



Formulary Changes – Topical Steroids

The topical steroids section of the Tayside Area Formulary has been updated. The key changes are:

- Topical steroids in the formulary will specify the generic name and the most cost-effective brand(s) where relevant to ensure best value for prescribing
- Hydrocortisone 0.5% strength is now non-formulary (Note: the Tayside Area formulary is an adult formulary)
- Betamethasone valerate 0.025% ointment/cream (Audavate® RD) has been added as a cost-effective alternative to clobetasone butyrate 0.05% (Clobavate® ointment or Eumovate® cream)
- Hydrocortisone butyrate 0.1% (Locoid® ointment/cream) has replaced mometasone furoate 0.1% (Elocon®) ointment/cream as a second choice potent topical steroid for when an alternative to betamethasone valerate 0.1% ointment/cream (Audavate® (primary care) or Betnovate® (hospital)) is required
- Betamethasone dipropionate 0.05% ointment/cream (Diprosone®) has been added as another potent topical steroid option when an increase in potency is required (slightly more potent than other potent formulary options)

Prescribers and pharmacists are advised to note these changes, allow time for community pharmacies and hospital pharmacies to change stock levels accordingly and importantly **to communicate clearly** any changes to a patient's treatment. It is good practice to check with the patient if any changes to existing prescriptions are made, particularly if a change in steroid potency has been made.

To help prescribers and pharmacists become familiar with the changes and minimise the risk of error a table has been produced which is also available in the formulary:

Topical Steroid Potency	First Line	Second Line	Comments
Mild	Hydrocortisone 1% ointment(15g)/cream(30g)	N/A	0.5% & 2.5% are clinically the same potency and are less cost effective
Moderate	Audavate® RD ointment/cream* (100g) Betamethasone valerate 0.025%	N/A	Audavate® RD is the most cost effective choice for patients who will likely require more than 30g.
	Clobavate® ointment* (30g) Clobetasone butyrate 0.05%		
Potent	Eumovate® cream* (30g) Clobetasone butyrate 0.05%	Locoid® ointment/cream (100g) Hydrocortisone butyrate 0.1% When alternative steroid required	In primary care, prescribe 100g tube for patients who will likely need more than 30g. In hospital, only Betnovate® 30g pack size is available.
	Audavate® ointment/cream* (30/100g) Betamethasone valerate 0.1% First choice in primary care		
Very potent	Betnovate® ointment/cream* (30g) Betamethasone valerate 0.1% First choice in hospital	Diprosone® ointment/cream (30/100g) Betamethasone dipropionate 0.05% When increase in potency required	Not generally intended for repeat prescribing, exceptions include; lichen sclerosis and lupus.
	Clobaderm® ointment/cream* (30g) Clobetasol propionate 0.05% First choice in primary care		
	Dermovate® ointment/cream* (30g) Clobetasol propionate 0.05% First choice in hospital	N/A	

In general, ointments are preferred as they are less likely to cause skin irritation

* Brand name prescribing of topical steroids can provide better value for NHS.

Trelegy® Ellipta® ▼ and Trimbow® Licensed Indication Updates

Trelegy® Ellipta® ▼ (fluticasone furoate/umeclidinium/vilanterol) and Trimbow® (beclometasone dipropionate/formoterol/glycopyrronium) are both now indicated as a maintenance treatment in adult patients with moderate to severe chronic obstructive pulmonary disease (COPD) who are not adequately treated with a combination of a long-acting β_2 -agonist and a long-acting muscarinic antagonist LABA/LAMA or an inhaled corticosteroid and a long-acting β_2 -agonist (ICS/LABA). Previously initiation of Trelegy® Ellipta® ▼ or Trimbow® in patients who were not already established on ICS/LABA was off-label but was approved by NHS Tayside Respiratory MCN.

The licensed indications for both medicines have been updated in their Summary of Product Characteristics (SPCs) which can be accessed via the eMC website, searchable by medicine name, via the following link: <https://www.medicines.org.uk/emc/>.

For full information on any of the drugs listed below use the link to the Scottish Medicines Consortium (SMC) website below to search by generic, brand or SMC no.
See NHS Tayside 'Local Decisions on SMC Advice' database (link below) for full details on Board decisions - these are currently listed alphabetically by page.

SMC Advice

Published 10th December 2018

Brivaracetam, 10mg, 25mg, 50mg, 75mg, 100mg film-coated tablets; 10mg/mL oral solution; 10mg/mL solution for injection/infusion (Briviact®) SMC2113

Ciclosporin 1mg/mL (0.1%) eye drops emulsion (Verkazia®) SMC2111

Nivolumab 10mg/mL concentrate for solution for infusion (Opdivo®) SMC2112

Ocrelizumab 300mg concentrate for solution for infusion (Ocrevus®) SMC2121

Pertuzumab 420mg concentrate for solution for infusion (Perjeta®) SMC2119

SMC 'Not recommended' medicines - December 2018

Pembrolizumab 25mg/mL concentrate for solution for infusion and 50mg powder for concentrate for solution for infusion (Keytruda®) SMC2143

Published 14th January 2019

Ertugliflozin 5mg, 15mg film-coated tablet (Steglatro®) SMC2102

Pertuzumab 420mg concentrate for solution for infusion (Perjeta®) SMC2120

Semaglutide 0.25mg, 0.5mg and 1mg solution for injection in pre-filled pen (Ozempic®) SMC2092

Tiotropium 2.5 microgram solution for inhalation (Spiriva® Respimat®) SMC2118

Tofacitinib, 5mg film-coated tablet (Xeljanz®) SMC2116

SMC 'Not recommended' medicines - January 2019

Arsenic trioxide 1mg/mL concentrate for solution for infusion (Trisenox®) SMC2025

Links to Additional Information

Monthly Drug Safety Updates:

www.gov.uk/government/publications/drug-safety-update-monthly-newsletter

For full details of medicines and forthcoming SMC Advice see SMC Website:

www.scottishmedicines.org.uk

For a Summary of a Product's Characteristics (SPCs) see Electronic Medicines Compendium Website:

<http://www.medicines.org.uk/emc/>

For full details on NHS Board decisions see Tayside Area Formulary - Local Decisions on SMC Advice database:

<http://www.nhstaysideadtc.scot.nhs.uk/approved/formular/NewMedsHomepage.htm>

Local processes exist to allow prescribing of non-SMC approved medicines for individual patients and are available in the [Policy on Prescribing of Non-Formulary Medicines \(including PACS Tier 1 & 2\)](#)

New & Updated Formulary Links

- [Local Treatment Protocol for Rivaroxaban for Venous Thromboembolism \(VTE\) Prophylaxis in Orthopaedic Patients](#) (updated to include new indications) (Staffnet intranet link)
- FemSeven Sequi® patch and FemSeven Conti® patch formulary entries links added to [Primary Care Prescriber, December 2018](#) (includes advice on supply problem with FemSeven Conti)
- [RCOphth - Hydroxychloroquine and Chloroquine Retinopathy: Recommendations on Screening, February 2018](#)

Other Formulary Updates

- Evolocumab (Repatha® SureClick® ▼) added to formulary (Amber traffic light) as first choice PCSK9 (proprotein convertase subtilisin/kexin type 9) inhibitor and alirocumab (Praluent® ▼) now second choice. Prescribing [flowchart](#) also updated
- Methylprednisolone acetate and lidocaine hydrochloride suspension for injection (Depo-Medrone® with Lidocaine) added to formulary as Green traffic light
- Biosimilar adalimumab (Amgevita® ▼) now on formulary
- Fludrocortide tape 4microgram/cm² (20cm x 7.5cm) added to formulary (Amber traffic light) on the advice of a Dermatologist for steroid responsive skin conditions where occlusive therapy is considered beneficial for example: hypertrophic and keloid scars; dry cracks (skin fissures); and in pompholyx eczema
- Apremilast (Otezla® ▼) now Amber traffic light and the [local treatment protocol](#) (Staffnet intranet link) has been updated
- Dupilumab (Dupixent® ▼) subcutaneous injection added to formulary (Hospital Only - Red traffic light) for moderate to severe atopic dermatitis in adults who are candidates for systemic therapy and those who have failed to respond to, or have a contraindication to, or are intolerant of, other systemic therapy in accordance with the [local treatment protocol](#) (Staffnet intranet link only)

Local implementation of SMC recommendations is taken forward by the Tayside Prescribing Support Unit (PSU). This bulletin is based on evidence available to the Tayside Prescribing Support Unit at time of publication and is covered by the [NHS Tayside Privacy and Accessibility Statements](#).

Medicines within the Tayside Area Formulary are intended to guide choice on a rational selection of medicines for **adults** which have been included on the basis of clinical efficacy, safety, patient acceptability and cost-effectiveness.

This bulletin is produced by the Medicines Advisory Group (MAG), which is a sub-group of the NHS Tayside Area Drug and Therapeutics Committee. Please direct any queries to:

Hazel Steele, Lead Pharmacist, Prescribing Support
E-mail: hazelsteele@nhs.net

Claire James, Senior Pharmacist - Clinical Effectiveness
E-mail: clairejames@nhs.net

Karen Harkness, Principal Pharmacist, Clinical Effectiveness
E-mail: kharkness@nhs.net