

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.

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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
abiraterone acetate 500mg film-coated tablets	102	[Off-label use] In combination with prednisolone and androgen deprivation therapy for the treatment of high-risk hormone-sensitive non-metastatic prostate cancer. Restriction: treatment is subject to a two-year clinical stopping rule.	Routinely available in line with national guidance, NCMAG 102 https://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/ncmag_programme/idoc.ashx?docid=5b088b8b-40d0-4473-8ee6-7f5864fb022a&version=1	21/02/2023
apalutamide 60mg film-coated tablets (Erleada®)	2472	In combination with androgen deprivation therapy (ADT) for the treatment of adults with metastatic hormone-sensitive prostate cancer (mHSPC) .	Routinely available in line with national guidance, SMC 2472 https://www.scottishmedicines.org.uk/media/7096/apalutamide-erleada-final-august-2022-for-website.pdf	21/02/2023
burosumab 10mg, 20mg, 30mg solution for injection (Crysvita®)	2514	Treatment of X-linked hypophosphataemia in adults.	Not routinely available in NHS Grampian. If local need identified identified contact the Pharmacist Team Leader/Principal Pharmacist – Supply (ARI).	21/02/2023
delafloxacin 450mg tablets, 300mg powder for concentrate for solution for infusion (Quofenix®)	2453	Treatment of acute bacterial skin and skin structure infections (ABSSSI) in adults when it is considered inappropriate to use other antibacterial agents that are commonly recommended for the initial treatment of this infection. Restriction: adults with suspected or confirmed polymicrobial infection following treatment failure or when standard antibacterial therapies are not suitable. Delafloxacin should be used on the advice of local microbiologists or specialists in infectious disease. Consideration should be given to official guidance on the appropriate use of antibacterial agents.	Routinely available in line with national guidance, SMC 2453 https://www.scottishmedicines.org.uk/media/6983/delafloxacin-quofenix-final-june-2022-for-website.pdf	21/02/2023

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
eptinezumab 100mg concentrate for solution for infusion (Vypti®)	2547	For the prophylaxis of migraine in adults who have at least 4 migraine days per month. SMC restriction: for patients with chronic and episodic migraine who have had prior failure on three or more migraine preventive treatments.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	21/02/2023
nivolumab 10mg/mL concentrate for solution for infusion (Opdivo®)	2503	As monotherapy for the adjuvant treatment of adults with muscle invasive urothelial carcinoma (MIUC) with tumour cell PD-L1 expression $\geq 1\%$, who are at high risk of recurrence after undergoing radical resection of MIUC.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	21/02/2023
olaparib 100mg, 150mg film-coated tablets (Lynparza®)	2366	As monotherapy for the treatment of adults with metastatic castration resistant prostate cancer and BRCA1/2-mutations (germline and/or somatic) who have progressed following prior therapy that included a new hormonal agent.	Routinely available in line with national guidance, SMC 2366 https://www.scottishmedicines.org.uk/media/6338/olaparib-lynparza-final-september-2021-for-website.pdf	21/02/2023
pembrolizumab 25mg/mL concentrate for solution for infusion (Keytruda®)	2460	In combination with paclitaxel or nab-paclitaxel 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. Restriction: treatment with pembrolizumab is subject to a two-year clinical stopping rule.	Routinely available in line with national guidance, SMC 2460 https://www.scottishmedicines.org.uk/media/7142/pembrolizumab-keytruda-tnbc-final-september-2022-for-website.pdf	21/02/2023
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.	Routinely available in line with national guidance, SMC 2479 https://www.scottishmedicines.org.uk/media/7141/pembrolizumab-keytruda-rcc-final-sept-2022-for-website.pdf	21/02/2023

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
pembrolizumab 25mg/mL concentrate for solution for infusion (Keytruda®)	2501	In combination with chemotherapy, with or without bevacizumab, for the treatment of persistent, recurrent, or metastatic cervical cancer in adults whose tumours express programmed death ligand 1 (PD-L1) with a combined positive score (CPS)≥1. 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	21/02/2023
Sativex® Oromucosal Spray 2.7mg/2.5mg per 100microlitre spray (delta-9-tetrahydrocannabinol /cannabidiol)	2473	As treatment for symptom improvement in adults with moderate to severe spasticity due to multiple sclerosis (MS) who have not responded adequately to other anti-spasticity medication and who demonstrate clinically significant improvement in spasticity related symptoms during an initial trial of therapy.	Routinely available in line with national guidance, SMC 2473 https://www.scottishmedicines.org.uk/media/7097/delta-9-tetrahydrocannabinod-sativex-final-aug-2022-for-website.pdf	21/02/2023
somatrogon 24mg, 60mg solution for injection in pre-filled pen (Ngenla®)	2493	For the treatment of children and adolescents from 3 years of age with growth disturbance due to insufficient secretion of growth hormone.	Routinely available in line with national guidance, SMC 2493 https://www.scottishmedicines.org.uk/media/7042/somatrogon-ngenla-abb-final-july-2022-for-website.pdf	21/02/2023
upadacitinib 15mg prolonged-release tablets (Rinvoq®)	2532	For the treatment of active non-radiographic axial spondyloarthritis in adult patients with objective signs of inflammation as indicated by elevated C-reactive protein (CRP) and/or magnetic resonance imaging (MRI), who have responded inadequately to nonsteroidal anti-inflammatory drugs (NSAIDs).	Not routinely available as the ADTC is waiting for further advice from local clinical experts	21/02/2023