

**Minutes of the Lancashire Medicines Management Group Meeting
Held on Thursday 11th January 2018 at Preston Business Centre**

PRESENT:

Dr Tony Naughton (TN)	Chair of LMMG	Lancashire CCG Network
Alastair Gibson (AG)	Director of Pharmacy	Blackpool Teaching Hospitals NHS Foundation Trust
Christine Woffindin (CW)	Medicines Information Manager	East Lancashire Hospitals NHS Trust
Sonia Ramdour (SR)	Chief Pharmacist	Lancashire Care NHS Foundation Trust
David Jones (DJ)	Assistant Director of Pharmacy	Lancashire Teaching Hospitals NHS Foundation Trust
Julie Kenyon (JK)	Senior Operating Officer Primary Care, Community & Medicines	NHS Blackburn with Darwen CCG
Melanie Preston (MP)	Assistant Director - Medicines Optimisation	NHS Blackpool CCG
Dr Lisa Rogan (LR)	Head of Medicines Commissioning	NHS East Lancashire CCG
Clare Moss (CM)	Head of Medicines Optimisation	NHS Greater Preston CCG, NHS Chorley and South Ribble CCG
Graham Atkinson (GA)	Senior Manager – Medicines Optimisation	NHS Morecambe Bay CCG
Nicola Baxter (NB)	Head of Medicines Optimisation	NHS West Lancashire CCG
Andrea Scott (AS)	Medicines Management Pharmacist	University Hospitals of Morecambe Bay NHS Foundation Trust
Julie Lonsdale (JL)	Head of Medicines Optimisation	NHS Fylde and Wyre CCG

IN ATTENDANCE:

Brent Horrell (BH)	Head of Medicines Commissioning	NHS Midlands and Lancashire CSU
David Prayle (DP)	Senior Medicines Commissioning Pharmacist	NHS Midlands and Lancashire CSU
Paul Tyldesley (PT)	Medicines Commissioning Pharmacist	NHS Midlands and Lancashire CSU
Adam Grainger (AGR)	Senior Medicines Performance Pharmacist	NHS Midlands and Lancashire CSU
Jane Johnstone (Minutes)	Medicines Management Administrator	NHS Midlands and Lancashire CSU

ITEM	SUMMARY OF DISCUSSION	ACTION
2018/001	Welcome & apologies for absence The Chair welcomed everyone to the meeting. Apologies for absence were received on behalf of Joanne McEntee.	
2018/002	Declaration of any other urgent business None.	
2018/003	Declarations of interest pertinent to agenda None.	

ITEM	SUMMARY OF DISCUSSION	ACTION
2018/004	<p>Minutes of the last meeting (14th December 2017)</p> <p>The minutes of the meeting dated 14th December 2017 were agreed as a true and accurate record subject to the amendments below.</p> <p>Page 3 2017/198 Freestyle Libre The words '(over insulin pumps)' will be removed from the following sentence: The group considered the RMOC recommendation; concerns were raised regarding the lack of evidence that Freestyle Libre is beneficial to patients over insulin pumps, the level of patients monitoring required and the absence of an alarm to alert the user to potential hypoglycaemic episodes.</p> <p>The words 'but requires patient's activation and is not equipped with a hypoglycaemia alarm' and the word 'this' will be removed from the following sentence:</p> <p>It was highlighted that there have been discussions outside of LMMG at the Policy Group where the view is that Freestyle Libre is similar to other Continuous Glucose Monitoring (CGM) devices but requires patient activation and is not equipped with a hypoglycaemia alarm and this could be considered as part of the current policy development of Insulin Pumps and CGMS.</p> <p>Page 4 2017/199 Metformin wording for website All reference to the word (Glucophage®) will be removed from the agenda item.</p>	
2018/005	<p>Matters arising (not on the agenda)</p> <p>GA gave an update of the proposal which was considered at the Collaborative Commissioning Board (CCB) on the 9th of January. The proposal is for LMMG to become a single decision-making group on behalf of the 8 Lancashire CCGs. It is proposed that part 1 will include provider/clinical/technical representation and part 2 will include commissioner representation; this will be a formal joint committee of CCGs with delegated decision-making responsibility on behalf of all CCGs.</p> <p>GA informed the group that the CCB supported the part 1 proposal and they suggested that the part 2 meeting would not become a Joint Committee but a Commissioning Recommendation meeting; the recommendations would then go to the Joint Committee for ratification.</p> <p>The next step is for a workshop to be arranged for representation</p>	

ITEM	SUMMARY OF DISCUSSION	ACTION
	from Service Commissioners, Finance and Providers.	
NEW MEDICINES REVIEWS		
2018/006	<p>Expressions of interest – new medicines 2018</p> <p>DP presented the paper which included the drugs that are in development and expected to be marketed in the financial year 2018-19.</p> <p>DP asked the group to take the paper for discussion in their local medicines committees CCGs, in particular, to identify medicines where there may be some interest in prescribing in the next financial year, even when the cost pressures are unknown.</p> <p>Action LMMG representatives will take the expressions of interest paper to their local medicines committees and feedback to DP by the 1st March 2018. In particular to identify medicines where there may be some interest in prescribing in the next financial year.</p>	LMMG representatives
2018/007	<p>Low Value Medicines update</p> <p>BH presented the NHSE Guidance to CCGs paper for further consideration of the following medicines which had been considered at the December 17 LMMG meeting and required further discussion:</p> <p><u><i>Once Daily Tadalafil - Erectile Dysfunction - when supplied through Specialist Sexual Health Services</i></u> MLCSU recommendation following New Medicine Assessment Review – Red Current LMMG RAG rating – Red</p> <p>Decision The group discussed the NHSE guidance document which had looked at evidence from NICE and PrescQIPP. The group felt that there was no new clinical evidence in the documents to reconsider; therefore, the LMMG decision of a Red RAG rating will remain.</p> <p><u><i>Lidocaine Plasters - for use outside of the license of post-herpetic neuralgia for the treatment of localised neuropathic pain with predominance of allodynia and/or hyperalgesia and dysesthesias unresponsive to other neuropathic agents</i></u> MLCSU recommendation following New Medicine Assessment Review – Black Current LMMG RAG rating – Red</p>	

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	<p>Decision The group considered the SPS evidence review; the evidence review looked at the licensed indication for Post-Herpetic Neuralgia and did not look at off label use of Lidocaine Plasters. Since there was no new evidence for the cohort of patients included in the LMMG recommendation it was agreed that the LMMG RAG rating of Red would remain.</p> <p><u><i>Liothyronine (including Armour Thyroid and liothyronine combination products) – as an add on treatment for refractory hypothyroidism despite adequate monotherapy with levothyroxine</i></u> MLCSU recommendation following New Medicine Assessment Review – Black Current LMMG RAG rating – Black with the additional wording below which was agreed at the December 17 LMMG.</p> <p>Decision The group discussed the wording below, which was drafted following the December 2017 LMMG; ‘However, for individuals who, in exceptional circumstances, have an on-going need for liothyronine as confirmed by a consultant NHS endocrinologist, refer to your local CCG for local commissioning arrangements’.</p> <p>The group decided that this wording will be removed in line with the NHSE guidance and a Black RAG rating will remain.</p> <p>Actions Liothyronine (including Armour Thyroid and liothyronine combination products) – as an add on treatment for refractory hypothyroidism despite adequate monotherapy with levothyroxine – the additional wording (as above) will be removed from the LMMG recommendation and the LMMG website updated.</p>	<p>BH</p>
<p>2018/008</p>	<p>LMMG – New Medicines Reviews Work Plan update</p> <p>DP discussed the paper; updating the group on the status of the work plan as follows:</p> <p><u><i>Medicines for discussion at the February meeting</i></u> Lidocaine plasters – this will be removed from the work plan in view of discussions under the Low Value Medicines update item.</p> <p>Tadalafil once daily – Erectile Dysfunction when supplied through Specialist Sexual Health Services – this will be removed from the work plan in view of discussions under the Low Value Medicines update item.</p>	

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	<p><u>Medicines for discussion at the March meeting</u> Fluticasone furoate + umeclidinium + vilanterol (Trelegy) inhaler – COPD – this is currently being reviewed.</p> <p><u>New medicines reviews – on hold, awaiting licensing or launch details</u> Immediate release fentanyl preparations – treatment of pain in palliative care patients – awaiting confirmation from Palliative Care as to whether a review should be prioritised and conducted.</p> <p>DP informed the group that a request for Guanfacine for adults with ADHD has been received. SR confirmed that this will be discussed at the LCFT D&T meeting next week and SR will feedback following the meeting. In the meantime, Guanfacine will be added to the LMMG work plan as Grey colour classification.</p> <p>SR confirmed that once Cariprazine has been launched an application will be submitted to MLCSU. This will be added to the LMMG work plan as Grey colour classification.</p>	<p style="text-align: center;">SR/DP</p> <p style="text-align: center;">DP</p>
GUIDELINES and INFORMATION LEAFLETS		
2018/009	<p>Dementia guideline</p> <p>AGR presented the Dementia guideline.</p> <p>4 of 8 CCGs and 3 of 5 provider trusts responded by the closing date. All 4 of the responding CCGs and 2 of the responding provider trusts agreed and 1 neither agreed nor disagreed with the document.</p> <p>Decision Amendments made following consultation responses were discussed and approved by the group.</p> <p>Action The Dementia guideline will be uploaded to the LMMG website.</p>	<p style="text-align: center;">AGR</p>
2018/010	<p>NRT position statement</p> <p>AGR gave a update of the feedback received from Public Health regarding he NRT position statement.</p> <p>Public Health raised a comment requesting a word change from patients ‘ineligible’ for NRT to be changed to ‘contraindicated’</p> <p>It was decided that the existing wording was adequate and no further changes are required.</p>	

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	<p>Action The NRT position statement will be added the LMMG website.</p>	<p>AGR</p>
<p>2018/011</p>	<p>Oral Combination Products Position Statement</p> <p>AGR presented the Oral combination products position statement.</p> <p>Five of eight CCGs, two of 5 provider trusts responded by the closing date. All respondents supported the position statement except Fylde and Wyre CCG.</p> <p>Decision The group discussed and decided that the Oral Combination Products position statement will be removed from the LMMG website. The group felt that the decision was prudent due to the increasing number of exceptions in the position statement.</p> <p>Action The Oral combination products position statement will be removed from the LMMG website.</p> <p>The products on the LMMG website that are linked to the Oral Combination Products position statement will be looked at and brought back to LMMG should a formal position be needed.</p>	<p>AGR</p> <p>AGR</p>
<p>2018/012</p>	<p>Radiographic (Ankylosing Spondylitis) and Non-radiographic Axial Spondyloarthritis Biologic pathway</p> <p>DP presented the Ankylosing spondylitis guideline which had been updated in light of the NICE TAs supporting the use of biologic agents licensed for the treatment of the condition. The name of the guideline has been updated to reflect the recommendations, as follows: Radiographic (Ankylosing Spondylitis) and Non-Radiographic Axial Spondyloarthritis Biologic pathway. The new name reflects the identification of agents that can be used for each condition; treatments for Non-Radiographic Axial Spondyloarthritis are a subset of those used for Radiographic (Ankylosing Spondylitis) Axial Spondyloarthritis.</p> <p>3 of 8 CCGs and 1 of 5 provider trusts responded by the closing date. All 3 of the responding CCGs agreed with the document, the responding provider trust neither agreed nor disagreed.</p> <p>Decision The group approved the Radiographic (Ankylosing Spondylitis) and Non-Radiographic Axial Spondyloarthritis Biologic pathway in its current form. The group supported further development of the guideline with the Rheumatology Alliance.</p> <p>Action</p>	<p>DP</p>

ITEM	SUMMARY OF DISCUSSION	ACTION
	<p>The Radiographic (Ankylosing Spondylitis) and Non-Radiographic Axial Spondyloarthritis Biologic pathway will be uploaded to the LMMG website.</p>	
<p>2018/013</p>	<p>The Rheumatoid Arthritis Biologics (High Cost Drugs) pathway</p> <p>DP presented the Rheumatoid Arthritis Biologics (High Cost Drugs) pathway.</p> <p>3 of 8 CCGs and 1 of 5 provider trusts responded by the closing date. All 3 of the responding CCGs agreed with the document, the responding provider trust neither agreed nor disagreed.</p> <p>Decision The group approved the Rheumatoid Arthritis Biologics (High Cost Drugs) pathway in its current form. The group supported further development of the pathway with the Rheumatology Alliance.</p> <p>Action The Rheumatoid Arthritis Biologics (High Cost Drugs) pathway will be uploaded to the LMMG website.</p>	<p>DP</p>
<p>2018/014</p>	<p>Type II Diabetes guideline - insulin degludec</p> <p>DP presented the Type II Diabetes guideline paper</p> <p>Decision The group approved the addition of the word 'exceptionally' in the box headed 'Specialists may exceptionally consider initiating insulin degludec if:'</p> <p>Action The Type II Diabetes guideline - insulin degludec will be uploaded to the LMMG website.</p>	<p>DP</p>
<p>2018/015</p>	<p>Continuous and Flash Glucose Monitoring policy</p> <p>BH updated the group with the progress of the Continuous and Glucose Monitoring policy which is currently being developed.</p> <p>BH gave an overview of the consideration given to each patient group and whether they meet the criteria of the NICE TA, for Insulin Pumps, NICE guidance for Continuous Glucose Monitoring or the RMOG recommendation of Flash Glucose Monitoring. It was acknowledged that there is a lack of robust evidence for Continuous Glucose Monitoring and Flash Glucose Monitoring.</p> <p>The group discussed the arguments for and against third party monitoring for Flash Glucose Monitoring and supported the wording within the Draft Continuous and Flash Glucose</p>	

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	<p>Monitoring policy regarding third party criteria.</p> <p>The Continuous and Glucose Monitoring policy is being sent out to clinical consultation this week. LMMG members will be notified by MLCSU when the consultation has been circulated.</p>	
2018/016	<p>LMMG – Guidelines Work Plan update</p> <p>AGR discussed the paper; updating LMMG on the status of the work plan as follows:</p> <p><i><u>For discussion at the February meeting</u></i> Melatonin audit – further audit results and discussion paper to be presented.</p> <p>Denosumab SCG update – this will now be discussed at March LMMG.</p> <p>Allergic rhinitis guideline – this will now be discussed at March LMMG.</p> <p><i><u>For discussion at the March meeting</u></i> Asthma guidance update – new NICE guidance was due in October 2017.</p> <p>Treatment of glaucoma guideline (scope) – NICE update was due August 2017.</p> <p><i><u>For discussion at the April meeting</u></i> Eluxadolone (NICE TA 471) guideline (scope) – a guideline was requested at the September meeting of the group by LTH.</p> <p>Type I and I DM leaflets – work is on-going on the full diabetes guidance. The content of the leaflets will be reconsidered once the guideline is approved at LMMG.</p> <p>Familial hypercholesterolaemia guideline (scope) – new NICE guidance was due October 2017.</p> <p><i><u>For discussion at the December and future meetings of the Clinical Policy Development Group</u></i> Insulin pump policy CGM Policy (including Freestyle Libre)</p> <p>Infant formula feeds – AGR highlighted that one of the formulas in the Infant Formula Feeds guideline, contained pro-biotics and did not comply with the World Health Organisation guidance regarding the water temperature when making up the feed. Other options are available within the guideline, therefore all reference to this feed will be removed from the Infant Formula</p>	<p style="text-align: right;">AGR</p>

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	feeds guideline, then uploaded to the LMMG website.	
NATIONAL DECISIONS FOR IMPLEMENTATION		
2018/017	<p>New NICE Technology Appraisal Guidance for Medicines (December 2017)</p> <p>AGR presented the NICE TA guidance paper.</p> <p>TA494 Naltrexone – bupropion for managing overweight and obesity - this is a CCG commissioning responsibility and will be put on to the LMMG website as Black colour classification.</p> <p><i>The following NICE technology appraisals are an NHSE commissioning responsibility and will be added to the LMMG website as Red colour classification.</i></p> <p>TA492 Atezolizumab for untreated locally advanced or metastatic urothelial cancer when cisplatin is unsuitable.</p> <p>TA493 Cladribine tablets for treating relapsing-remitting multiple sclerosis.</p> <p>TA495 Palbociclib with an aromatase inhibitor for previously untreated, hormone receptor-positive HER2-negative, locally advanced or metastatic breast cancer.</p> <p>TA496 Ribociclib with an aromatase inhibitor for previously untreated hormone receptor-positive, HER2-negative, locally advanced or metastatic breast cancer.</p>	All actions AGR
2018/018	<p>New NHS England medicines commissioning policies (December 2017)</p> <p>None published.</p>	
2018/019	<p>Evidence reviews published by SMC or AWMSG (December 2017)</p> <p>DP discussed the SMC and AWMSG recommendations published during December 2017 and meeting LMMG criteria as follows:</p> <p>SMC 1284/17 aviptadil/phentol amine mesilate (Invicorp®) SMC accepted 1284/17 aviptadil/phentol amine mesilate (Invicorp®) for the symptomatic treatment of erectile dysfunction in adult males due to neurogenic, vasculogenic, psychogenic, or mixed aetiology – no further action is required, LMMG has a current position of Amber 0 RAG rating.</p>	

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	<p>1293/17 bezlotoxumab (Zinplava®) SMC accepted 1293/17 bezlotoxumab (Zinplava®) for the prevention of recurrence of Clostridium difficile infection (CDI) in adults at high risk for recurrence of CDI – no further action is required.</p> <p>1283/17 brodalumab (Kyntheum®) SMC accepted 1283/17 brodalumab (Kyntheum®) for the treatment of moderate to severe plaque psoriasis in adult patients who are candidates for systemic therapy – no further action is required, await the receipt of a new medicines application or NICE guidance.</p> <p>411/07 tiotropium (Spiriva Respimat®) SMC accepted 411/07 tiotropium (Spiriva Respimat®) as a maintenance bronchodilator treatment to relieve symptoms of patients with chronic obstructive pulmonary disease - no further action is required, LMMG has a current position of Amber 0 RAG rating.</p> <p>The remaining SMC and AWMSG recommendations for December 2017 did not meet LMMG criteria, therefore, the group agreed that no further action was necessary.</p>	
ITEMS FOR INFORMATION		
2018/020	<p>Minutes of the Lancashire Care FT Drug and Therapeutic Committee Tuesday 12th December 2017</p> <p>The group noted the minutes.</p> <p>Guidelines for BPSD – LCFT has approved the BPSD guidelines, this will be brought to the February LMMG meeting for discussion.</p>	

Date and time of the next meeting

8th February 2018, 9.30 am to 11.30 am, Meeting Room 253, Preston Business Centre

**ACTION SHEET FROM THE
LANCASHIRE MEDICINES MANAGEMENT GROUP
11th January 2018**

MINUTE NUMBER	DESCRIPTION	ACTION	DATE	STATUS AT 11 th January 2018
ACTION SHEET FROM THE 13th SEPTEMBER 2017 MEETING				
2017/143	<p>Melatonin update and draft recommendation</p> <p>Update: SR confirmed that Melatonin will be discussed in LCFT at the January D&T meeting. Melatonin will be discussed at the February LMMG meeting.</p> <p>Update: Melatonin guidelines is scheduled to go to D&T in January, this will be discussed at the February LMMG.</p>	SR/BH	01.02.2018	Open
2017/145	<p>Prevention of stroke and systemic embolism in non-valvular atrial fibrillation guideline</p> <p>Update: MLCSU has liaised with the Stroke Prevention Group; a paper has been drafted highlighting the financial risks involved. This paper will be presented at the CCB next week. BH will circulate the paper to the CCG MM Commissioning Leads.</p> <p>Update: a paper went to CCB highlighting the cost pressures. The CCB agreed to a working group with a project plan. CCB are now looking at delegated budgets for stroke and stroke prevention for service areas therefore the working group is currently on hold until the CCB has confirmed the way forward.</p> <p>Update: BH has not had feedback yet and will follow this up with Amanda Doyle.</p>	BH	01.02.2018	Open
ACTION SHEET FROM THE 9th NOVEMBER 2017 MEETING				
2017/181	<p>DMARD shared care guideline appendix</p> <p>Update: It was recognised that there is</p>			

	variation across local areas with the implementation of the DMARD shared care guidelines. JL will forward a link to the Fylde & Wyre CCG guideline for MLCSU to update the LMMG website with local positions. Update: a link to Fylde & Wyre and Blackpool CCG websites has been inserted on the LMMG website.	JL	04.01.2018	Closed
2017/183	NRT position statement – update Action: AGR will make amendments to the NRT position statement and engage with Public Health prior to the positions statement being put on to the LMMG website. Update: a response is awaited from PH. Discussed further under an agenda item.	AGR	04.01.2018	Closed
ACTION SHEET FROM THE 14th DECEMBER 2017 MEETING				
2017/200	Medicines of Low Clinical Value <u>Immediate release Fentanyl for Palliative Care treatment</u> MLCSU will engage with Palliative Care Consultants to determine when immediate release Fentanyl is used for Palliative Care patients. Update: MLCSU are in the process of engaging with Susan Salt. <u>Lidocaine plasters</u> MLCSU will review the evidence for use of Lidocaine Plasters outside of the license in line with the NHSE national consultation and send out to consultation with a recommendation of a Black RAG rating. Update: discussed under an agenda item. <u>Liothyronine</u> A statement will be added to state that LMMG are in support of the NHSE national guidance. It was recognised that there may be a small cohort of patients; the LMMG website will be updated to state 'refer to local commissioning arrangements for exceptional patients.' Update: discussed under an agenda item.	AGR	01.02.2018	Open
		DP	04.01.2018	Closed
		DP	04.01.2018	Closed

	<p><u>Once Daily Tadalafil</u> MLCSU will look at the evidence in the consultation and based on the findings will decide whether a paper should come to LMMG or a position statement should be developed. Update: discussed under an agenda item.</p>	DP	04.01.2018	Closed
2017/202	<p>Psoriatic Arthritis Pathway DP will take the amended pathway to the RA consultants for approval of the amendment and upload to the LMMG website. Update: discussed under an agenda item.</p>	DP	04.01.2018	Closed
2017/204	<p>Erectile Dysfunction guidance (update) This will be brought back to LMMG for approval if amendments are required or put on to the LMMG website if there are no changes. Update: discussed under an agenda item.</p>	AGR	04.01.2018	Closed
2017/207	<p>Type II Diabetes guideline MLCSU will draft wording around the prescribing of insulin degludec and bring to January LMMG. Update: discussed under an agenda item.</p>	PT	04.01.2018	Closed
2017/211	<p>Evidence reviews published by SMC or AWMSG (November 2017) 1279/17 midazolam (Epistatus®) Action: MLCSU will look at the costs and compare with what is currently being used; if there is a significant cost saving midazolam (Epistatus®) will be prioritised for a review Update: DP has looked at costs of buccolam (10mg in 2mg dosage). which is being used; midazolam (Epistatus®) is double the price of buccolam. A paper will be put together showing the costs of midazolam (Epistatus®) and brought to LMMG. This will be added to</p>	DP	01.02.2018	Open

	the work plan.			
ACTION SHEET FROM THE 11th JANUARY 2018 MEETING				
2018/006a/006b	Expressions of interest – new medicines 2018 Action LMMG representatives will take the expressions of interest paper to their local medicines committees and feedback to DP by the 1 st March 2018; in particular to discuss the medicines where the cost pressures are unknown.	All LMMG representatives	01.03.2018	Open
2018/008	LMMG – New Medicines Reviews Work Plan update Request for Guanfacine for adults with ADHD Action: SR will feedback following the LCFT D&T meeting.	SR	01.02.2018	Open
2018/011	Oral Combination Products Position Statement Action: the products on the LMMG website that are linked to the Oral Combination Products position statement will be looked at and brought back to LMMG should a formal position be needed.	AGR	01.02.2018	Open
2018/015	Continuous and Flash Glucose Monitoring policy Action: MLCSU will notify LMMG members when the policy has been circulated.	BH	01.02.2018	Open