# NHS Greater Glasgow and Clyde: New Medicines Decisions

In Scotland, a newly licensed medicine is routinely available for use in an NHS board only after it has been:

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

### How does the NHS board decide which new medicines to make available for patients?

Each NHS board has an ADTC. The ADTC is responsible for advising the NHS board on all aspects of the use of medicines. ADTCs take account of national and, where applicable, local guidance when deciding which medicines should be routinely available.

## What national guidance does the ADTC consider?

- SMC advises on the use of newly licensed medicines in NHSScotland. In the table, national guidance usually refers to SMC advice. Links to SMC advice for individual medicines are included in the table.
- In some cases, other agencies may also provide guidance on how medicines should be used. For example Healthcare Improvement Scotland provides advice on some health technology assessments, including National Institute for Health and Care Excellence Multiple Technology Appraisals (NICE MTAs).

## What local guidance does the ADTC consider?

- Sometimes SMC accepts more than one medicine for treating a specific medical condition. Clinical experts in each NHS board provide advice to their ADTCs on which medicines can be routinely used. Sometimes clinical experts decide that established medicines are a better choice than new medicines.
- Medicines routinely available for use within an NHS board are usually included in the 'local formulary'. The formulary is a list of medicines for use in the NHS board that has been agreed
  by ADTC in consultation with local clinical experts. The formulary encourages prescribers to become familiar with a limited list of medicines which can be used to treat the majority of
  medical conditions.

#### What if a particular medicine is not routinely available in my NHS board?

- This is usually because the medicine has not been accepted by SMC for use in NHSScotland.
- There may also be differences in which medicines are preferred in NHS boards. If SMC accepts a number of medicines for which there are other medicines already available to treat a specific medical condition, the NHS board's decision may depend on clinical experts' preferences and experiences with the medicine in their local population and on local prescribing guidance. If a decision is made for a medicine not to be routinely prescribed, there are usually alternative medicines available on the formulary.
- If a medicine is not routinely available and there are no suitable formulary alternatives, a doctor can make a request to prescribe the medicine if they believe it will benefit an individual patient. All NHS boards have procedures in place to consider individual requests when a doctor considers that a medicine not included on the formulary would be the best treatment option for an individual patient.

The following table lists the NHS board's decisions on new medicines.

If you need more information on medicines decisions in your NHS board area, please email hcis.adtc-collaborative@nhs.net

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
Alendronic acid	Treatment of postmenopausal osteoporosis.	Available in line with national guidance	18/04/2016
Binosto®		· ·	
1137/16			
Ataluren	Treatment of Duchenne muscular dystrophy resulting from a nonsense mutation in the dystrophin gene, in ambulatory patients aged 5	Not available as not recommended for use in NHSScotland	18/04/2016
Translarna®			
1131/16	years and older.		
	http://www.scottishmedicines.org.uk/SMC_Advice/Briefing_Note/Briefing_Note		
Biologic agents (See below)	Ankylosing spondylitis and axial spondyloarthritis (non-radiographic): medicines are adalimumab, certolizumab, etanercept, infliximab, golimumab	Available in line with national guidance	18/04/2016
MTA 383			
	https://www.nice.org.uk/guidance/ta383		
Biologic agents (see below)	Rheumatoid arthritis (medicines are adalimumab, etanercept, infliximab, certolizumab, golimumab, abatacept, tocilizumab)	Available in line with national guidance	18/04/2016
MTA 375			
	https://www.nice.org.uk/guidance/ta375		
Camellia sinensis (green tea) leaf Catephen®	Cutaneous treatment of external genital and perianal warts (condylomata acuminata) in immunocompetent patients from the age of 18 years.	Available in line with national guidance	18/04/2016
1133/16			
	http://http//www.scottishmedicines.org.uk/SMC Advice/Briefing Note/Briefing Note		

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
Capsaicin	Treatment of peripheral neuropathic pain in	Not available as not recommended	18/04/2016
Qutenza®	diabetic adults either alone or in combination with other medicinal products for pain.	for use in NHSScotland	
1140/16			
Daptomycin	Treatment of paediatric (1 to 17 years of age)	Not available as not recommended	18/04/2016
Cubicin®	patients with complicated skin and soft-tissue infections.	for use in NHSScotland	
1141/16			
Eculizumab	In adults and children, for the treatment of patients		18/04/2016
Soliris®	with paroxysmal nocturnal haemoglobinuria (PNH). Evidence of clinical benefit is demonstrated in patients with haemolysis with clinical symptom(s) indicative of high disease activity, regardless of transfusion history.	for use in NHSScotland	
1130/16			
	http://www.scottishmedicines.org.uk/SMC Advice/Briefing Note/Brie	fing Note	
Enzalutamide	Treatment of adult men with metastatic castration-	Available in line with local guidance	18/04/2016
Xtandi	resistant prostate cancer (mCRPC) who are asymptomatic or mildly symptomatic after failure of	ic or mildly symptomatic after failure of	
1066/15	androgen deprivation therapy in whom chemotherapy is not yet clinically indicated.  http://www.scottishmedicines.org.uk/SMC_Advice/Advice/1066_15_6	nzalutamida Vtandi/Driofing note enzalutamida V	randi IDD
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Medicine	Condition being treated	NHSGGC Decision	Date of decision
Eribulin (mesilate) Halaven® 1065/15	Treatment of adults with locally advanced or metastatic breast cancer who have progressed after at least one chemotherapeutic regimen for advanced disease. Prior therapy should have included an anthracycline and a taxane in either the adjuvant or metastatic setting unless patients were not suitable for these treatments.	Available in line with local guidance for prescribing	18/04/2016
Everolimus Afinitor® 872/13	http://www.scottishmedicines.org.uk/SMC_Advice/Advice/1065_15_e  Treatment of hormone receptor-positive, HER2/neu negative advanced breast cancer, in combination with exemestane, in postmenopausal women without symptomatic visceral disease after recurrence or progression following a non-steroidal aromatase inhibitor.	Available in line with local guidance for prescribing	18/04/2016
Guanfacine Intuniv® 1123/16	http://www.scottishmedicines.org.uk/SMC_Advice/Briefing_Note/Brief  Treatment of attention deficit hyperactivity disorder (ADHD) in children and adolescents 6 to 17 yrs old for whom stimulants are not suitable, not tolerated or have been shown to be ineffective. Treatment must be used as part of a comprehensive ADHD treatment programme, typically including psychological, educational and social measures.  http://www.scottishmedicines.org.uk/SMC_Advice/Advice/1123_16_g	Available in line with national guidance	18/04/2016
Isavuconazole Cresemba® 1129/16	in adults for the treatment of: -invasive aspergillosis -mucormycosis in patients for whom amphotericin B is inappropriate  http://www.scottishmedicines.org.uk/SMC Advice/Briefing Note/Brief	Available in line with national guidance	18/04/2016

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Medicine	Condition being treated	NHSGGC Decision	Date of decision
N/A Anthelios® XL SPF 50	Skin protection against UVA and UVB rays	Available in line with local guidance for prescribing	18/04/2016
N/A			
<b>Nivolumab</b> Opdivo®	Monotherapy for the treatment of advanced (unresectable or metastatic) melanoma in adults.	Not available as not recommended for use in NHSScotland	18/04/2016
1120/16	http://www.scottishmedicines.org.uk/SMC_Advice/Advice/1120_16_n	ivolumab_Opdivo/Briefing_note_nivolumab_Opdivo	
Pertuzumab Perjeta® 1121/16	In combination with trastuzumab and chemotherapy for the neoadjuvant treatment of adult patients with human epidermal growth factor receptor 2 (HER2)-positive, locally advanced, inflammatory, or early stage breast cancer at high risk of recurrence.	Not available as not recommended for use in NHSScotland	18/04/2016
	http://www.scottishmedicines.org.uk/SMC_Advice/Advice/1121_16_p	ertuzumab_Perjeta/Briefing_note_pertuzumab_Perj	<u>eta</u>
phenylephrine hydrochloride, tropicamide Mydriasert®	For use in adult patients to obtain pre-operative mydriasis or for diagnostic purposes when monotherapy is known to be insufficient.	Available in line with local guidance for prescribing	18/04/2016
N/A			
Sacubitril/Valsartan Entresto®	In adult patients for treatment of symptomatic chronic heart failure with reduced ejection fraction.	Available in line with local guidance for prescribing	18/04/2016
1132/16	http://www.scottishmedicines.org.uk/SMC_Advice/Advice/1132_16_s	acubitril_valsartan_Entresto/Briefing_note_sacubitril	valsartan_Entresto

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