

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](mailto: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
andexanet alfa 200mg powder for solution for infusion (Ondexxya®)	444/21	[Off-label use] for adults treated with the direct factor Xa inhibitor edoxaban when reversal of anticoagulation is needed due to life-threatening or uncontrolled bleeding. <b>Restriction:</b> to patients who present within 18 hours after administration of a factor Xa inhibitor.	Routinely available in line with local guidance	21/03/2023
bulevirtide 2mg powder for solution for injection (Hepcludex®)	<a href="#">2520</a>	For the treatment of chronic hepatitis delta virus (HDV) infection in plasma (or serum) HDV-RNA positive adult patients with compensated liver disease. <b>SMC restriction:</b> to use in patients with evidence of significant fibrosis (METAVIR stage greater than or equal to F2), whose disease has responded inadequately to interferon-based therapy or who are ineligible to receive interferon-based therapy due to intolerance or contra-indication.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	21/03/2023
Cilodex® 3mg/mL / 1mg/mL ear drops (ciprofloxacin/dexamethasone)	1256/17	For the treatment of the following infections in adults and children: - Acute otitis media in patients with tympanostomy tubes (AOMT) - Acute otitis externa Consideration should be given to official guidance on the appropriate use of antibacterial agents.	This medicine is now withdrawn from use/discontinued	21/03/2023
ciprofloxacin 3mg/mL / dexamethasone 1mg/mL ear drops		For the treatment of the following infections in adults and children: - Acute otitis media in patients with tympanostomy tubes (AOMT) - Acute otitis externa Consideration should be given to official guidance on the appropriate use of antibacterial agents.	Routinely available in line with local guidance	21/03/2023

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Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
darvadstrocel 30million cells/6mL suspension for injection (Alofisel®)	2115	For the treatment of complex perianal fistulas in adult patients with non-active / mildly active luminal Crohn's disease, when fistulas have shown an inadequate response to at least one conventional or biologic therapy.	This medicine is now withdrawn from use/discontinued	21/03/2023
eluxadoline 75mg, 100mg film-coated tablets (Truberzi®)	1292/18	In adults for the treatment of irritable bowel syndrome with diarrhoea (IBS-D).	This medicine is now withdrawn from use/discontinued	21/03/2023
fluoxetine 10mg film-coated tablets		<p>Adults:</p> <ul style="list-style-type: none"> <li>- Major depressive episodes.</li> <li>- Obsessive-compulsive disorder.</li> <li>- Bulimia nervosa: Fluoxetine is indicated as a complement of psychotherapy for the reduction of binge-eating and purging activity.</li> </ul> <p>Children and Adolescents Aged 8 Years and Above:</p> <ul style="list-style-type: none"> <li>- Moderate to severe major depressive episode, if depression is unresponsive to psychological therapy after 4-6 sessions. Antidepressant medication should be offered to a child or young person with moderate to severe depression only in combination with a concurrent psychological therapy.</li> </ul>	This medicine is now withdrawn from use/discontinued	21/03/2023
Insuman® Comb 25, Insuman® Basal, Insuman® Rapid 100units/mL suspension for injection (human insulin)		Diabetes mellitus where treatment with insulin is required.	This medicine is now withdrawn from use/discontinued	21/03/2023
lenalidomide 2.5mg, 5mg, 7.5mg, 10mg, 15mg, 20mg, 25mg hard capsules	<a href="#">103</a>	In combination with dexamethasone for the treatment of adults with previously untreated multiple myeloma who are not eligible for transplant and are suitable for thalidomide-containing regimens.	Routinely available in line with national guidance, NCMAG 103 <a href="https://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/ncmag_programme/idoc.ashx?docid=f5da6c93-1233-4c1b-a216-0ed7051c1768&amp;version=-1">https://www.healthcareimprovementscotland.org/our_work/technologies_and_medicines/ncmag_programme/idoc.ashx?docid=f5da6c93-1233-4c1b-a216-0ed7051c1768&amp;version=-1</a>	21/03/2023

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Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
nintedanib 100mg, 150mg soft capsules (Ofev®)	<a href="#">2513</a>	In adults for the treatment of idiopathic pulmonary fibrosis (IPF). <b>SMC restriction:</b> for use in patients with a predicted forced vital capacity (FVC) >80%.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	21/03/2023
ozanimod 0.23mg, 0.46mg, 0.92mg hard capsules (Zeposia®)	<a href="#">2478</a>	For the treatment of adults 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.	Decision deferred to future meeting	21/03/2023
pralsetinib 100mg hard capsules (Gavreto®)	<a href="#">2496</a>	As monotherapy for the treatment of adult patients with rearranged during transfection (RET) fusion-positive advanced non-small cell lung cancer (NSCLC) not previously treated with a RET inhibitor.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	21/03/2023
upadacitinib 15mg, 30mg, 45mg prolonged-release tablets (Rinvoq®)	<a href="#">2510</a>	For the treatment of adults 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.	Decision deferred to future meeting	21/03/2023