Specialist lists - progress

The dermatology specialist list has been finalised. New sections added include section 13.5.1 Eczema, 13.5.3 Drugs affecting the immune system, 13.12 Hyperhidrosis and 13.13 Circulatory preparations. Links to relevant Guidelines in the British Journal of Dermatology have been included where appropriate. These can be accessed directly using your Athens log in.

Many SMC drugs have been added in section 13.5.3 Drugs affecting the immune system, these include tacrolimus ointment, and oral azathioprine, chloroquine, ciclosporin, dapsone, hydroxychloroquine, lymecycline and mycophenolate.

Section 13.12 Hyperhidrosis section - includes a link to the Dermatology hyperhidrosis guideline which is a comprehensive guideline discussing a range of treatment options including those that can be tried in General Practice before referral to Dermatology.

Drug Safety Updates

Please follow link - Volume 6, Issue 5, December 2012

SMC Advice issued in November 2012 SMC website: www.scottishmedicines.org.uk

<table>
<thead>
<tr>
<th>Medicine</th>
<th>Indication</th>
<th>Local recommendation category</th>
<th>Comments and useful links</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aclidinium 322 micrograms inhalation powder (Eklira Genuair®) (810/12) - Full submission</td>
<td>As a maintenance bronchodilator treatment to relieve symptoms in adult patients with chronic obstructive pulmonary disease (COPD).</td>
<td>Pending* Respiratory MCN decision</td>
<td>SMC advice SPC link</td>
</tr>
<tr>
<td>Adalimumab (Humira®) (824/12) - Non-submission</td>
<td>Treatment of moderately active Crohn’s disease, in adult patients who have not responded despite a full and adequate course of therapy with a corticosteroid and/or an immunosuppressant; or who are intolerant to or have medical contraindications for such therapies.</td>
<td>Not recommended</td>
<td>SMC advice</td>
</tr>
<tr>
<td>Argatroban, 100mg/ml, concentrate for solution for infusion (Exembol®) (812/12) - Full submission</td>
<td>Anticoagulation in adult patients with heparin-induced thrombocytopenia type II who require parenteral anti-thrombotic therapy.</td>
<td>Not recommended</td>
<td>SMC advice</td>
</tr>
<tr>
<td>Interferon beta-1a (Rebif®) (825/12) - Non-submission</td>
<td>Patients with a single demyelinating event with an active inflammatory process, if alternative diagnoses have been excluded, and if they are determined to be at high risk of developing clinically definite multiple sclerosis.</td>
<td>Not recommended</td>
<td>SPC advice</td>
</tr>
</tbody>
</table>

* 'pending' means that no local recommendation to support use is in place at the current time
### Medicine

<table>
<thead>
<tr>
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</table>
| Nepafenac 1mg/mL eye drops, suspension (Nevanac®) (813/12)  
- Full submission | Reduction in the risk of postoperative macular oedema associated with cataract surgery in diabetic patients. | HOSPITAL ONLY  
(Orthalmology clinic)  
Restricted to diabetic patients with diabetic retinopathy undergoing cataract surgery. | SMC advice  
SPC link |
| Pazopanib 200mg, 400mg film-coated tablets (Votrient®) (820/12)  
- Full submission | For the treatment of adult patients with selective subtypes of advanced soft tissue sarcoma (STS) who have received prior chemotherapy for metastatic disease or who have progressed within 12 months after (neo) adjuvant therapy. Efficacy and safety has only been established in certain STS histological tumour subtypes. | Not recommended | SMC advice |
| Ranolazine, 375mg, 500mg and 750mg prolonged-release tablets (Ranexa®)  
- Independent Review Panel Assessment (IRP) (565/09) | As add-on therapy for the symptomatic treatment of patients with stable angina pectoris who are inadequately controlled or intolerant to first-line antianginal therapies (such as beta-blockers and/or calcium antagonists). | Not recommended | SMC advice |

### Updates from previous SMC Advice

<table>
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</table>
| Adalimumab 40mg injection in pre-filled pen and syringe (Humira®) (417/07)  
- Full submission | Severe active Crohn’s disease. | HOSPITAL ONLY  
(GI clinic)  
Gastroenterology specialist list | NICE MTA No 187  
Biologic Therapies Shared Care Agreement currently under review. |
| Fidaxomicin 200mg film-coated tablets (Dificlir®) (791/12)  
- Full submission | Treatment of adults with Clostridium difficile infections (CDI) also known as C. difficile-associated diarrhoea (CDAD). | GPs may prescribe under direction of ID/Micro  
Antibiotic policy  
Restricted to treatment of first recurrence of C.difficile. | SMC advice  
SPC link  
Recurrent C.diff protocol |
| Ticagrelor 90mg film-coated tablets (Brilique®) (699/11)  
- Full submission | Co-administered with aspirin, for the prevention of atherothrombotic events in adult patients with acute coronary syndromes; including patients managed medically, and those who are managed with percutaneous coronary intervention (PCI) or coronary artery by-pass grafting (CABG). | Non-formulary - pending protocol | SMC advice  
SPC link  
Clopidogrel in combination with aspirin is the TAF first-choice antiplatelet for ACS. Prasugrel is recommended for certain patients undergoing PCI. Refer to angioplasty algorithm. |

‘Local processes exist to allow consideration of prescribing outwith SMC advice or outwith NHS Tayside formulary. Details are available in the NHS Tayside Policy on the Prescribing of Medicines that are Non-formulary (including Individual Patient Treatment Requests).’
<table>
<thead>
<tr>
<th>TAF Section</th>
<th>Drug(s)/topic</th>
<th>Changes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specialist formulary lists and formulary development</td>
<td>Dermatology</td>
<td>Dermatology specialist formulary list added.</td>
</tr>
<tr>
<td>13 13.3</td>
<td>H2 receptor antagonists - Ranitidine</td>
<td>Ranitidine added to dermatology specialist list for the treatment of chronic urticaria [unlicensed use “off-label”]. It may be prescribed in general practice under the direction of a specialist.</td>
</tr>
<tr>
<td>3.3 13.3</td>
<td>Leukotriene related antagonists - Montelukast</td>
<td>Montelukast added to dermatology specialist list for the treatment of chronic urticaria [unlicensed use “off-label”]. It may be prescribed in general practice under the direction of a specialist.</td>
</tr>
<tr>
<td>3.4</td>
<td>Sedating antihistamines - Hydroxyzine</td>
<td>Hydroxyzine added to core formulary for pruritus.</td>
</tr>
<tr>
<td>4.7</td>
<td>Nefopam</td>
<td>Nefopam added to formulary for restricted use in patients unable to take opiates or NSAIDs or in addition to weak opioids in specific patient groups.</td>
</tr>
<tr>
<td>13.3</td>
<td>Topical local anaesthetics</td>
<td>Hospital only medicines added: Lidocaine 4% cream (LMX4®) - unlicensed “off-label”.</td>
</tr>
<tr>
<td>13.4</td>
<td>Topical Corticosteroids with other agents</td>
<td>Hospital only medicines added: Pigmanorm® - unlicensed.</td>
</tr>
<tr>
<td>13.5.1</td>
<td>Eczema</td>
<td>New section. Hospital only medicines added: alitretinoin, parenteral methotrexate** (but may be administered in primary care), acitretin**, Medicines initiated by specialists that can be continued in primary care: tacrolimus ointment, azathioprine**, ciclosporin**, lymecycline#, oral methotrexate**, mycophenolate#, Links added: NHS Scotland Dermatology Referral and Management Pathways and Tacrolimus ointment shared care agreement.</td>
</tr>
<tr>
<td>13.5.2</td>
<td>Psoriasis-Phototherapy</td>
<td>Phototherapy section expanded Hospital only medicines added: 8-methylpsoralen tablets*, gel* and bath lotion*, parenteral methotrexate** (but may be administered in primary care), acitretin**, hydroxycarbamide (hydroxyurea)#, fumaric acid esters*, Medicines initiated by specialists that can be continued in primary care: oral methotrexate**, and ciclosporin**, Links added: SIGN 121, NHS Scotland Dermatology Referral and Management Pathways and phototherapy PILs.</td>
</tr>
</tbody>
</table>

*unlicensed ; #unlicensed “off-label”; **see specialist list as licensing info may vary depending on indication
## TAF Section

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| **13.5.3** Drugs affecting the immune response | New section.  
Hospital only medicines added : mepacrine hydrochloride*, parenteral methotrexate** (but may be administered in primary care), adalimumab (Humira®▼), etanercept (Enbrel®▼), infliximab (Remicade®), ustekinumab (Stelara®▼).  
Medicines initiated by specialists that can be continued in primary care: tacrolimus ointment, azathioprine**, ciclosporin**, oral methotrexate**, mycophenolate#, chloroquine phosphate#, dapsone**, hydroxychloroquine sulphate**, lymecycline#.  
Links added: BSR guidelines for DMARD therapy with BAD (British Association of Dermatologists), NPSA guidance on methotrexate, BAD website, and tacrolimus ointment & dapsone shared care agreement, NHS Tayside Department of Dermatology website. |
| **13.6** Acne | Hospital only medicines added : isotretinoin**.  
Medicines initiated by specialists that can be continued in primary care: lymecycline#, minocycline#, trimethoprim (higher dose#).  
New links added: NHS Scotland Dermatology Referral and Management Pathway and Isotretinoin patient pathway. |
| **13.7** Warts | New links added: NHS Scotland Dermatology Referral and Management Pathway. |
| **13.8** Sunscreens and photodamage - Photodynamic therapy | Photodynamic therapy section expanded.  
Hospital only medicines added methyl-5-aminolevulinate 16% cream, 5-aminolevulinic acid 20% cream*.  
| **13.11** Skin Cleansers, antiseptics and desloughing agents | New section.  
New links added: Tayside Wound Management Formulary. |
| **13.12** Hyperhidrosis– topical and systemic therapy | New section.  
Hospital only medicines added : botulinum toxin type A (Botox®).  
Medicines initiated by specialists that can be continued in primary care: aluminium chloride hexahydrate 10% in 4% salicylic gel#, aluminium chloride hexahydrate 20% in 4% salicylic gel#, glycopyrrolate 1% in Unguentum M®, glycopyrrolate 2% in aqueous solution#, glycopyrronium bromide 0.05% solution# for iontophoresis, oxybutynin#, propiverine#, propranolol#, fluoxetine#.  
New link added: NHS Tayside Hyperhidrosis Guideline. |

*unlicensed; #unlicensed “off-label”; **see specialist list as licensing info may vary depending on indication
This bulletin is produced by the Medicines Advisory Group (MAG), which is a sub-group of the NHS Tayside Drug and Therapeutics Committee.

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