

## Area Drugs and Therapeutics Committee Meeting Minutes

Wednesday 19<sup>th</sup> February 2025 10-12.30pm

Microsoft Teams Meeting

<b>Present:</b>	Mehrdad Malekian Victoria Gemmell Kirsty Macfarlane Kelly Baillie (item 8b, 9b) Rachael Kelly	Chris Miller Graeme Bryson (GRB) (until item 15) Craig Thurtell Stephanie Dundas Penny Brankin
<b>1. Apologies:</b>	Tyra Smyth Colin Angus David Semple Alistair Brown	
<b>2. Declaration of Interest</b>		
Item	Notes	Action
<b>3.</b>	<b><u>Ratification of minutes of January 2025 meeting</u></b> A comment was received regarding item 4c. This will be amended and returned to March ADTC for ratification.	
<b>4.</b>	<b><u>Matters arising not covered elsewhere on the agenda</u></b>  a) <b>Mirikiz - update awaited</b>  b) <b>Vabysmo - update awaited</b>  c) <b>Produodopa - update awaited</b>  d) <b>Rizankiz - update awaited</b>	
<b>5.</b>	<b><u>ADTC Committee Business</u></b>  GRB gave an update on plans for committee reporting and potential ADTC sub groups.	
<b>6.</b> <b>6.1</b>	<b><u>SMC Advice-CONFIDENTIAL</u></b> <b><u>FULL SUBMISSIONS</u></b>  Please see attached Advice from the Scottish Medicines Consortium which will be published on the SMC website after 10.00 am on <b>Monday 10 March 2025.</b>	

Medicine	Indication in brief	SMC reference	Advice Summary
ripretinib (Quinlock) Deciphera Pharmaceuticals	For the treatment of adult patients with advanced gastrointestinal stromal tumour (GIST) who have received prior treatment with three or more kinase inhibitors, including imatinib.	SMC2722	<b>NOT RECOMMENDED</b>
spesolimab (Spevigo)	For the treatment of adult patients with advanced gastrointestinal stromal tumour (GIST) who have received prior treatment with three or more kinase inhibitors, including imatinib.	SMC2729	<b>NOT RECOMMENDED</b>

#### **ABBREVIATED SUBMISSIONS**

Medicine	Indication in brief	SMC reference	Advice Summary
talazoparib (Talzenna)	In combination with enzalutamide for the treatment of adult patients with metastatic castration-resistant prostate cancer (mCRPC) in whom chemotherapy is not clinically indicated.	SMC2753	<b>ACCEPTED with PAS AWAIT WoSCAN ADVICE</b>
cabozantinib (Cabozantinib Ipsen)	As monotherapy for the treatment of hepatocellular carcinoma (HCC) in adults who have previously been	SMC754	<b>ACCEPTED with PAS AWAIT WoSCAN ADVICE</b>

treated with  
sorafenib

**NON SUBMISSIONS**

amivantamab (Rybrevant)	In combination with carboplatin and pemetrexed for the treatment of adult patients with advanced non-small cell lung cancer (NSCLC) with EGFR Exon 19 deletions or Exon 21 L858R substitution mutations after failure of prior therapy including an EGFR tyrosine kinase inhibitor (TKI).	SMC276 8	<b>NOT RECOMMENDED</b>
atezolizumab (Tecentriq)	As monotherapy for the first-line treatment of adult patients with advanced NSCLC who are ineligible for platinum-based therapy.	SMC276 9	<b>NOT RECOMMENDED</b>

**Amended Advice**

- fenfluramine oral solution (Fintepla) UCB Pharma Ltd SMC2723
- NOTED

	<ul style="list-style-type: none"> <li>• <u>lecanemab concentrate for solution for infusion (Legembi) Eisai SMC2700</u></li> </ul> <p>NOTED</p> <p><b><u>ILAP</u></b>  <a href="#">Launch of Refreshed Innovative Licensing and Access Pathway (ILAP)</a></p> <p>NOTED</p>	
6.2	<p><b>Updates to NHS status on SMC advice and ADTC New Medicines Decisions.</b></p> <p>RK presented bulletins which highlight updates to board designations of medicines as per the follow-up. Emagliflozin and Dapagliflozin for the treatment of symptomatic chronic heart failure with preserved ejection fraction was noted as updated heart failure guidance is now on RDS.</p> <p>RK outlined updates to designations as per the follow-up. Designation updates were specifically discussed for Vibegron, Linzagolix and Somapacitan and were agreed. The committee agreed for clinicians to be contacted again regarding Rimegepant board designation due to this passing the deadline for decision.</p> <p>Symbicort was discussed and the committee agreed that updated asthma guidance was expected.</p>	
7.	<p><b><u>Lanarkshire Formulary / West of Scotland Formulary</u></b></p> <p>7.1 These were accepted. Stock issues encountered within acute were raised and RK will proceed with correspondence to update formulary entries as required.</p> <p>Information was noted regarding supply problems with IV paracetamol. The Formulary Pharmacist will review and action any changes required.</p> <p>An update regarding availability of Pabrinex was received. A generic version is now available. There is a plan to use existing supplies before a wholesale switch. The formulary will be changed to reflect this once all sites have moved to the new product.</p>	
7.2	<p><b><u>West of Scotland Formulary Updates</u></b></p> <p>GRB gave an update. Recruitment for the program team is underway.</p> <p>Plans for formulary sections are also moving forward. There is an opportunity for all Boards to contribute to these</p> <p>The committee agreed NHS Lanarkshire should move forward with participation in the development of a West Regional Formulary.</p>	
8	<p><b><u>Clinical Protocols &amp; Guidelines</u></b></p> <p>a) <b>Valproate Pathway Neurology-Adam Daly</b></p> <p>There was an ask to see the paediatric document referred to in the guideline and for clarity on the age range considered “child-bearing”. The document is approved pending this addition and completion of the governance information at the rear.</p> <p>b) <b>Supportive Care Guidelines – Kelly Baillie</b></p> <p>(i)+(ii) <b>Guideline for the Management of Systemic Anti-Cancer Therapy (SACT) Induced Diarrhoea in Adult Haematology and Oncology patients AND Constipation in Adult Haematology and Oncology Patients</b></p> <p>The committee welcomed these guideline updates. They were noted as clear and easy to follow. Both are approved pending some minor changes.</p>	

	<p>c) <b>Major Non Obstetric Haemorrhage Guideline-Andrew Fyfe</b> Several comments were received which will be fed back to the author. The document is not approved at this time.</p> <p>d) <b>Administration of S/C Intermittent Medication in Adult Palliative Care Policy - Linda Johnstone</b> Comments were received regarding some technical points which will be fed back to the author. There was also a suggestion that the document should be shared with Primary Care Medical Leadership Group to gather any comments or concerns. These should be fed back to the committee to support final review and approval.</p> <p>e) <b>Ryeqo Clinical Protocol for Introduction of New Medication – Mihai Gherghe</b> This protocol combines two SMC indications, endometriosis and uterine fibroids and is an update to a previously submitted document. There were a number of comments which will be fed back to the author. Concerns around DXA scanning are considered addressed. A suggestion was made to share the document with Primary Care Medical Leadership for their comments prior to resubmission to adtc. It would be added to formulary as an S1-specialist initiation, with the specialist carrying out all initial baseline investigations and examinations</p>	
	<b>9. <u>New Medicine Safety Notifications &amp; Alerts</u></b>	<b>GRB</b>
	<p>9.a <b>Medicines-Related Communications to Health Boards – Graeme Bryson</b> There was a discussion around how information relating to medicines is disseminated. The committee discussed potential options to take forward within NHSL. This includes responsibilities and feedback assurances. GRB will take this forward with Senior Medical Leadership. Item to remain on matters arising.</p> <p>b. <b>Blanket Unlicensed &amp; High Risk Off Label Medicine Application - Kelly Bailie</b> There are serious supply problems with licensed aprepitant 80mg capsules. MSN/2024/117 advise use of UL versions. This was approved.</p> <p>c. <b>Blanket Unlicensed Approval – Acetylcholine</b> Request to use UL Acetylcholine as an IMP as part of an approved clinical trial. This was approved.</p>	
	<b>10. Prescribing Management Board Update</b>	
	<p>10.1 nil</p> <p>10.2 nil</p>	
	<p>11. <b><u>Medicines for the Treatment of Cancer</u></b></p> <p>a. <b>National Cancer Medicines Advisory Group (NCMAG) Programme</b> Await WoSCAN advice.</p>	
	<p>12. <b><u>Non-Medical Prescribing</u></b> Annual Non-Medical Prescribing webinar taking place next week. This is well subscribed and has many interesting presentations planned.</p>	

13.	<p><b><u>PGD Activity Report</u></b></p> <p>KMAC gave an update. The PGD database is now up and running. This will record and track all NHSL PGD's.</p> <p>Previously identified PGD's in use in Acute are in the process of being updated with alternative measures in place meantime.</p> <p>A further 14 out of date PGD's have been identified and steps are being taken to remedy this.</p>	
14.	<p><b><u>Antimicrobial Management Team Update</u></b></p> <p>Nil</p>	
15.	<p><b><u>Lay member related items</u></b></p> <p>nil</p>	
16.	<p><b><u>AOCB</u></b></p> <p><b>a. Medicine Shortages Process</b></p> <p>KMAC gave an overview. Comments were received and were discussed. Veronica Rainey and Mark Russell were previously asked for their thoughts on this from a primary care perspective. Pharmacotherapy Lead Pharmacists were also included in the development process. It was noted that the document is Primary Care focused, but is hoped to expand in due course to include Acute site processes.</p> <p>This was approved.</p> <p><b>b. ADTCC Newsletter</b></p> <p>This was noted.</p>	
17.	<p><b><u>Date of next meeting</u></b></p> <p>Wednesday 19<sup>th</sup> March 2025 10-12.30pm</p> <p>MS TEAMS</p>	