#### **NHS GRAMPIAN NEW MEDICINES DECISIONS**

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,
  - o 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.

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### 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.

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Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
amivantamab 50mg/mL concentrate for solution for infusion (Rybrevant®)	<u>2638</u>	As monotherapy for treatment of adult patients with locally advanced or metastatic non-small cell lung cancer (NSCLC) with activating epidermal growth factor receptor (EGFR) Exon 20 insertion mutations, whose disease has progressed on or after platinum-based chemotherapy.	Not routinely available as not recommended for use in NHS Scotland, SMC 2638 https://www.scottishmedicines.org.uk/media/7987/amivant amab-rybrevant-non-sub-final-nov-2023-for-website.pdf	19/12/2023
bimekizumab 160mg solution for injection in pre-filled syringe, pre-filled pen (Bimzelx®)	<u>2616</u>	Axial spondyloarthritis:  - for the treatment of adults with active non- radiographic axial spondyloarthritis with objective signs of inflammation as indicated by elevated C- reactive protein (CRP) and/or magnetic resonance imaging (MRI) who have responded inadequately or are intolerant to non-steroidal anti- inflammatory drugs (NSAIDs)  - for the treatment of adults with active ankylosing spondylitis who have responded inadequately or are intolerant to conventional therapy	Not routinely available as the ADTC is waiting for further advice from local clinical experts	19/12/2023
cemiplimab 350mg concentrate for solution for infusion (Libtayo®)	<u>2584</u>	As monotherapy for the treatment of adults with metastatic or locally advanced cutaneous squamous cell carcinoma (CSCC) who are not candidates for curative surgery or curative radiation.	Routinely available in line with national guidance, SMC 2584 https://www.scottishmedicines.org.uk/media/7989/cemipli mab-libtayo-final-nov-2023-for-website.pdf	19/12/2023
cipaglucosidase alfa 105mg powder for concentrate for solution for infusion (Pombiliti®)	<u>2606</u>	As a long-term enzyme replacement therapy used in combination with the enzyme stabiliser miglustat for the treatment of adults with lateonset Pompe disease (acid $\alpha$ -glucosidase [GAA] deficiency).	Not routinely available as the ADTC is waiting for further advice from local clinical experts	19/12/2023
darolutamide 300mg film-coated tablets (Nubeqa®)	<u>2604</u>	Treatment of adults with metastatic hormone- sensitive prostate cancer (mHSPC) in combination with docetaxel.	Routinely available in line with national guidance, SMC 2604 https://www.scottishmedicines.org.uk/media/7870/daroluta mide-nubeqa-resub-final-sept-2023-for-website.pdf	19/12/2023

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Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
degarelix 80mg, 120mg injection (Firmagon®)	<u>2625</u>	<ul> <li>for treatment of high-risk localised and locally advanced hormone dependent prostate cancer in combination with radiotherapy.</li> <li>as neoadjuvant treatment prior to radiotherapy in patients with high-risk localised or locally advanced hormone dependent prostate cancer.</li> </ul>	Not routinely available as the ADTC is waiting for further advice from local clinical experts	19/12/2023
deucravacitinib 6mg film-coated tablets (Sotyktu®)	<u>2581</u>	For the treatment of moderate to severe plaque psoriasis in adults who are candidates for systemic therapy.  SMC restriction: patients who have failed to respond to standard systemic therapies (including ciclosporin, methotrexate and phototherapy), are intolerant to, or have a contra-indication to these treatments.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	19/12/2023
durvalumab 50mg/mL concentrate for solution for infusion (Imfinzi®)	<u>2582</u>	In combination with gemcitabine and cisplatin for the first-line treatment of adults with locally advanced, unresectable, or metastatic biliary tract cancer.	Routinely available in line with national guidance, SMC 2582 https://www.scottishmedicines.org.uk/media/7940/durvalu mab-imfinzi-final-oct-2023-for-website.pdf	19/12/2023
lumasiran 94.5mg/0.5 mL solution for injection (Oxlumo®)	r <u>2639</u>	Treatment of primary hyperoxaluria type 1 (PH1) in all age groups.	Not routinely available as not recommended for use in NHS Scotland, SMC 2639 https://www.scottishmedicines.org.uk/media/7993/lumasira n-oxlumo-non-sub-final-nov-2023-for-website.pdf	19/12/2023
nivolumab 10mg/mL concentrate for solution for infusion (Opdivo®)	<u>2619</u>	In combination with platinum-based chemotherapy for the neoadjuvant treatment of resectable (tumours ≥4 cm or node positive) nonsmall cell lung cancer in adults.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	19/12/2023

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Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
osilodrostat 1mg, 5mg, 10mg film- coated tablets (Isturisa®)	<u>2640</u>	Treatment of endogenous Cushing's syndrome in adults.	Not routinely available as not recommended for use in NHS Scotland, SMC 2640 https://www.scottishmedicines.org.uk/media/7995/osilodro stat-isturisa-non-sub-final-nov-2023-for-website.pdf	19/12/2023
pirfenidone 267mg, 801mg tablets		In adults for the treatment of idiopathic pulmonary fibrosis (IPF).	Routinely available in line with local guidance	19/12/2023
risankizumab 600mg concentrate for solution for infusion, 360mg solution for injection (Skyrizi®)	<u>2534</u>	For the treatment of patients 16 years and older with moderately to severely active Crohn's disease who have had an inadequate response to, lost response to, or were intolerant to conventional therapy or a biologic therapy, or if such therapies are not advisable.	Routinely available in line with national guidance, SMC 2534 https://www.scottishmedicines.org.uk/media/7935/risankizu mab-skyrizi-abb-final-dec-2022-updated-250923-for- website.pdf	19/12/2023
sapropterin dihydrochloride		For the treatment of hyperphenylalaninaemia (HPA) in adults and paediatric patients of all ages with:  - phenylketonuria (PKU) who have been shown to be responsive to such treatment  - tetrahydrobiopterin (BH4) deficiency who have been shown to be responsive to such treatment  Restriction: in line with the recommendations of the Scottish Inherited Metabolic Disorders (SIMD)  Service and UK best practice guidance (BIMDG).	Routinely available in line with national guidance, Scottish Inherited Metabolic Disorders (SIMD) Service and UK best practice guidance (BIMDG)	19/12/2023

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Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
tezepelumab 210mg solution for injection in pre-filled syringe (Tezspire®)	<u>2541</u>	As an add-on maintenance treatment in adults and adolescents 12 years and older with severe asthma who are inadequately controlled despite high dose inhaled corticosteroids plus another medicinal product for maintenance treatment and have either:  (i) experienced at least three exacerbations in the previous year and are not receiving maintenance treatment with oral corticosteroids or  (ii) have blood eosinophils ≥150 cells/microlitre and are receiving maintenance treatment with oral corticosteroids	Decision deferred to future meeting	19/12/2023
trastuzumab deruxtecan 100mg powder for concentrate for solution for infusion (Enhertu®)	<u>2608</u>	As monotherapy for the treatment of adult patients with unresectable or metastatic HER2-low breast cancer who have received prior chemotherapy in the metastatic setting or developed disease recurrence during or within 6 months of completing adjuvant chemotherapy.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	19/12/2023

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