

TAYSIDE PRESCRIBER



1

Tayside DTC Supplement No 122 – December 2012

Produced by NHS Tayside Drug and Therapeutics Committee Medicines Advisory Group (MAG)





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 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 Hyperhydrosis 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

Medicine	Indication	Local recommendation category	Comments and useful links
Aclidinium 322 micrograms inhalation powder (Eklira Genuair®) (810/12) - Full submission	As a maintenance bronchodilator treatment to relieve symptoms in adult patients with chronic obstructive pulmonary disease (COPD).	Pending* Respiratory MCN decision	SMC advice SPC link
Adalimumab (Humira®) (824/12) - Non-submission	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.	Not recommended	SMC advice
Argatroban, 100mg/ml, concentrate for solution for infusion (Exembol®) (812/12) - Full submission	Anticoagulation in adult patients with heparin-induced thrombocytopenia type II who require parenteral antithrombotic therapy.	Not recommended	SMC advice
Interferon beta-1a (Rebif®) (825/12) - Non-submission	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.	Not recommended	SPC advice

SMC advice: • Aclidinium bromide (Eklira

Special points of

interest for

Primary Care

Adalimumab (Humira®)

Genuair®)

- Argatroban (Exembol[®])
- Interferon beta-la (Rebif®)
- Nepafenac (Nevanac®)
- Ranolazine (Ranexa[®])

^{* &#}x27;pending' means that no local recommendation to support use is in place at the current time

Medicine	Indication	Local recommendation category	Comments and useful links
Nepafenac Img/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 (Ophthalmology 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®) (565/09) - Independent Review Panel Assessment (IRP)	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

Medicine	Indication	Local recommendation category	Comments and useful links
Adalimumab 40mg injection in pre-filled pen and syringe (Humira®) (417/07) - Full submission	Severe active Crohn's disease.	HOSPITAL ONLY (Gl 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 <i>C.difficile</i> .	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)'



Tayside Area Formulary (TAF) Updates - Dec 2012

TAF Section	Drug(s)/topic	Changes
Specialist formulary lists and formulary development	Dermatology	<u>Dermatology specialist formulary list</u> added.
1.3 13.3	H2 receptor antagonists - Ranitidine	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.
3.3 13.3	Leukotriene related antagonists - Montelukast	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.
3.4	Sedating antihistamines - Hydroxyzine	Hydroxyzine added to core formulary for pruritus.
4.7	Nefopam	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.
13.3	Topical local anaesthetics	Hospital only medicines added: Lidocaine 4% cream (LMX4®) - unlicensed " off-label".
13.4	Topical Corticosteroids with other agents	Hospital only medicines added : Pigmanorm® - unlicensed.
13.5.1	Eczema	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.
13.5.2	Psoriasis-Phototherapy	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 Dermatol- ogy Referral and Management Pathways and phototherapy PILs.

^{*}unlicensed; #unlicensed "off-label"; **see specialist list as licensing info may vary depending on indication



Tayside Area Formulary (TAF) Updates - Dec 2012

TAF Section	Drug(s)/topic	Changes
13.5.3	Drugs affecting the immune response	New section.
	Biologic therapies (cytokine modulators)	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*.
		New links added: NHS Scotland Dermatology Referral and Management Pathway, and Photo- therapy PILs and guidelines.
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 2% in Unguentum M®*,
		glycopyrrolate 2% in aquous solution*,
		glycopyrronium bromide 0.05% solution* for ionotophoresis, 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



Tayside Area Formulary (TAF) Updates - continued

TAF Section	Drug(s)/topic	Changes
13.13	Circulatory preparations -Pentoxifylline	New section. Medicines initiated by specialists that can be continued in primary care: Pentoxifylline (unlicensed "off-label"). Link added: SIGN 120 - Management of chronic venous leg ulcers.



SMC Briefing Note:
Click here for November Briefing Note

Forthcoming SMC Advice

This bulletin is produced by the Medicines Advisory Group (MAG), which is a sub-group of the NHS Tayside Drug and Therapeutics Committee.

Please direct any queries to either:

Karen Harkness

Principal Pharmacist - Clinical Effectiveness

email: kharkness@nhs.net

or

Jan Jones

Principal Pharmacist - Pharmacoeconomics

email: janjones@nhs.net

Local implementation of SMC recommendations is taken forward by the Tayside Medicines Governance Unit. This bulletin is based on evidence available to the Tayside Medicines Governance Unit at time of publication and is covered by the Disclaimer and Terms & Conditions of use.

CLICK HERE for access to the Medicines Governance section of the Pharmacy Staffnet site.