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?

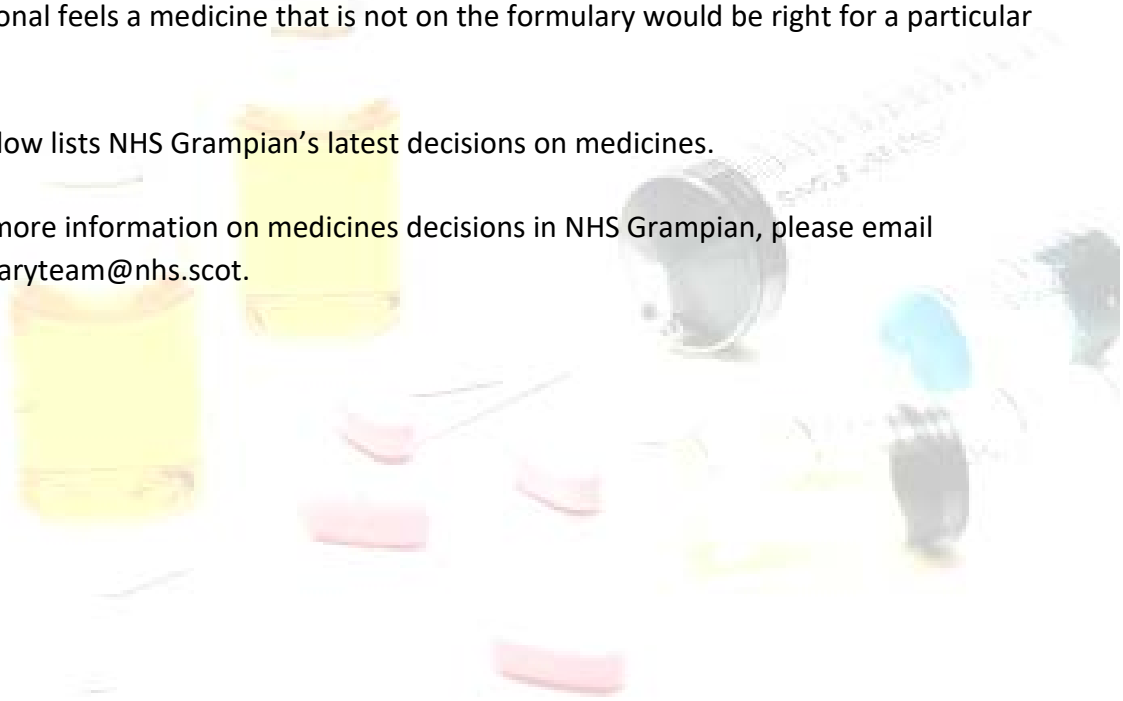
- This is usually because the medicine is not recommended for use in NHS Scotland by the SMC.
- The medicine may not be routinely available in a health board, particularly in smaller health boards, because there is not a suitable specialist who may use the medicine.
- There may also be differences as 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
abemaciclib 50mg, 100mg, 150mg film-coated tablets (Verzenios®)	2494	In combination with endocrine therapy for the adjuvant treatment of adult patients with hormone receptor (HR)-positive, human epidermal growth factor receptor 2 (HER2)-negative, node-positive early breast cancer at high risk of recurrence. In pre- or perimenopausal women, aromatase inhibitor endocrine therapy should be combined with a luteinising hormone-releasing hormone (LHRH) agonist.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	20/12/2022
alpelisib 50mg, 150mg, 200mg film-coated tablets (Piqray®)	2481	In combination with fulvestrant for the treatment of postmenopausal women, and men, with hormone receptor (HR)-positive, human epidermal growth factor receptor 2 (HER2)-negative, locally advanced or metastatic breast cancer with a PIK3CA mutation after disease progression following endocrine-based therapy.	Not routinely available as not recommended for use in NHS Scotland, SMC 2481 https://www.scottishmedicines.org.uk/media/7292/alpelisib-piqray-final-nov-2022-for-website.pdf	20/12/2022
Atgam® 50mg/mL concentrate for solution for infusion (horse anti-human T lymphocyte immunoglobulin (eATG))		For use in adults and in children aged 2 years and older for the treatment of acquired moderate to severe aplastic anaemia of known or suspected immunologic aetiology as part of standard immunosuppressive therapy in patients who are unsuitable for haematopoietic stem cell transplantation (HSCT) or for whom a suitable HSC donor is not available. **Restriction:** prescribing is limited to Consultant Haematologists in line with national guidance.	Routinely available in line with local guidance	20/12/2022
brolucizumab 120mg/mL solution for injection in pre-filled syringe (Beovu®)	2272	In adults for the treatment of neovascular (wet) age-related macular degeneration (AMD).	Not routinely available as there is a local preference for alternative medicines	20/12/2022

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
brolucizumab 120mg/mL solution for injection in pre-filled syringe (Beovu®)	2508	For the treatment of visual impairment due to diabetic macular oedema (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 there is a local preference for alternative medicines	20/12/2022
Calfovit D3® 1200mg/ 800I.U. powder for oral suspension (calcium phosphate/ colecalciferol)		In adults and elderly: - for the correction of calcium and Vitamin D deficiency - as an adjunct to specific therapy for osteoporosis, in patients with either established vitamin D and calcium combined deficiencies or in those patients at high risk of needing such therapeutic supplements.	This medicine is now withdrawn from use/discontinued	20/12/2022
cannabidiol 100mg/mL oral solution (Epidyolex®)	2402	For use as adjunctive therapy of seizures associated with tuberous sclerosis complex (TSC) for patients 2 years of age and older.	Routinely available in line with national guidance, SMC 2402 https://www.scottishmedicines.org.uk/media/6670/cannabidiol-epidyolex-final-jan-2022-amended-200122-for-website.pdf	20/12/2022
crizanlizumab 10mg/mL concentrate for solution for infusion (Adakveo®)	2438	For the prevention of recurrent vaso-occlusive crises in sickle cell disease patients aged 16 years and older. It can be given as an add-on therapy to hydroxycarbamide or as monotherapy in patients for whom hydroxycarbamide is inappropriate or inadequate.	Routinely available in line with national guidance, on an interim basis subject to ongoing evaluation and future reassessment, SMC 2438 https://www.scottishmedicines.org.uk/media/6982/crizanlizumab-adakveo-final-june-2022-for-website.pdf	20/12/2022
faricimab 120mg/mL solution for injection (Vabysmo®)	2499	For the treatment of visual impairment due to diabetic macular oedema (DMO) in adults with best corrected visual acuity (BCVA) of 75 Early Treatment Diabetic Retinopathy Study (ETDRS) letters or less at baseline.	Routinely available in line with national guidance, SMC 2499 https://www.scottishmedicines.org.uk/media/7205/faricimab-vabysmo-final-oct-2022docxfor-website.pdf	20/12/2022

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
faricimab 120mg/mL solution for injection (Vabysmo®)	2512	For the treatment of adult patients with neovascular (wet) age-related macular degeneration (nAMD).	Routinely available in line with national guidance, SMC 2512 https://www.scottishmedicines.org.uk/media/7293/faricimab-vabysmo-abb-final-nov-2022-for-website.pdf	20/12/2022
Komboglyze® 2.5mg/850mg film-coated tablets (saxagliptin/metformin)		Adults with type 2 diabetes mellitus as an adjunct to diet and exercise to improve glycaemic control: - in patients inadequately controlled on their maximally tolerated dose of metformin alone - in combination with other medicinal products for the treatment of diabetes, including insulin, in patients inadequately controlled with metformin and these medicinal products - in patients already being treated with the combination of saxagliptin and metformin as separate tablets.	This medicine is now withdrawn from use/discontinued	20/12/2022
micronised progesterone 100mg capsules (Utrogestan®)	2529	For adjunctive use with oestrogen in post-menopausal women with an intact uterus, as hormone replacement therapy (HRT). **Restriction:** 1) second-line in women who suffer or have suffered moderate or severe progestogenic side-effects when using combined HRT preparations or with other progestogens as part of HRT, contraception or bleeding control 2) as an alternative progestogen in women with an increased risk of breast cancer, cardiovascular disease (CVD) or venous thromboembolism (VTE) and do not have an absolute contra-indication to HRT.	Routinely available in line with local guidance	20/12/2022

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:** adults with confirmation of genomic instability determined using a validated test.	Routinely available in line with local guidance	20/12/2022
parathyroid hormone (rDNA) 25micrograms, 50micrograms, 75micrograms, 100micrograms per dose powder and solvent for solution for injection (Natpar®)	1334/18	As adjunctive treatment of adult patients with chronic hypoparathyroidism who cannot be adequately controlled with standard therapy alone.	This medicine is now withdrawn from use/discontinued	20/12/2022
Ryeqo® 40mg/1mg/0.5mg film-coated tablets (relugolix/ estradiol/ norethisterone acetate)	2442	Treatment of moderate to severe symptoms of uterine fibroids in adult women of reproductive age who have failed or are unsuitable for conventional therapies (first line treatments), such as tranexamic acid, hormonal contraceptives and intrauterine delivery systems.	Routinely available in line with national guidance, SMC 2442 https://www.scottishmedicines.org.uk/media/6928/relugolix-estradiol-norethisterone-acetate-ryeqo-final-may-2022-for-website.pdf	20/12/2022
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.	Routinely available in line with national guidance, SMC 2446 https://www.scottishmedicines.org.uk/media/6731/sacituzumab-trodelvy-final-feb-2022-for-website.pdf	20/12/2022

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
upadacitinib 15mg prolonged-release tablets (Rinvoq®)	2495	For the treatment of moderate to severe active rheumatoid arthritis (RA) in adult patients who have responded inadequately to, or who are intolerant to one or more disease-modifying anti-rheumatic drugs (DMARDs). Upadacitinib 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.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	20/12/2022