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
acalabrutinib 100mg film-coated tablets (Calquence®)		In line with current formulary approval for acalabrutinib 100mg hard capsules, as monotherapy for the treatment of adults with: - previously untreated CLL without a del(17p) or TP53 mutation and who are ineligible for fludarabine, cyclophosphamide and rituximab (FCR) therapy - SMC 2347 (June 2021) - previously untreated CLL who have a 17p deletion or TP53 mutation and in whom chemo- immunotherapy is unsuitable - SMC 2346 (April 2021) - with relapsed/refractory CLL who have had at least one previous therapy, in whom chemo- immunotherapy is unsuitable - SMC 2348 (April 2021)	Routinely available in line with national guidance, SMC 2346, SMC 2347 and SMC 2348	19/09/2023
acalabrutinib 100mg hard capsules (Calquence®)		For the treatment of adults: - as monotherapy or in combination with obinutuzumab, with previously untreated chronic lymphocytic leukaemia (CLL) - as monotherapy, with chronic lymphocytic leukaemia (CLL) who have received at least one prior therapy	This medicine is now withdrawn from use/discontinued	19/09/2023
crizotinib 200mg, 250mg hard capsules (Xalkori®)	<u>2621</u>	As monotherapy for the treatment of paediatric patients (age ≥6 to <18 years) with: - relapsed or refractory systemic anaplastic lymphoma kinase (ALK) positive anaplastic large cell lymphoma (ALCL) - recurrent or refractory anaplastic lymphoma kinase (ALK) positive unresectable inflammatory myofibroblastic tumour (IMT)	Not routinely available as not recommended for use in NHS Scotland, SMC 2621 https://www.scottishmedicines.org.uk/media/7816/crizotini b-xalkori-non-sub-final-august-2023-for-website.pdf	19/09/2023

NHS Grampian New Medicines Decisions - Formulary Group decisions 19 September 2023

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
daratumumab 20mg/mL concentrate for solution for infusion, 1,800mg solution for injection (Darzalex®)	<u>2536</u>	In combination with lenalidomide and dexamethasone for the treatment of adult patients with newly diagnosed multiple myeloma who are ineligible for autologous stem cell transplant (ASCT).	Routinely available in line with national guidance, SMC 2536 https://www.scottishmedicines.org.uk/media/7817/daratum umab-darzalex-final-august-2023-for-website.pdf	19/09/2023
eladocagene exuparvovec 2.8 × 10 <sup>11</sup> vector genomes (vg)/0.5 mL solution for infusion (Upstaza <sup>®</sup> )	<u>2586</u>	For the treatment of patients aged 18 months and older with a clinical, molecular, and genetically confirmed diagnosis of aromatic L-amino acid decarboxylase (AADC) deficiency with a severe phenotype.	Not routinely available in NHS Grampian. If local need identified contact the Pharmacist Team Leader/Principal Pharmacist – Supply (ARI).	19/09/2023
ibrutinib 140mg, 280mg, 420mg film- coated tablets (Imbruvica®)	<u>2543</u>	In combination with venetoclax for the treatment of adult patients with previously untreated chronic lymphocytic leukaemia (CLL).	Not routinely available as the ADTC is waiting for further advice from local clinical experts	19/09/2023
metreleptin 3mg, 5.8mg, 11.3mg powder for solution for injection (Myalepta®)	<u>2559</u>	As an adjunct to diet as a replacement therapy to treat the complications of leptin deficiency in lipodystrophy (LD) patients with: - confirmed congenital generalised LD (Berardinelli- Seip syndrome) or acquired generalised LD (Lawrence syndrome) in adults and children 2 years of age and above. - confirmed familial partial LD or acquired partial LD (Barraquer-Simons syndrome), in adults and children 12 years of age and above for whom standard treatments have failed to achieve adequate metabolic control	Not routinely available in NHS Grampian. If local need identified, treatment is available through the National Services Scotland Ultra-orphan medicines Risk Share Scheme.	19/09/2023
mosunetuzumab 1mg, 30mg concentrate for solution for infusion (Lunsumio <sup>®</sup> )	<u>2542</u>	As monotherapy for the treatment of adult patients with relapsed or refractory follicular lymphoma (FL) who have received at least two prior systemic therapies.	Not routinely available as not recommended for use in NHS Scotland, SMC 2542 https://www.scottishmedicines.org.uk/media/7819/mosunet uzumab-lunsumio-final-august-2023-for-website.pdf	19/09/2023

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
naloxone 1.26mg nasal spray		In adults, for immediate administration as emergency therapy for known or suspected opioid overdose as manifested by respiratory and/or central nervous system depression, in both non- medical and healthcare settings.	Routinely available in line with local guidance	19/09/2023
nintedanib 100mg, 150mg soft capsules (Ofev®)	<u>2513</u>	For the treatment of idiopathic pulmonary fibrosis (IPF) in adults with a predicted forced vital capacity (FVC) >80%.	Routinely available in line with national guidance, SMC 2513 https://www.scottishmedicines.org.uk/media/7449/ninteda nib-ofev-resub-final-feb-2023-for-website.pdf	19/09/2023
nivolumab 10mg/mL concentrate for solution for infusion (Opdivo®)	<u>2620</u>	In combination with ipilimumab for the first-line treatment of adult patients with unresectable advanced, recurrent or metastatic oesophageal squamous cell carcinoma with tumour cell programmed death ligand (PD-L1) expression ≥ 1%.	Not routinely available as not recommended for use in NHS Scotland, SMC 2620 https://www.scottishmedicines.org.uk/media/7820/nivolum ab-opdivo-non-sub-final-august-2023-for-website.pdf	19/09/2023
olipudase alfa 20mg powder for concentrate for solution for infusion (Xenpozyme®)	<u>2560</u>	As an enzyme replacement therapy for the treatment of non-Central Nervous System (CNS) manifestations of Acid Sphingomyelinase Deficiency (ASMD) in paediatric and adult patients with type A/B or type B.	Not routinely available in NHS Grampian. If local need identified contact the Pharmacist Team Leader/Principal Pharmacist – Supply (ARI).	19/09/2023
pemetrexed infusion	<u>109</u>	[Off-label use] In combination with cisplatin as adjuvant treatment for patients with completely resected stage IIA to IIIA non-squamous, non- small-cell lung cancer.	Routinely available in line with national guidance, NCMAG 109 https://www.healthcareimprovementscotland.org/our_work /technologies_and_medicines/ncmag_programme/idoc.ashx ?docid=7935c996-ab84-4d7f-b336-46b8aea18616&version=- 1	19/09/2023

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
rimegepant 75mg oral lyophilisate (Vydura®)	<u>2603</u>	For the preventive treatment of episodic migraine in adults who have at least four migraine attacks per month. <b>SMC restriction:</b> for patients with episodic migraine who have at least 4 migraine attacks per month, but fewer than 15 headache days per month and 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	19/09/2023
rivaroxaban 2.5mg film-coated tablets (Xarelto®)	455/22	Co-administered with acetylsalicyclic acid (ASA) for the prevention of atherothromboticevents in adults with symptomatic peripheral artery disease (PAD) at high risk of ischaemic events. <b>Restriction:</b> for adults who underwent a successful revascularisation procedure (complex endovascular intervention, surgical bypass or hybrid intervention) treated for critical limb- threatening ischaemia (CLTI) or aneurysmal disease	Decision deferred to future meeting	19/09/2023
roxadustat 20mg, 50mg, 70mg, 100mg, 150mg film-coated tablets (Evrenzo®)	<u>2461</u>	Treatment of adults with symptomatic anaemia associated with chronic kidney disease (CKD) who are non-dialysis dependent (NDD) at the time of treatment initiation.	Routinely available in line with national guidance, SMC 2461 https://www.scottishmedicines.org.uk/media/7041/roxadust at-evrenzo-final-july-2022-for-website.pdf	19/09/2023
testosterone gel		[Off-label use] In menopausal women, with low libido, where HRT has been optimised and significant contributing factors have been excluded.	Routinely available in line with local guidance	19/09/2023
vutrisiran 25mg solution for injection in prefilled syringe (Amvuttra®)	<u>2596</u>	For the treatment of hereditary transthyretin- mediated amyloidosis (hATTR amyloidosis) in adult patients with stage 1 or stage 2 polyneuropathy.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	19/09/2023