



MILTON KEYNES NHS TRUSTS MEDICINES AND THERAPEUTICS COMMITTEE

Minutes of the meeting held on Tuesday 17th April 2012 At 1pm. in the Eaglestone Restaurant Function Room

PRESENT:

(Chair)

Dr V Jeevanathan (VJ)

MKH NHS Fd ^{n.} Trust	NHS MK	MK CHS
Busola Ade-Ojo (BAO)		Helen Chadwick (HC)
Folake Kufeji (FK)		Dr Essam Hassan (EH)
Prem Roy (PR)		
Debbie Phillips (DP)		

Other attendance: Asmita Modha (AM), Modupe Odeniran (MO), Victoria Stoll (VS) for Shanthi Chandran (SC), Yaw Duodu (YD), Atila Kardos (AK)

1. Welcome, apologies for absence and introductions

Apologies were received from Sheila Begley (SB), Janet Corbett (JC), Nigel Fagan (NF), Niall Ferguson (NFer), Lakshmi Ragunathan (LR), Sarah Whiteman (SW), Shanthi Chandran (SC) ۷J

2. Declaration of conflicts of interest

None to report.

ΑII

3. Minutes of last meeting

The minutes were agreed as an accurate reflection of the meeting.

٧J

FK

4. Matters arising from previous minutes

a) **TA245** – Apixaban for the prevention of venous thromboembolism after total hip or knee replacement in adults.

Response received from Oliver Pearce on behalf of Trauma & Orthopaedics: Apixaban discussed at T&O department meeting in March. The consensus of the department was that we are happy with our VTE rate (1.43%) for 2010-2011 in hip and knee arthroplasty with our current thomboprophylactic regime. T&O are however aware of Apixaban and the fact that it is NICE recommended for use in hip and knee arthroplasty.

Decision: Apixaban noted for formulary inclusion as alternative treatment for prevention of venous thromboembolism after total hip or knee replacement in adults. However, trust preferred treatment remains Dabigatran.

5. South Central Priorities Committee Decisions

None to report





6. Drug Formulary

New medicine applications

a) Dabigatran (Application, Evaluation & NICE TA 249)

YD/AK

Joint presentation by YD and DK. They highlighted that currently uptake of warfarin is low in eligible patients (around 25%) and this percentage is even lower for those within the therapeutic range who take warfarin. The problems around its monitoring will be overcome with use of Dabigatran which does not require monitoring. The RE-LY study showed that 110mg dose is as effective as warfarin and the 150mg dose more effective than warfarin. Expectation is that mortality and morbidity will be decreased. Committee noted that there was a NICE TA 249 in place for this drug. However would like further information to guide use in practice. This would specifically address the issues around renal dosing and place in therapy.

Decision: APPROVED in line with NICE guidance TA249 strictly for use for the prevention of stroke and systemic embolism in patients with non-valvular AF who have one or more risk factors. Shared care guideline also required to be produced to guide use in

practice.

YD/AK

b) Bydureon (Exenatide MR) (Application, Evaluation & NICE TA248)

VS presented on behalf of SC. This was mainly proposed for use second line to immediate release exenatide. This would be targeted at those who have had gastrointestinal side-effects, difficulty with compliance, or reluctant to inject themselves regulary.

Committee noted that there was a NICE TA 248 in place for this drug. FK pointed out that Bydureons price is the same/cost neutral to Byetta. DP also asked for clarification on its use around surgery. BAO suggested that the medicines information service or the on-call pharmacist may be able to provide information to guide this.

FK

Decision: APPROVED in line with NICE guidance TA248

c) Rilpivirine/Eviplera (Application, Evaluation & BHIVA guideline) This application has been postponed to the next meeting as the BHIVA guidelines have not yet been finalized.

d) Ferinject (Application, Evaluation)

This application was for use of in the treatment of anemia as an alternative to cosmofer. Benefits in reduction time. Instead of 6 hours plus 1 hour observation, 15 minutes administration and no test dose. However the implications were huge to the drugs budget as it would double the cost of cosmofer. More information required to allow committee to make a decision as to whether this would be a cost-effective addition to the formulary in place of cosmofer.

Decision: Review the amount in savings to nursing time against the increased drug cost.

FK

Decision:





e) Zoledronic acid (Application)

Dungarwalla not attending. Defer to future meeting when available to attend.

7. PBR excluded medicines applications

None

8. NICE guidance

a) TA 246 – Pharmalgen for the treatment of bee and wasp allergy

- 1.1 Pharmalgen is recommended as an option for the treatment of IgE-mediated bee and wasp venom allergy in people who have had:
 - o a severe systemic reaction to bee or wasp venom, or
 - a moderate systemic reaction to bee or wasp venom and who have one or more of the following: a raised baseline serum tryptase, a high risk of future stings or anxiety about future stings.
- 1.2 Treatment with Pharmalgen should be initiated and monitored in a specialist centre experienced in venom immunotherapy.

b) TA 247 – Tocilizumab for the treatment of rheumatoid arthritis (rapid review of technology appraisal guidance 198)

Committee noted that this drug is currently on formulary. TA247 replaces TA 198 which was issued in August 2010.

9. Hospital ePACT data

No need to monitor anymore as is under control.

10. Guidelines in Development

a) Neonatal Unit Antibiotic Policy.

PR – Need NNU policy. Based on NNU policy & BNF for children. No new drugs in the policy – only standard drugs. Main points are it has been divided into early/late onset of sepsis, antibiotics are clarified, separate gentamicin guideline which is dependent on gestational age and weight. Committee noted error in amoxicillin dose which needs to be changed. BAO also commented that she had made significant input into the document and not only changed the history.

Decision: Committee approve guideline with changes to amoxicillin dose. BAO to e-mail earlier comments to PR.

11. Terms of Reference

NFer

Postponed

12. Any other business

ΑII

HC – Up to date list of members

VJ – M&TC would like to thank NFer and wish him all the best for the future.

13. Confirmation of Date of next meeting

The date of the next meeting was confirmed as **Tuesday**, 19th June 2012, Eaglestone Restaurant Function Room, Time 1.00pm.



