#### **Prescribing and Formulary Panel**

#### Minutes of the meeting held on October 5th 2021 at the Oak MDT Room

# **Present**

Geraldine O'Riordan, Prescribing Advisor and Chair (GOR)

Tom Saunders, Medical Specialist Group (HD),

Mike McCarthy, Healthcare Group (MMC)

Hong Choo, Lead MI Pharmacist representing the PEH Pharmacy Manager, HSC (HC)

Douglas Wilson, Queens Road Medical Practice (DW)

Peter Gomes, Medical Specialist Group (PG)

## **Apologies**

Nikki Brink, States-Employed Doctors and DPH (NB)

Paul Williams, Island Health (PH)

Hamish Duncan, Medical Specialist Group (HD),

#### 1: Minutes

The draft minutes of the September 2021 meeting were approved.

#### 2. New Drugs

The following products were considered

#### 1. Nusinersen

This product was requested for a Guernsey patient with SMA by a Southampton Consultant. It was originally sent to the IFR Panel, where it was declined because it is a licensed product used for its licensed indication. The IFR panel's reviewing Physician recommended that it be declined on the basis of non-compliance with G1033. There was a lengthy discussion at the meeting about the evidence of benefit to support this treatment for this ultra-rare condition, which was uncertain. It was noted that while the NHS discount has been made available to Guernsey the ICER per QALY gained per year is still well in excess of the organisation's threshold of affordability. This was estimated to be "in excess of £100k" by NICE and to be between £1.62 million and £2.37 million by the SMC in Scotland. It was agreed that it cannot be supported at this time. It was further agreed that GOR will write to the Lead Officer at HSC requesting an update on progress on the rewriting of G1033.

Action: GOR

#### 2. Pregabalin:

There was a lengthy discussion about this drug, which had been discussed on several occasions since 2004. It was acknowledged that the Pain Clinic Clinicians and some in other organisations wished to have it available, that the price has fallen considerably now and that some patients do respond well to it. However, concerns remained about the misuse potential and the clear advice from NICE against its use in all pain types, except neuropathic pain. The Lead Psychiatrist in Addiction and the Prison Medical Officer, among others, were concerned. GOR highlighted that the prescribing per head of gabapentin in England and in Guernsey were the same. But that the same number again in England were prescribed pregabalin. It was further noted that pregabalin's cost on a private prescription is just a few pounds more than the prescription charge.

By a majority (MMC against, all those present agreed) it was agreed to decline pregabalin.

**Action: GOR** 

# 3. Biktavry<sup>R</sup>

This product has been requested following an MDT recommendation. It is a combination of bictegravir/emtricitabine/tenofovir alafemide and is licensed for use in the treatment of adults infected with human immunodeficiency virus 1 (HIV-1) in certain circumstances. The dose is one tablet once daily and it is recommended for NHS patients in England (by NHSE in certain circumstances), in Scotland and in Wales (the latter also in limited circumstances), if the company sells it at the NHS discounted price or lower. GOR said that the company has now extended the NHS discount to Guernsey but this for hospital dispensing for now. A Community Pharmacy Rebate scheme is not possible at present. The request was approved but for limited prescribing, with consideration given to community dispensing as soon as possible.

**Action: GOR** 

# 4. New NICE TA drugs

These were noted. PG said that extra staff in pharmacy and nursing will be required imminently to ensure that the service remains safe. Nursing posts seemed to be in the pipeline, GOR is to check with BH to ensure that pharmacy resources are made available. For now there is adequate space in Bulstrode House for administration.

Actions GOR/BH

### C. Cost-neutral /minor amendments

The following products were considered and recommended

# Minor and/or cost-neutral additions

- 1. **Azathioprine oral suspension 50mg /5ml** for a patient with a Radiologically Inserted Gastrostomy (RIG). Azathioprine is not suitable for crushing. Cost differences are as follows: £3.10 for 56 Azathioprine 50mg tabs vs £22.55 for 100ml 50mg/5ml oral suspension special. It will be for tube fed patients only.
- 2. Hydroxycarbamide Oral Solution 100 mg/ml oral solution as a better value replacement for unlicensed special Hydroxycarbamaide Oral\_Susp 300mg/5ml, 500mg/5ml and because this drug is also not suitable for crushing. The latter will not be supplied to pharmacies without a letter from the prescriber confirming the reason(s) why the licensed solution is not appropriate. It costs £250 per bottle vs a potentially limitless cost from special companies.

# • Private Chemotherapy requests

Trastuzumab deruxtecan: for patient with metastatic breast cancer who has been on Trastuzumab emtansine for nearly 2 years. The new treatment will replace the current treatment for her, when a change is indicated.

#### **AOB**

TS queried the situation with sodium zirconium for hyperkalaemia, because the TA criteria are so broad that most if not all patients would "qualify" for it. HC said that he had completed a formulary review of these treatments for one of his MSc assignments. There were advantages in terms of palatability and speed of onset of action with the newer drugs, also including patiramer. Their costs were somewhat higher, but that calcium resonium costs in the region of £80 per container.

4: Date of next meeting: Tuesday November 2nd 2021