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?

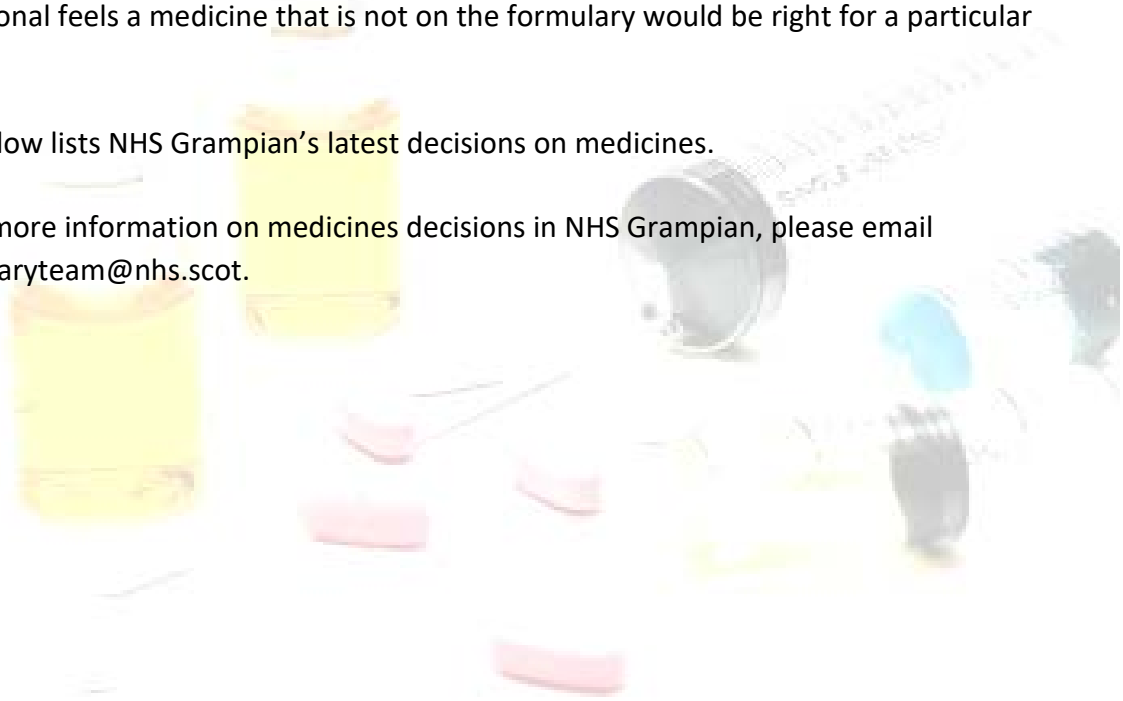
- This is usually because the medicine is not recommended for use in NHS Scotland by the SMC.
- The medicine may not be routinely available in a health board, particularly in smaller health boards, because there is not a suitable specialist who may use the medicine.
- There may also be differences as 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
asciminib 20mg, 40mg film-coated tablets (Scemblix®)	2482	For the treatment of adult patients with Philadelphia chromosome-positive chronic myeloid leukaemia in chronic phase (Ph+ CML-CP), previously treated with two or more tyrosine kinase inhibitors (TKIs), and without a known T315I mutation.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	15/11/2022
belimumab 120mg, 400mg powder for concentrate for solution for infusion (Benlysta®)	2477	Add-on therapy in patients aged 5 years and older with active, autoantibody-positive systemic lupus erythematosus (SLE) with a high degree of disease activity (e.g., positive anti-dsDNA and low complement) despite standard therapy. **SMC restriction**: in adults with evidence for at least one marker of serological disease activity (low complement, positive anti-dsDNA) and a Safety of Estrogens in Lupus Erythematosus National Assessment-Systemic Lupus Erythematosus Disease Activity Index (SELENA-SLEDAI) score ≥10.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	15/11/2022
belimumab 200mg solution for injection in pre filled pen or pre-filled syringe (Benlysta®)	2530	Add-on therapy in adult patients with active, autoantibody-positive systemic lupus erythematosus (SLE) with a high degree of disease activity (e.g. positive anti-dsDNA and low complement) despite standard therapy. **SMC restriction:** in adults with evidence for at least one marker of serological disease activity (low complement, positive anti-dsDNA) and a Safety of Estrogens in Lupus Erythematosus National Assessment-Systemic Lupus Erythematosus Disease Activity Index (SELENA-SLEDAI) score ≥10.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	15/11/2022

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
cefiderocol sulfate tosylate 1g powder for concentrate for solution for infusion (Fetcroja®)		For the treatment of infections due to aerobic Gram-negative organisms in adults with limited treatment option. **Restriction:** for the treatment of severe drug-resistant infections caused by gram-negative bacteria, including, but not limited to, infections caused by OXA-48 carbapenemase-producing Enterobacterales - only on the advice of a Consultant/Specialist Microbiologist or infectious disease specialist and, - only if the infection is susceptible to cefiderocol sulfate tosylate and not susceptible to other suitable antibiotics; or if susceptibility results are not available but the infection needs urgent treatment and is expected to be susceptible to cefiderocol sulfate tosylate but not to other suitable antibiotics.	Routinely available in line with national guidance, on an interim basis subject to ongoing evaluation and future reassessment, https://www.scottishmedicines.org.uk/about-us/latest-updates/pilot-of-new-health-technology-evaluation-process-for-antimicrobials/	15/11/2022
Ducressa® 5mg/mL / 1mg/mL eye drops solution (levofloxacin/dexamethasone)	2511	For prevention and treatment of inflammation, and prevention of infection associated with cataract surgery in adults.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	15/11/2022
esketamine 28mg nasal spray, solution (Spravato®)	2539	Co-administered with oral antidepressant therapy, in adults with a moderate to severe episode of Major Depressive Disorder, as acute short-term treatment, for the rapid reduction of depressive symptoms, which according to clinical judgement constitute a psychiatric emergency.	Not routinely available as not recommended for use in NHS Scotland, SMC 2539 https://www.scottishmedicines.org.uk/media/7204/esketaminie-spravato-non-sub-final-oct-2022docxfor-website.pdf	15/11/2022

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
esomeprazole 20mg, 40mg hard capsules, gastro-resistant tablets		Where maximum doses of omeprazole and lansoprazole have been tried and failed, for adults with the following: - gastro-oesophageal Reflux Disease (GORD) - patients requiring continued NSAID therapy - prolonged treatment after I/V induced prevention of re-bleeding of peptic ulcers - treatment of Zollinger Ellison Syndrome **Restriction:** only on the advice of a Gastroenterology Consultant/specialist.	Routinely available in line with local guidance	15/11/2022
faricimab 120mg/mL solution for injection (Vabysmo®)	2499	For the treatment of adult patients with visual impairment due to diabetic macular oedema (DMO). **SMC restriction**: treatment of visual impairment due to DMO in adults with best corrected visual acuity (BCVA) of 75 Early Treatment Diabetic Retinopathy Study (ETDRS) letters or less at baseline.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	15/11/2022
finerenone 10mg, 20mg film-coated tablets (Kerendia®)	2486	For the treatment of chronic kidney disease (stage 3 and 4 with albuminuria) associated with type 2 diabetes in adults.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	15/11/2022
nivolumab 10mg/mL concentrate for solution for infusion (Opdivo®)	2385	In combination with ipilimumab for the first-line treatment of adults with unresectable malignant pleural mesothelioma (MPM).	Routinely available in line with national guidance, SMC 2385 https://www.scottishmedicines.org.uk/media/6667/nivolumab-opdivo-final-jan-2022-for-website.pdf	15/11/2022

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
olaparib 100mg, 150mg film-coated tablets (Lynparza®)	2368	In combination with bevacizumab for the maintenance treatment of adults with advanced (FIGO stages III and IV) high-grade epithelial ovarian, fallopian tube or primary peritoneal cancer who are in response (complete or partial) following completion of first-line platinum-based chemotherapy in combination with bevacizumab and whose cancer is associated with homologous recombination deficiency (HRD) positive status defined by either a BRCA1/2 mutation and/or genomic instability. **Restriction:** patients with BRCA1 and/or BRCA2 mutation.	Routinely available in line with local guidance	15/11/2022
prochlorperazine 5mg/5mL syrup (Stemetil®)		Vertigo due to Meniere's Syndrome, labyrinthitis and other causes. Nausea and vomiting from whatever cause including that associated with migraine. It may also be used for schizophrenia (particularly in the chronic stage), acute mania and as an adjunct to the short-term management of anxiety.	This medicine is now withdrawn from use/discontinued	15/11/2022
sacituzumab govitecan 180mg powder for concentrate for solution for infusion (Trodelvy®)	2446	Treatment of adults with unresectable locally advanced or metastatic triple-negative breast cancer (mTNBC) who have received two or more prior lines of systemic therapies, at least one of them given for unresectable locally advanced or metastatic disease.	Decision deferred to future meeting	15/11/2022

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
sodium zirconium cyclosilicate 5g, 10g powder for oral suspension (Lokelma®)	2515	In the emergency care setting for the treatment of acute, life-threatening hyperkalaemia alongside standard care. **Restriction:** correction phase use, within the renal department/at the request of renal physicians, as emergency bridging use for adults where dialysis is unavailable but urgently needed and potassium is dangerously elevated.	Routinely available in line with local guidance	15/11/2022
upadacitinib 15mg prolonged-release tablet (Rinvoq®)	2480	For the treatment of active ankylosing spondylitis (AS) in adult patients who have responded inadequately to conventional therapy.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	15/11/2022
venetoclax 10mg, 50mg, 100mg film-coated tablets (Venclyxto®)	2509	In combination with low-dose cytarabine for the treatment of adult patients with newly-diagnosed acute myeloid leukaemia (AML) who are ineligible for intensive chemotherapy.	Not routinely available as not recommended for use in NHS Scotland, SMC 2509 https://www.scottishmedicines.org.uk/media/7210/venetoclax-venclyxto-non-sub-final-oct-2022docxfor-website.pdf	15/11/2022
zanubrutinib 80mg hard capsules (Brukinsa®)	2528	As monotherapy for the treatment of adult patients with Waldenström's macroglobulinaemia (WM) who have received at least one prior therapy, or in first line treatment for patients unsuitable for chemo-immunotherapy.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	15/11/2022

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
Zavicefta® 2g/0.5g powder for concentrate for solution for infusion (ceftazidime/avibactam)		Adults, adolescents and children aged 3 months and older for the treatment of the following infections: - complicated intra-abdominal infection (cIAI) - complicated urinary tract infection (cUTI), including pyelonephritis - hospital-acquired pneumonia (HAP), including ventilator associated pneumonia (VAP) - infections due to aerobic Gram-negative organisms in patients with limited treatment options **Restriction:** for the treatment of severe drug-resistant infections caused by gram-negative bacteria, including, but not limited to, infections caused by OXA-48 carbapenemase-producing Enterobacterales - only on the advice of a Consultant/Specialist Microbiologist or infectious disease specialist and, - only if the infection is susceptible to ceftazidime/avibactam and not susceptible to other suitable antibiotics; or if susceptibility results are not available but the infection needs urgent treatment and is expected to be susceptible to ceftazidime/avibactam but not to other suitable antibiotics.	Routinely available in line with national guidance, on an interim basis subject to ongoing evaluation and future reassessment, https://www.scottishmedicines.org.uk/about-us/latest-updates/pilot-of-new-health-technology-evaluation-process-for-antimicrobials/	15/11/2022
Zubsolv® 1.4mg/0.36mg, 2.9mg/0.71mg, 5.7mg/1.4mg, 8.6mg/2.1mg, 11.4mg/2.9mg sublingual tablets (buprenorphine/naloxone)	2123	Substitution treatment for opioid drug dependence, within a framework of medical, social and psychological treatment. The intention of the naloxone component is to deter intravenous misuse. Treatment is intended for use in adults and adolescents over 15 years of age who have agreed to be treated for addiction. **SMC restriction**: for use in patients for whom methadone is not suitable.	Not routinely available as there is a local preference for alternative medicines	15/11/2022