

**Notes of: Meeting of the Northern and Eastern Devon Formulary Interface Group
Thursday 26th February 2015: 9:00am – 11:00am. Old Heathcoat's School, Tiverton**

Present	Tawfique Daneshmend (TD), Consultant Gastroenterologist - Chair	RD&E
	Carol Albury (CA), Locality Medicines Optimisation Pharmacist	NEW Devon CCG
	Beverly Baker (BB), Non-Medical Prescribing Lead	NEW Devon CCG
	Iain Carr (IC), Medicines Optimisation Pharmacist	NEW Devon CCG
	Niall Ferguson (NF), Director of Pharmacy	NDDH
	Susie Harris (SHa), Consultant, Elderly Care	RD&E
	Matt Howard (MH), Clinical Evidence Manager	NEW Devon CCG
	Simon Kay (SK), GP, Haldon House Surgery	NEW Devon CCG
	Carl Peacock (CP), Medicines Optimisation Pharmacist	NEW Devon CCG
	Hugh Savill (HS), GP, Castle Place Surgery	NEW Devon CCG
	Sam Smith (SS), Locality Medicines Optimisation Pharmacist	NEW Devon CCG
	Ben Waterfall (BW), GP	NEW Devon CCG
	Carol Webb (CW), Joint Formularies Technician	NEW Devon CCG
	Darunee Whiting (DW), GP, Northam Surgery	NEW Devon CCG
In attendance	Debbie Yarde, Acting Professional Lead Bladder & Bowel Care – for items 3 and 4	NEW Devon CCG
	Roz Gittins, Lead Clinical Pharmacist (South West) – for item 8	Addaction
	Louise Greaves, Medicines Optimisation Pharmacist – for item 7	NEW Devon CCG
Apologies	Tracey Foss (TF), Chief Pharmacist	RD&E
	Ali Hodgetts (AH), Clinical Pharmacy Manager	RD&E
	Andrew Harrison (AH), GP, The South Lawn Medical Practice	NEW Devon CCG
	Carole Knight (CK), Formulary Pharmacist	NDDH
	Stuart Kyle (SKy), DTC Chair / Consultant Rheumatologist	NDDH
	Petrina Truman (PT), Joint Formularies Pharmacist	NEW Devon CCG
1.	Welcome and Apologies – noted above	
2.	Notes of previous meeting: The notes of the meeting of 27 th November 2014 were agreed.	
	Action list from the previous minutes, not on the agenda	
	<ul style="list-style-type: none"> • Denosumab: Funding/cost is delaying denosumab moving from secondary to primary care administration. It was noted that in the Western locality this is being done by GP practices with no additional payment being made by the CCG, also in neighbouring CCGs Somerset and Cornwall. The issue has been passed onto the Medicines Optimisation Commissioning Strategy Group who discussed this and required further financial information to be provided. It was agreed that the updated guidance could be added to the formulary amended accordingly in regard to denosumab. • Formulary choice of calcium and vitamin D products: There are a number of new products available at reduced cost compared to the current formulary choices, which would give an estimated saving of £300 000 p.a. It was agreed to remove the current formulary products Adcal® D3 and Calcichew D3 (Forte and caplets). It was 	

agreed to add into the formulary:

- TheiCal D3: a once daily chewable product
- Accrete D3: a twice daily tablet for patients who do not want a chewable tablet
- Calfovit D3: to remain in the formulary for patients unable to chew or swallow tablets

3. **Contenance formulary**

The current continence formulary has been reviewed and it is proposed that it now becomes Chapter 18 of the North and East Formulary, together with a printable quick reference guide of the products. It is proposed to raise the profile of the formulary with the nursing teams. A list of the product changes was presented. It was noted that both this and the South and West formulary are now fairly well aligned.

BB and Debbie Yarde were thanked for a good and clear piece of work and continence chapter was agreed to go into the formulary.

4. **Alprostadil cream**

An application to add to the formulary a Vitaros® cream, new form of alprostadil. Alprostadil is in the formulary as an additional option for patients who are not suitable for treatment with a PDE-5 inhibitor. It would be in addition to Caverject®, which is currently unavailable. Its use would not totally replace the injectable alprostadil but may be the preferred treatment for first-time patients. The use of this product should be cost neutral, possibly cost saving. It was agreed to add Vitaros® to the formulary, and to include notes on the use of a latex condom barrier.

5. **Antibacterial review**

Public Health England (PHE) revised their antibacterial advice (previously the HPA guidance); NICE issued a clinical guideline on pneumonia. These prompted a review of this section. Microbiologists from NDDH and RD&E were consulted in this review. The group had various comments and question some of which need input from the Microbiologists:

- Influenza: due to evidence available that the antivirals for influenza are not effective it was agreed to remove most of the information and to leave the links to NICE, Department of Health and Public Health England
- Acute sore throat: it was agreed to leave in the formulary the information on invasive Group A Streptococcal infections
- Meningitis: it was agreed to leave in the formulary both benzylpenicillin and cefotaxime, to look at the prescribing data to see what is being used
- Uncomplicated UTI: first-line nitrofurantoin in line with the PHE guidance was queried, agreed to put trimethoprim first-line, nitrofurantoin second-line. This to be checked with the Microbiologists that local sensitivities are in accord with this. Pivmecillinam has been added in line with PHE, to check with Microbiology if sensitivity to this is reported. To add notes on the long-term use of nitrofurantoin. To add supply information to fosfomycin
- Clostridium difficile: to have both metronidazole and vancomycin as amber

- Chlamydia trachomatis: to check the use of erythromycin with microbiology, could it be replaced with clarithromycin
- Lyme disease: to clarify when it is worth doing serology and whether to treat whilst serology is pending

There is a self-care leaflet being produced which would be useful to link to in appropriate places in the antimicrobial guidance.

It was agreed to add in the oral and dental infections section. To include the dental hotline contact numbers.

Action: to clarify outstanding points with the Microbiologists

CW

6. **Jaydess®**

Jaydess® was approved for use by the Clinical Policy Committee. Its position in the formulary was discussed. It was asked that the entry be made clear that Jaydess® is for contraception only and to be added as a blue item. Notes to be added regarding lower acquisition cost over 3 years only, not 5 years. Mirena® should be annotated for use in menorrhagia.

7. **Fostair® proposal**

It has been proposed that Fostair®, licensed for both asthma and COPD, and Fostair NEXThaler®, for asthma only, be added to the formulary. This would then give a licensed MDI preparation for COPD where Seretide® is being used off license. The NEXThaler® is a cost-effective alternative to some of the other inhaler devices currently in the formulary.

It was agreed to add Fostair® and Fostair NEXThaler®, subject to a future review of formulary products.

8. **Nalmefene NICE TA325**

Nalmefene has been added to the formulary in line with the NICE TA. It is for those patients who wish to reduce their alcohol consumption rather than abstinence. The requirement for it to be prescribed together with psychosocial support was discussed and the availability of this support.

Action: to find out from Public Health who commission drugs and alcohol services what psychosocial support is or will be available

**CA/
SS**

It was asked that the notes be re-worded in regard to primary care prescribing and the psychosocial support, this note to be moved to the top of the entry.

It was also agreed to make acamprosate a blue drug.

9. **Epilepsy MHRA**

It was agreed to expand the notes on the brand/generic prescribing of epilepsy treatments to highlight the MHRA alert guidance. This would mirror the guidance in the South and West Formulary.

10. **Magnesium preparations**

There is now a licensed magnesium preparation available, Magnaspartate®. It was agreed to add this to the formulary and remove the unlicensed preparation. It was commented that many patients buy products such as Magnasorb, which cause less side-effects. It was agreed to put a note in about OTC preparations.

<p>11. Quetiapine It was agreed to add Zaluron® XL to the formulary as an alternative to Seroquel® XL. This has potential savings of £250 000 for the CCG. Both Devon Partnership Trust and Plymouth Community Heathcare are happy with this change.</p>
<p>12. Nortriptyline in IBS Due to the cost of nortriptyline it has been asked that the reference to its use in IBS patients be removed. This was discussed and agreed. It was agreed to add some extended notes about what antidepressant treatments were suitable for these patients. Action: revised notes to be agreed by email and added to the website CW</p>
<p>13. Gastrocote Gastrocote tablets have been discontinued. It was decided not to replace a tablet preparation but to refer patients to self-care information.</p>
<p>14. Recent drugs decisions: These were noted</p>
<p>15. MHRA Drug Safety Updates: December:</p> <ul style="list-style-type: none"> • To add the notes regarding ivabradine <p>January:</p> <ul style="list-style-type: none"> • To check and expand if necessary the notes on valproate and pregnancy • To add the notes regarding mycophenolate <p>February:</p> <ul style="list-style-type: none"> • To add the notes regarding tiotropium
<p>Any other business: Due to Hugh Savill's retirement at the end of March Tawfique Daneshmend thanked for his work with the formulary since its inception. His contribution to this work will be missed. Due to his ill health the meeting was informed of the retirement of Matt King, whose contribution to the formulary work will also be missed.</p>
<p>Next meeting: Thursday 9th April 2015</p>

Northern & Eastern Formulary – Action Log			
Date	Action	Responsible	Completed
Oct 14	Infant Formulas <ul style="list-style-type: none"> to obtain further information on the specialist infant formulas 	CW/JP	On the agenda
Nov 14	CKD and apixaban <ul style="list-style-type: none"> to update formulary with the revised Peninsula Heart and Stroke Guidance when available 	PT	Not available yet.
Feb 15	Antibacterial guidance <ul style="list-style-type: none"> To clarify outstanding points with the Microbiologists 	CW	On the agenda
Feb 15	Nalmefene <ul style="list-style-type: none"> to find out from Public Health who commission drugs and alcohol services what psychosocial support is or will be available 	CA/SS	
Feb 15	Nortriptyline <ul style="list-style-type: none"> Revised noted to be agreed by email and added to the formulary 	IC/CW	Completed