

Area Prescribing Group report

Date: Friday 05 April 2024 **Quorate:** Yes

The items in this report are supported by the area prescribing group and approval by NHS Cheshire and Merseyside Integrated Care Board (ICB) is detailed below.

Document links provided for any APG recommendations are temporarily hosted on the legacy Pan Mersey APC website as a pragmatic solution until such time as a Cheshire and Merseyside APG website is available. The [legacy Cheshire formulary](#) will also be updated to reflect these changes.

CMAPG governance documents are now hosted on the new [Prescribing](#) section of the NHS Cheshire and Merseyside website, which is currently being developed

New medicines NICE TAs

Proposal	Notes	Approval
<p>Etrasimod for ulcerative colitis plus High cost drug treatment pathway - inflammatory bowel disease in adults RAG designation: Red APG subgroup: 08 Mar 2024 APG: 05 Apr 2024</p>	<p>Date of NICE TA publication: 11 Mar 2024 Approval for implementation: 30 days Deadline for implementation: 10 Apr 2024</p> <p>Red RAG rating to be assigned in formulary, in line with NICE TA956. Etrasimod is another treatment option for ulcerative colitis in adults and is available at a similar cost to existing treatment options.</p> <p>The IBD pathway has been updated to include etrasimod.</p> <p>Based on the NICE Resource Impact Report, costs are expected to be less than £8,800 per 100,000</p>	<p>ICB Medicines Optimisation and Pharmacy (MOP) Group: 18 April 2024, clinically supported by ICB Medicines Optimisation and Pharmacy Group.</p> <p>ICS Chief Pharmacist: 19 April 2024, approved by ICS Chief Pharmacist following further analysis of estimated costs being undertaken.</p>

Proposal	Notes	Approval
	<p>population, which equates to £237,600 for the Cheshire and Merseyside population. However, taking the confidential PAS prices and dosage regimes for etrasimod and comparator drugs into consideration, use of etrasimod is expected to be cost neutral.</p>	
<p>Fluocinolone acetonide intravitreal implant for chronic diabetic macular oedema</p> <p>RAG designation: Red</p> <p>APG subgroup: 08 Mar 2024</p> <p>APG: 05 Apr 2024</p>	<p>Date of NICE TA publication: 13 Mar 2024</p> <p>Approval for implementation: 30 days</p> <p>Deadline for implementation: 12 Apr 2024</p> <p>Red RAG rating to be assigned in formulary, in line with NICE TA953, which updates and replaces TA301 and TA613. Fluocinolone acetonide will be an additional treatment option to dexamethasone intravitreal implant. It needs to be replaced less frequently than dexamethasone (36 months compared to 6 months), which may help to generate additional capacity within services.</p> <p>Based on the NICE Resource Impact Report, costs are expected to be less than £8,800 per 100,000 population, which equates to £237,600 for the Cheshire and Merseyside population. However, taking the confidential PAS price for fluocinolone and dosage regimes for both drugs into consideration, use of fluocinolone acetonide is likely to be associated with a cost saving compared to dexamethasone.</p>	<p>ICB Medicines Optimisation and Pharmacy (MOP) Group: 18 April 2024, clinically supported by ICB Medicines Optimisation and Pharmacy Group.</p> <p>ICS Chief Pharmacist: 19 April 2024, approved by ICS Chief Pharmacist following further analysis of estimated costs being undertaken.</p>

New medicines other

Proposal	Notes	Approval
Drospirenone tablets for contraception RAG designation: Grey APG subgroup: 08 Mar 2024 APG: 05 Apr 2024	<p>For noting.</p> <p>A grey RAG has been assigned in the formulary pending receipt of an application for use.</p>	<p>MOP: 18 April 2024, noted by ICB Medicines Optimisation and Pharmacy Group.</p>
L-tryptophan capsules for treatment-resistant depression RAG designation: Grey APG subgroup: 08 Mar 2024 APG: 05 Apr 2024	<p>For noting.</p> <p>A grey RAG has been assigned in the formulary pending receipt of an application for use.</p>	<p>MOP: 18 April 2024, noted by ICB Medicines Optimisation and Pharmacy Group.</p>

Formulary and guidelines

Proposal	Notes	Approval
Testosterone Gel for Hypoactive Sexual Desire Disorder (HSDD) in Menopausal Women. Guidance in Primary and Secondary Care. RAG designation: Amber Initiated (N.B. Primary Care Prescribers with expertise may initiate treatment) APG subgroup: 19 Mar 2024 APG: 05 Apr 2024	<p>Achieves harmonisation of RAG designation of testosterone gel across Cheshire and Merseyside for this indication. Consultation revealed a disparity in willingness/ ability/ training of primary care prescribers to initiate prescribing and a perceived lack of secondary care specialist services to refer to. Therefore, an amber initiated designation has been assigned but allows the term “specialist” to also refer to primary care prescribers with ability and training to initiate prescribing.</p> <p>The Formulary and Guidelines subgroup wishes to highlight the reported lack of commissioned specialist services in certain areas to refer patients for this</p>	<p>MOP: 18 April 2024, approved by ICB Medicines Optimisation and Pharmacy Group.</p>

Proposal	Notes	Approval
	<p>indication, and also to raise the possibility of increased training for more primary care prescriber initiation. It is also aware of a Menopause Special Interest Group linked with the Cheshire and Merseyside Gynaecology Network, that has proposed a Testosterone Prescribing Pilot.</p> <p>Previously in Merseyside this was amber recommended and in Cheshire use was not recommended. Current annual expenditure in Merseyside is £79,000 (£4,160 per 100,000 population) and in Cheshire £28,000 (£3,490 per 100,000). If expenditure increased in Cheshire to the level of Merseyside this would cost an additional £5,000 annually. However, by recommending primary care prescribers may initiate therapy, increased expenditure in both Cheshire and Merseyside may occur. An alternative approach could be to consider prevalence of HSDD characterised by distress, found to be 6.6%, but it is not possible to estimate what proportion would require testosterone therapy. The subgroup therefore could not estimate the cost of implementing the guideline but felt that the cost would be relatively modest based on current expenditure and noted that testosterone gel is inexpensive (Tostran® gel: £3.63 per month). There is however the potential that testosterone gel might be licensed in the UK in future which may increase costs, although this is not known currently. (Australian cost £13.50 per month).</p>	
Medicines Shortages Statement. Guidance During Periods of Sustained Medicines Shortages	<p>Formal advice regarding this would be helpful given the ongoing medicines shortages situation. The Formulary and Guidelines subgroup is aware of ongoing work at the Medicines and Optimisation and Pharmacy (MOP)</p>	<p>MOP: 18 April 2024, approved by ICB Medicines Optimisation and Pharmacy Group.</p>

Proposal	Notes	Approval
<p>RAG designation: n/a</p> <p>APG subgroup: 19 Mar 2024</p> <p>APG: 05 Apr 2024</p>	<p>group around the shared North West statement involving further local LMC and LPC input. It felt that this statement was helpful in the meantime but that changes considering the outcome of MOP group work may result in future.</p> <p>Medicines shortages have significant financial and resource impact when more expensive non-formulary preparations must be prescribed and from the increased workload implications of making changes to patients' medication. It is hoped following the advice in this document regarding co-operation, communication and considering cost-effectiveness will be helpful. The statement advises considering cost and reverting to formulary choices when supply shortages are over.</p>	
<p>Freesyle Libre 2 Plus glucose sensor – addition to formulary</p> <p>RAG designation: Amber recommended</p> <p>APG subgroup: 19 Mar 2024</p> <p>APG: 05 Apr 2024</p>	<p>Freesyle Libre 2 Plus will replace Freestyle Libre 2 during March – April 2024. Formulary updated to reflect this. For noting.</p>	<p>MOP: 18 April 2024, noted by ICB Medicines Optimisation and Pharmacy Group.</p>

APG reports

Proposal	Notes	Approval
<p>NICE TA adherence checklist</p> <p>February 2024</p>	<p>For noting.</p>	<p>MOP: 18 April 2024, noted by ICB Medicines Optimisation and Pharmacy Group.</p>

APG governance

Title	Notes	Approval
<p>New Medicine Assessment Summary</p> <p>RAG designation: RAG</p> <p>APG subgroup: 08 Mar 2024</p> <p>APG: 05 Apr 2024</p>	<p>Updated New Medicine Assessment Summary (NMAS) document to ensure consistency with new application form and decision support summary. For noting.</p> <p>The NMAS is a document completed by the subgroup after an application has been received and prioritised. It is envisaged that the NMAS will eventually be incorporated into the application form, but the existing form has been updated to provide a temporary solution.</p>	<p>MOP: 18 April 2024, approved by ICB Medicines Optimisation and Pharmacy Group.</p>