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 a particular health board 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 ADTC, Grampian Area Drug and Therapeutics Committee, is responsible for advising NHS Grampian health board on all aspects of the use of medicines.

Medicines routinely available within NHS Grampian are usually included in the Grampian Joint Formulary. The formulary is a list of medicines for use in the health board that has been agreed by the ADTC in consultation with local clinical experts. It offers a choice of medicines for healthcare professionals to prescribe for common medical conditions. A 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 the health board decide which new medicines to make routinely available for patients?

The ADTC in a health board 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 a health board.

Why is a particular medicine not routinely available in NHS Grampian?

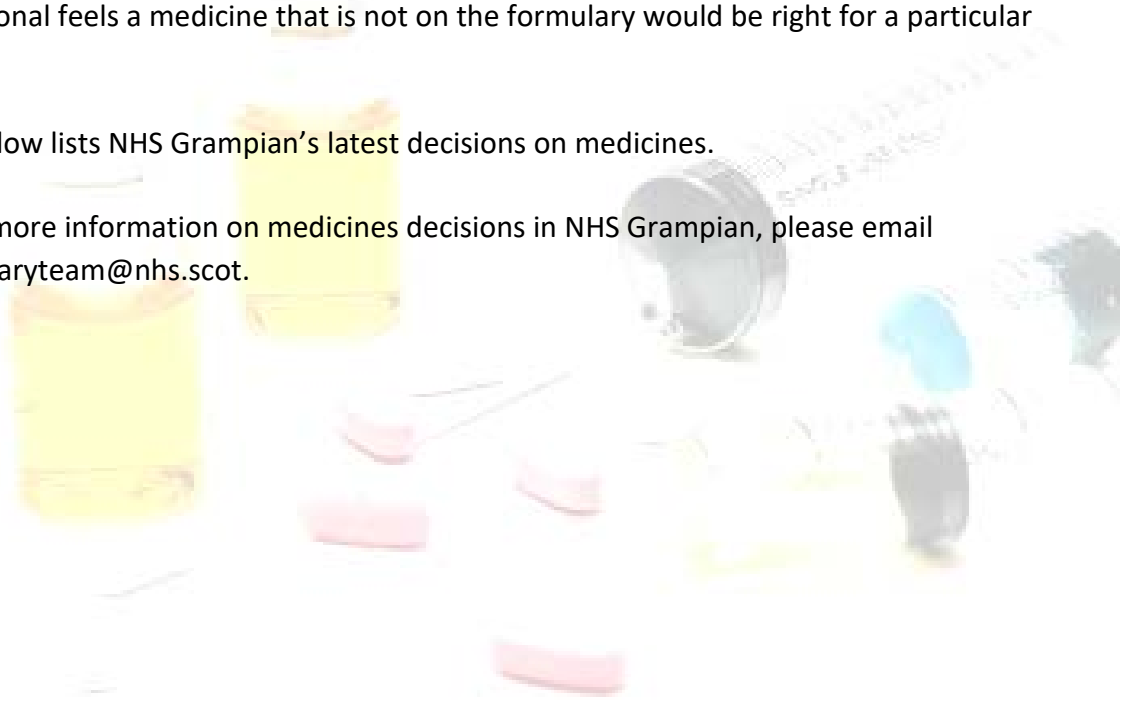
- This is usually because the medicine is not recommended for use in NHS Scotland by the SMC.
- The medicine may not be routinely available in a health board, particularly in smaller health boards, because there is not a suitable specialist who may use the medicine.
- There may also be differences as to 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 NHS Grampian?

- If a medicine is not routinely available and not included in the Grampian Joint 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. 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 Grampian's latest decisions on medicines.

If you need more information on medicines decisions in NHS Grampian, please email gram.formularyteam@nhs.scot.



This document is also available in large print and other formats and languages, upon request. Please call NHS Grampian Corporate Communications on (01224) 551116 or (01224) 552245.

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
atidarsagene autotemcel 2 to 10 x 10^6 cells/mL dispersion for infusion (Libmeldy®)	2413	Treatment of metachromatic leukodystrophy (MLD) characterized by biallelic mutations in the arylsulfatase A (ARSA) gene leading to a reduction of the ARSA enzymatic activity: - in children with late infantile or early juvenile forms, without clinical manifestations of the disease, - in children with the early juvenile form, with early clinical manifestations of the disease, who still have the ability to walk independently and before the onset of cognitive decline.	Not routinely available in NHS Grampian. If local need identified treatment is available through the National Services Scotland Ultra orphan medicines Risk Share Scheme.	18/10/2022
brolucizumab 120mg/mL solution for injection in pre-filled syringe (Beovu®)	2508	In adults for the treatment of visual impairment due to diabetic macular oedema. **SMC restriction:** treatment of visual impairment due to diabetic macular oedema in adults with best corrected visual acuity 75 Early Treatment Diabetic Retinopathy Study letters or less at baseline.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	18/10/2022
Daktacort® 2%/1% w/w ointment (miconazole/hydrocortisone)		For the topical treatment of inflamed dermatoses where infection by susceptible organisms and inflammation co-exist, e.g., intertrigo and infected eczema.	This medicine is now withdrawn from use/discontinued	18/10/2022

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
dexmedetomidine hydrochloride 100micrograms/mL concentrate for solution for infusion		[Off-label use] For the sedation of paediatric patients prior to electroencephalography (EEG) and selected inpatient neuroimaging (magnetic resonance imaging (MRI), computed tomography (CT) scans). **Restriction:** intranasal use where the oral route is not available and cannulation or venepuncture is not required. Dexmedetomidine should be administered only by health care professionals skilled in the anaesthetic management of patients in the operating room or during diagnostic procedures.	Routinely available in line with local guidance	18/10/2022
dithranol 0.1%, 0.25%, 0.5%, 1%, 2% w/w cream (Dithrocream®)		For the topical treatment of subacute and chronic psoriasis including psoriasis of the scalp.	This medicine is now withdrawn from use/discontinued	18/10/2022
filgotinib 100mg, 200mg film-coated tablets (Jyseleca®)	2475	For the treatment of moderate to severe active rheumatoid arthritis in adult patients who have responded inadequately to, or who are intolerant to one or more disease-modifying anti-rheumatic drugs (DMARDs). Filgotinib may be used as monotherapy or in combination with methotrexate. **SMC restriction**: in adults with moderate disease (a disease activity score [DAS28] of 3.2 to 5.1) when intensive therapy with 2 or more conventional DMARDs has not controlled the disease well enough, in combination with methotrexate or as monotherapy when methotrexate is contraindicated.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	18/10/2022

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
imlifidase 11mg powder for concentrate for solution for infusion (Idefirix®)	2445	For desensitisation treatment of highly sensitised adult kidney transplant patients with positive crossmatch against an available deceased donor. The use of imlifidase should be reserved for patients unlikely to be transplanted under the available kidney allocation system including prioritisation programmes for highly sensitised patients.	Routinely available from a specialist centre in another health board	18/10/2022
loperamide 1mg/5mL oral solution sugar free (Imodium®)		For the symptomatic treatment of: - acute diarrhoea of any aetiology including acute exacerbations of chronic diarrhoea for periods of up to 5 days in adults and children over 4 years. - chronic diarrhoea in adults.	This medicine is now withdrawn from use/discontinued	18/10/2022
nivolumab 10mg/mL concentrate for solution for infusion (Opdivo®)	2429	As monotherapy for the adjuvant treatment of adults with completely resected oesophageal or gastro-oesophageal junction cancer who have residual pathologic disease following prior neoadjuvant chemoradiotherapy. **Restriction:** for adjuvant therapy, the maximum treatment duration with nivolumab is 12 months.	Routinely available in line with national guidance, SMC 2429 https://www.scottishmedicines.org.uk/media/6857/nivolumab-opdivo-final-april-2022-for-website.pdf	18/10/2022
ozanimod 0.23mg, 0.46mg, 0.92mg hard capsules (Zeposia®)	2478	For the treatment of adult patients with moderately to severely active ulcerative colitis (UC) who have had an inadequate response, lost response, or were intolerant to either conventional therapy or a biologic agent.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	18/10/2022

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
Palforzia® 0.5mg, 1mg, 10mg, 20mg, 100mg oral powder in capsules for opening, 300mg oral powder in sachet (defatted powder of Arachis hypogaea L., semen (peanuts))	2487	Treatment of patients aged 4 to 17 years with a confirmed diagnosis of peanut allergy. Palforzia® may be continued in patients 18 years of age and older. Palforzia® should be used in conjunction with a peanut-avoidant diet.	Not routinely available as not recommended for use in NHS Scotland, SMC 2487 https://www.scottishmedicines.org.uk/media/7137/defatted-powder-of-arachis-hypogaea-l-semen-peanuts-palforzia-final-sept-2022-for-website.pdf	18/10/2022
paliperidone palmitate 700mg, 1000mg prolonged-release suspension for injection in pre-filled syringe (Byannli®)		For the maintenance treatment of schizophrenia in adults who are clinically stable on one-monthly or three-monthly paliperidone palmitate injectable products.	Routinely available in line with local guidance	18/10/2022
pembrolizumab 25mg/mL concentrate for solution for infusion (Keytruda®)	2460	In combination with chemotherapy, for the treatment of locally recurrent unresectable or metastatic triple-negative breast cancer in adults whose tumours express PD-L1 with a CPS ≥ 10 and who have not received prior chemotherapy for metastatic disease. **SMC restriction**: for use in combination with paclitaxel or nab-paclitaxel. Treatment with pembrolizumab is subject to a two-year clinical stopping rule.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	18/10/2022
pembrolizumab 25mg/mL concentrate for solution for infusion (Keytruda®)	2474	In combination with lenvatinib, for the treatment of advanced or recurrent endometrial carcinoma in adults who have disease progression on or following prior treatment with a platinum-containing therapy in any setting and who are not candidates for curative surgery or radiation. **SMC restriction**: treatment with pembrolizumab is subject to a two-year clinical stopping rule.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	18/10/2022

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
pembrolizumab 25mg/mL concentrate for solution for infusion (Keytruda®)	2479	As monotherapy for the adjuvant treatment of adults with renal cell carcinoma (RCC) at increased risk of recurrence following nephrectomy, or following nephrectomy and resection of metastatic lesions.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	18/10/2022
rucaparib 200mg, 250mg, 300mg film-coated tablets (Rubraca®)	2221	As monotherapy treatment of adults with platinum sensitive, relapsed or progressive, BRCA mutated (germline and/or somatic), high-grade epithelial ovarian, fallopian tube, or primary peritoneal cancer, who have been treated with two or more prior lines of platinum based chemotherapy, and who are unable to tolerate further platinum based chemotherapy.	Not routinely available in NHS Grampian. The September 2022 Drug Safety Update advises that the third-line treatment indication for rucaparib has been withdrawn following a review of the findings of the ARIEL-4 trial, which showed lower overall survival for rucaparib treatment versus standard chemotherapy in patients with high-grade epithelial ovarian, fallopian tube or primary peritoneal cancer.	18/10/2022
sotorasib 120mg film-coated tablets (Lumykras®)	2443	As monotherapy for the treatment of adults with KRAS G12C-mutated, locally advanced or metastatic, non-small cell lung cancer (NSCLC), who have progressed on, or are intolerant to platinum-based chemotherapy and/or anti PD-1/PD-L1 immunotherapy.	Routinely available in line with national guidance, on an interim basis subject to ongoing evaluation and future reassessment, SMC 2443 https://www.scottishmedicines.org.uk/media/6733/sotorasib-lumykras-final-feb-2022-amended-220222-for-website.pdf	18/10/2022
Trimbow® 172micrograms/ 5micrograms/ 9micrograms pressurised inhalation solution (beclometasone dipropionate/ formoterol fumarate dihydrate/ glycopyrronium)	2334	Maintenance treatment of asthma, in adults not adequately controlled with a maintenance combination of a long-acting beta$_2$-agonist and high dose of inhaled corticosteroid, and who experienced one or more asthma exacerbations in the previous year.	Routinely available in line with local guidance	18/10/2022

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
Trimbow® NEXThaler® (DPI) 88micrograms/ 5micrograms/ 9micrograms per actuation inhalation powder (beclometasone dipropionate/ formoterol fumarate dihydrate/ glycopyrronium)		Maintenance treatment in adult patients with moderate to severe chronic obstructive pulmonary disease (COPD) who are not adequately treated by a combination of an inhaled corticosteroid and a long-acting $beta_2$-agonist. **Restriction:** severe COPD (forced expiratory volume in one second less than 50% predicted normal).	Routinely available in line with local guidance	18/10/2022
upadacitinib 15mg, 30mg, 45mg prolonged-release tablets (Rinvoq®)	2510	For the treatment of adult patients with moderately to severely active ulcerative colitis who have had an inadequate response, lost response or were intolerant to either conventional therapy or a biologic agent.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	18/10/2022
venetoclax 10mg, 50mg, 100mg film-coated tablets (Venclyxto®)	2412	In combination with azacitidine for the treatment of adults with newly diagnosed acute myeloid leukaemia (AML) who are ineligible for intensive chemotherapy.	Routinely available in line with national guidance, SMC 2412 https://www.scottishmedicines.org.uk/media/6803/venetoclax-venclyxto-final-march-2022-for-website-amended-110422.pdf	18/10/2022
vinflunine ditartrate 25mg/mL concentrate for solution for infusion (Javlor®)	686/11	As monotherapy for the treatment of adults with advanced or metastatic transitional cell carcinoma of the urothelial tract after failure of a prior platinum-containing regimen.	This medicine is now withdrawn from use/discontinued	18/10/2022