenalidomide and dexamethasone for the treatment of adult patients with multiple myeloma who have received at least one prior therapy.</p>	<p>Routinely available in line with local or regional guidance</p>	<p>26/10/2020</p>

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<p>Cerliponase alfa infusion</p> <p>Brineura®</p> <p>SMC2286</p>	<p>The treatment of neuronal ceroid lipofuscinosis type 2 (CLN2) disease, also known as tripeptidyl peptidase 1 (TPP1) deficiency.</p>		
<p>Daratumumab subcutaneous injection</p> <p>Darzalex®</p> <p>SMC2301</p>	<p>in combination with lenalidomide and dexamethasone, or bortezomib and dexamethasone, for the treatment of adult patients with multiple myeloma who have received at least one prior therapy.</p>	<p>Routinely available in line with local or regional guidance</p>	<p>26/10/2020</p>
<p>Daratumumab subcutaneous injection</p> <p>Darzalex®</p> <p>SMC2304</p>	<p>as monotherapy for the treatment of adult patients with relapsed and refractory multiple myeloma, whose prior therapy included a proteasome inhibitor and an immunomodulatory agent and who have demonstrated disease progression on the last therapy.</p>	<p>Routinely available in line with local or regional guidance</p>	<p>26/10/2020</p>
<p>Esketamine nasal spray</p> <p>Spravato®</p> <p>SMC2258</p>	<p>In combination with a selective serotonin reuptake inhibitor (SSRI) or serotonin-norepinephrine reuptake inhibitor (SNRI), for adults with treatment-resistant Major Depressive Disorder, who have not responded to at least two different treatments with antidepressants in the current moderate to severe depressive episode.</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: 30/04/2021</p>	<p>26/10/2020</p>

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<p>Fluocinolone acetonide intravitreal implant</p> <p>Iluvien®</p> <p>SMC2260</p>	Prevention of relapse in recurrent non-infectious uveitis affecting the posterior segment of the eye.	Routinely available in line with national guidance	26/10/2020
<p>Human Corneal Epithelial Stem Cells autologous stem cells</p> <p>Holoclar®</p> <p>SMC2261</p>	Treatment of adult patients with moderate to severe limbal stem cell deficiency (defined by the presence of superficial corneal neovascularisation in at least two corneal quadrants, with central corneal involvement, and severely impaired visual acuity), unilateral or bilateral, due to physical or chemical ocular burns.	Routinely available in line with national guidance	26/10/2020
<p>Ibrutinib tablets</p> <p>Imbruvica®</p> <p>SMC2259</p>	in combination with rituximab for the treatment of adult patients with Waldenström's macroglobulinaemia.	Routinely available in line with local or regional guidance	26/10/2020
<p>Lenalidomide capsules</p> <p>Revlimid®</p> <p>SMC2289</p>	as monotherapy for the maintenance treatment of adult patients with newly diagnosed multiple myeloma who have undergone autologous stem cell transplantation (ASCT).	Routinely available in line with local or regional guidance	26/10/2020

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<p>Lenalidomide capsules</p> <p>Revlimid®</p> <p>SMC2281</p>	<p>In combination with rituximab (anti-CD20 antibody) for the treatment of adult patients with previously treated follicular lymphoma (Grade 1 to 3a).</p>	<p>Routinely available in line with local or regional guidance</p>	<p>26/10/2020</p>
<p>Meropenem/vaborbactam infusion</p> <p>Vaborem®</p> <p>SMC2278</p>	<p>for the treatment of the following infections in adults:</p> <ul style="list-style-type: none"> - Complicated urinary tract infection (cUTI), including pyelonephritis - Complicated intra-abdominal infection (cIAI) - Hospital-acquired pneumonia (HAP), including ventilator associated pneumonia (VAP) <p>Treatment of patients with bacteraemia that occurs in association with, or is suspected to be associated with, any of the infections listed above.</p>	<p>Routinely available in line with national guidance</p>	<p>26/10/2020</p>
<p>Semaglutide tablets</p> <p>Rybelsus®</p> <p>SMC2287</p>	<p>for the treatment of adults with insufficiently controlled type 2 diabetes mellitus to improve glycaemic control as an adjunct to diet and exercise</p> <ul style="list-style-type: none"> -As monotherapy when metformin is considered inappropriate due to intolerance or contraindications -In combination with other medicinal products for the treatment of diabetes. 	<p>Routinely available in line with national guidance</p>	<p>26/10/2020</p>
<p>Siponimod tablets</p> <p>Mayzent®</p> <p>SMC2265</p>	<p>Treatment of adult patients with secondary progressive multiple sclerosis (SPMS) with active disease evidenced by relapses or imaging features of inflammatory activity.</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: 30/04/2021</p>	<p>26/10/2020</p>

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<p>Sodium zirconium cyclosilicate</p> <p>oral suspension</p> <p>Lokelma®</p> <p>SMC2288</p>	<p>Treatment of hyperkalaemia in adult patients.</p>	<p>Routinely available in line with national guidance</p>	<p>26/10/2020</p>
<p>Voretigene neparvovec</p> <p>injection</p> <p>Luxturna®</p> <p>SMC2228</p>	<p>Treatment of adult and paediatric patients with vision loss due to inherited retinal dystrophy caused by confirmed biallelic RPE65 mutations and who have sufficient viable retinal cells.</p>	<p>Routinely available in line with national guidance</p>	<p>26/10/2020</p>