

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 NHS Scotland 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 for alternative medicines.

'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 local clinical experts. It offers a choice of medicines for 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 in it and also helps make sure that standards of care 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, it looks at:
 - 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 Multiple Technology 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 NHS Scotland 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 consider whether to add new medicines to their formulary and advise the ADTC. Sometimes it is agreed that established medicines are a better choice than new medicines.

What happens if a particular medicine is not routinely available in NHSGG&C?

- If a medicine is not routinely available and included in the GGC Formulary and there are no suitable alternatives on the formulary, a healthcare professional can request to prescribe a medicine that is not on the formulary if they think you will benefit from using it. NHSGG&C and all health boards have procedures in place to consider requests when a healthcare professional feels a medicine that is not on the formulary would be right for a particular patient.

The table below lists NHS Greater Glasgow and Clyde's decisions on new medicines.

If you need more information on medicines decisions in NHS Greater Glasgow and Clyde, please email gqc.medicines@ggc.scot.nhs.uk

Medicine	Condition being treated	NHSGGC Decision	Date of decision
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<p>Abiraterone acetate tablets Zytiga® SMC2215</p>	<p>Abiraterone acetate with prednisone or prednisolone for the treatment of newly diagnosed high risk metastatic hormone sensitive prostate cancer in adult men in combination with androgen deprivation therapy.</p>	<p>Routinely available in line with local or regional guidance</p>	<p>24/02/2020</p>
<p>Apalutamide tablets Erleada® SMC2268</p>	<p>In adult men for the treatment of non-metastatic castration-resistant prostate cancer (NM-CRPC) who are at high risk of developing metastatic disease.</p>	<p>Not routinely available as not recommended for use in NHSScotland</p>	<p>24/02/2020</p>
<p>Brentuximab Vedotin infusion Adcetris® SMC2229</p>	<p>Treatment of adult patients with CD30+ cutaneous T-cell lymphoma (CTCL) after at least one prior systemic therapy.</p>	<p>Routinely available in line with local or regional guidance</p>	<p>24/02/2020</p>
<p>Cemiplimab infusion Libtayo® SMC2216</p>	<p>As monotherapy for the treatment of adult patients with metastatic or locally advanced cutaneous squamous cell carcinoma (CSCC) who are not candidates for curative surgery or curative radiation.</p>	<p>Routinely available in line with local or regional guidance</p>	<p>24/02/2020</p>
<p>Daratumumab infusion Darzalex® SMC2269</p>	<p>In combination with lenalidomide and dexamethasone for the treatment of adult patients with newly diagnosed multiple myeloma who are ineligible for autologous stem cell transplant.</p>	<p>Not routinely available as not recommended for use in NHSScotland</p>	<p>24/02/2020</p>

Medicine	Condition being treated	NHSGGC Decision	Date of decision
<p>Encorafenib plus Binimetinib Capsules Braftovi® SMC2238</p>	<p>In combination with binimetinib for the treatment of adult patients with unresectable or metastatic melanoma with a BRAF V600 mutation.</p>	<p>Routinely available in line with local or regional guidance</p>	<p>24/02/2020</p>
<p>Fremanezumab injection Ajovy® SMC2226</p>	<p>Prophylaxis of migraine in adults who have at least four migraine days per month.</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: 10/08/2020</p>	<p>24/02/2020</p>
<p>Ocrelizumab infusion Ocrevus® SMC2223</p>	<p>Treatment of adult patients with early primary progressive multiple sclerosis (PPMS) in terms of disease duration and level of disability, and with imaging features characteristic 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: 27/04/2020</p>	<p>24/02/2020</p>
<p>Ranibizumab injection Lucentis® SMC2270</p>	<p>Treatment of proliferative diabetic retinopathy in adults.</p>	<p>Not routinely available as not recommended for use in NHSScotland</p>	<p>24/02/2020</p>

Medicine	Condition being treated	NHSGGC Decision	Date of decision
Sodium Zirconium Cyclosilicate suspension Lokelma® SMC2233	treatment of hyperkalaemia in adult patients	Not routinely available as not recommended for use in NHSScotland	24/02/2020
Teduglutide injection Revestive® SMC2225	for the treatment of patients age 1 year and above with short bowel syndrome (SBS). Patients should be stable following a period of intestinal adaptation after surgery.	Routinely available in line with local or regional guidance	24/02/2020