

Northern, Eastern and Western Devon Clinical Commissioning Group

Notes of: Meeting of the Northern and Eastern Devon Formulary Interface Group Thursday 9th June 2016: 9:00am – 11:00am. Old Heathcoat's School, Tiverton

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Present	Tawfique Daneshmend (TD), Consultant Gastroenterologist - Chair	RD&E	
	Iain Carr, Medicines Optimisation Pharmacist	NEW Devon CCG	
	Emma Gitsham (EG), Joint Formulary Pharmacist	NEW Devon CCG	
	Susie Harris (SH), Consultant, Elderly Care		
	Matt Howard (MH), Clinical Evidence Manager		
	NDHT		
	Simon Kay (SK), GP	NEW Devon CCG	
	Carole Knight (CK), Formulary Pharmacist	NDHT	
	Stuart Kyle (SKy), DTC Chair / Consultant Rheumatologist	NDHT	
	Denise Lanyon (DL), Medicines Optimisation Pharmacist	NEW Devon CCG	
	Bethan Rogers (BR), Formulary Pharmacist	RD&E	
	Sam Smith (SS), Locality Medicines Optimisation Pharmacist	NEW Devon CCG	
	Carol Webb (CW), Joint Formularies Technician	NEW Devon CCG	
In	Maria Legarra, Pharmacy student		
attendance	Rachel Cottier, Bath University Pharmacy student		
	Kenneth So, Bath University Pharmacy student		
Apologies	Carol Albury (CA), Locality Medicines Optimisation Pharmacist	NEW Devon CCG	
	Beverly Baker (BB), Non-Medical prescribing lead	NEW Devon CCG	
	Andrew Harrison (AH), GP	NEW Devon CCG	
	Chris Sullivan (CS), Clinical Effectiveness Pharmacist	DPT	
	Darunee Whiting, GP	NEW Devon CCG	
Welcome and Apologies – noted above			
Declarations of interest:			
no interests were declared			

2. Notes of previous meeting:

The notes of the meeting of 14th April 2016 were agreed.

Action list from the previous minutes

- Tadalafil post prostatectomy: this is an on-going piece of work and is now added to the formulary work plan
- Immunology forms: the link will be added when available
- Fultium®: specialists were contacted and it was agreed to change Fultium® 3200 units to an amber drug for use in patients with hyperparathyroidism in the perioperative period. The 20,000 unit preparation has been removed, specialists confirmed Stexerol® 25,000 units may be used in patients with cystic fibrosis.
- Additional request for a change in blood glucose testing strips: it was agreed to add into the formulary Contour® Next strips (amber) for patients who are using the Medtronic insulin pump.



3. Proposed changes to formulary products

Removal of pholcodine and simple linctus: to promote the message of self-care
and these products are readily available from community pharmacy we have been
asked to consider removal of these products. This was discussed and it was agreed
to remove pholcodine linctus but to change simple linctus to a hospital only
preparation as this is still required.

4. Zolmitriptan, use in children

The text of the formulary does not include the use of zolmitriptan, currently recommended by specialists for off-label use in children with migraines. It is a recognised treatment. The proposal to amend the text to include zolmitriptan was agreed.

5. Asthma COPD Overlap Syndrome (ACOS), COPD guidance

- ACOS: feedback had been received asking for some formulary guidance. This was
 discussed and it was agreed to add the guidance which has been consulted on from
 the acute trusts with one amendment, to remove the sentence regarding stepwise
 diagnosis.
- COPD guidance: we had been asked to make some amendments to the recently agreed COPD guidance. These amendments were discussed and agreed with some changes:
 - o Remove the statement about stepwise approach
 - Remove the patient passport information, and replace with a link to the CCG COPD information
 - In the section Category D to change the text where the patient remains symptomatic to 'refer for specialist opinion'

6. Review: acne

This section of the formulary has been reviewed and consulted upon by local specialists. The presented review was discussed and agreed with the following amendments:

- From specialist comment, topical isotretinoin to be changed to a blue, second-line treatment and adapalene to be changed to a green, first-line treatment
- Isotrexin® and Epiduo® to be changed to blue, second-line treatment
- Oxytetracylcine to be changed to blue, second-line treatment and trimethoprim to be added as a specialist initiated oral treatment
- To update the oral contraceptive Marvelon® to the preferred brand Gedarel® 30/150
- To revise the text on co-cyprindiol to reflect the SPC/BNF
- In severe acne to highlight that patients being considered for oral isotretinoin should be referred for a psychiatric assessment if there are significant mental health concerns, prior to dermatology review

7. NOAC Review

The South West Cardiovascular Strategic Clinical Network has reviewed their NOAC guidance. The formulary information has been revised in the light of this. The proposed amendments were discussed and agreed.

It was agreed to add into the formulary idarucizumab (Praxbind®) (hospital only) which is the agent to reverse the anticoagulation effect of dabigatran.

8. Recent drugs decisions: These were noted



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- 9. MHRA Drug Safety Update:
 - April
 - o SGLT2 inhibitors, notes to be added
 - o Apomorphine with domperidone, notes to be added
 - o Live attenuated vaccines, notes to be added
 - May: Noted

Next meeting: Thursday 11th August 2016

Northern & Eastern Formulary – Action Log			
Date	Action	Responsible	