

Chelsea and Westminster Hospital NHS Foundation Trust
Trust Medicines Committee
Summary of Main Points from the Meeting held on the 9th of December 2013

2. Minutes and Summary Notes from last meeting

The Minutes and Summary notes from the October 2013 meeting were approved and will be circulated.

3. Matters Arising

The Committee noted the matters arising from the previous meeting.

4. New Medicines Applications

Formulary applications

- **Flutiform[®] - Fluticasone & Formoterol Inhaler**

Decision: Approved

For regular treatment of asthma where the use of a combination product (an inhaled corticosteroid and a long-acting β_2 agonist) is appropriate.

- **Tapentadol SR and non-SR Tablets**

Decision on reapplication: Approved

As a 3rd line agent for acute pain management for in-patients requiring strong opioids that are intolerant, allergic or experiencing sub-optimal pain relief with morphine and/or oxycodone. It was also approved as a 3rd line agent for management of chronic pain, in patients who have not been adequately managed with previous opioid use, for initiation by, or on the advice of, the Pain Team.

Individual funding requests

- **Rituximab for Autoimmune Haemolytic Anaemia**

Decision: Noted

Approved by the Pharmacoeconomic Board

Ex-panel

- **Ferinject[®] Iron IV preparation in place of Monoject[®]**

A request to change to using Ferinject[®] as the first line IV iron preparation of choice in adult medical patients in place of Monoject[®], due to its better safety profile and ease of administration (1g of Ferinject[®] can be administered over 15 minutes compared to 1 hour with Monoject[®]) was approved. Costs are equivalent. Pharmacy is working with Obstetrics and the Renal Team at the Hammersmith, with the aim of rationalising the 2 other intravenous iron preparations used in the Trust (Cosmofer[®] and Venofer[®]) to Ferinject[®].

- **Adcal D3[®] caplets**

Each caplet is equivalent to half an Adcal D3 chewable tablet. It is preferred by patients due to ease of swallowing. The caplets cost slightly more than chewable tablets but are less expensive than the soluble tablets.

- **Viridal Duo[®] (alprostadil) 10 micrograms/ml, 20 micrograms/ml and 40 micrograms/ml Powder and Solvent for Solution for Injection**

Request to move to the UCB Pharma Brand as the Caverject[®] (Pfizer) brand is unavailable from the manufacturer.

5. Double Checking of IV Administration

Three documents were reviewed in relation to IV double checking

- Trust Medicines Policy: Section 8 - Administration
- Trust Injectable Policy
- Risk assessment re. inappropriate IV administration

Trust Medicines Policy: Section 8 - Administration – Approval for amendment as below:

8.2.2 Administration of Intravenous route

The preparation of all intravenous medications must be double checked.

The following types of intravenous administration must be double-checked by an authorised Trust witness (see 8.3)

- *All intravenous administration to paediatrics*
- *All intravenous administration where a rate control delivery device is required*
- *All controlled drug administration – (see 6.7.3)*

Note: The administration of anaesthesia by anaesthetists of all grades is exempted from the need to have a double check. The anaesthetist must take responsibility for performing their own self double check

With the exception of Intensive Care Areas (Adult ICU/HDU, Labour Ward; NICU and Paediatric HDU) an administration double check must occur when the rate of an infusion is altered, or a syringe change is performed during a continuous infusion. Documentation of this check by both the administrator and the witness is required on the administration record (electronic or paper).

This change in practice has reflected in the update to the **Trust Injectable Policy** and has been subject to a risk assessment to identify and mitigate any resultant risks. The **Trust Injectable Policy** and the **Risk Assessment re. Inappropriate IV administration** were approved.

**Chelsea and Westminster Hospital NHS Foundation Trust
Trust Medicines Committee**

6. Medicines Management/Trust Medicines Policy

• **Trust Medicines Policy: Section 1 - Introduction**

Decision: Approved

Updated to include a section relating to the frequency of updating and auditing of the Trust Medicines Policy.

• **Trust Medicines Policy: Section 24 - Concentrated potassium solution**

Decision: Approved

Updated to include new departments that stock conc. potassium chloride IV.

• **IV monographs (Zoledronic acid; Ondansetron)**

Decision: Approved

Updated monographs for:

- Zoledronic acid: Due to introduction of generic preparation
- Ondansetron: Updated to include the requirement to administer **by infusion only** for patients over 65 year for chemotherapy induced nausea and vomiting (CINV) due to the risk of dose dependent QT interval prolongation.

• **EPR Request for Change (RfC) form regarding removal of the re-order button from the inactive medication profile**

Decision: Approved

The RfC was approved to remove the re-order button from the inactive medication profile to reduce the risk of inappropriate selection of discontinued medicines (e.g. discontinued in error) for re-prescribing. Repeat prescribing will still be available via the active medication profile.

• **C&W Innovation Scorecard Oct 13**

Decision: Noted

Scorecard detailing Trust usage of NICE approved drugs

7. NICE TA Guidance

NICE Guidance October 2013 - Medicines Committee Actions

• **TA297 – Ocriplasmin for treating vitreo macular traction (Enclosure 16)**

Ocriplasmin is recommended as an option for treating vitreomacular traction in adults, only if:

- an epiretinal membrane is not present
- and**
- they have a stage II full-thickness macular hole with a diameter of 400 micrometres or less **and/or**
- they have severe symptoms.

Action: Add to the Formulary in line with NICE Guidance

NICE Guidance November 2013 - Medicines Committee Actions

• **TA298 – Choroidal neovascularisation (pathological myopia) – ranibizumab.**

Action: Update Formulary approval status in line with NICE Approval.

• **TA299 - Leukaemia (chronic myeloid) - bosutinib.**

Not recommended. **No action required.**

• **TA300 - Hepatitis C (children and young people) - peginterferon alfa and ribavirin.**

Not applicable to C&W. **No action required.**

• **TA 301 – Diabetic macular oedema - Fluocinolone acetonide intravitreal implant.**

Action: Add to the Formulary in line with NICE Guidance.

• **TA302- Juvenile idiopathic arthritis (systemic) - canakinumab (terminated appraisal).** The manufacturer did not make the required submission to NICE, therefore NICE is unable to make a recommendation. **No action required.**

8. IVIG Update

The panel noted the IVIG report.

There were 12 IVIG issues in October 2013, with 4 new requests:

- One for Kawasaki's Disease (Red indication)
- One for Necrotising staphylococcus sepsis (Blue indication)
- One for Secondary Antibody Deficiency (Blue indication)
- Autoimmune haemolytic anaemia (Blue indication)

There were 8 IVIG issues in November 2013, with 3 new requests:

- One for immune thrombocytopaenic purpura (Red indication)
- One for paraprotein associated demyelinating neuropathy (Blue indication)

One for multifocal motor neuropathy (Blue indication)

9. Items for Noting

• **Quarterly CD Summary Report Q2 2013/14**

Noted

• **Controlled Drug Occurrence report Q2 2013/14**

Noted.

• **Safe storage of medicines Audit Report Aug 2013**

Noted.

• **Midazolam Audit report Aug 2013**

**Chelsea and Westminster Hospital NHS Foundation Trust
Trust Medicines Committee**

Noted.

- **NWL Red List Oct 2013**

Noted.

- **Dates for Medicines Committee Meetings 2014**

Noted

- **MHRA Drug Safety Update - September 2013**

Noted.

- **MHRA Drug Safety Update - November 2013**

Noted.

10. Papers to go to the Trust Quality Committee

The following papers should be sent to the Trust Quality Committee:

- Medicines Committee Summary Notes - September 2013
- Controlled Drug Summary Quarterly Report Q2 2013/14
- Controlled Drug Occurrence report Q2 2013/14

12. Date of the next meeting

(Note: Monday 13th January 8.00 – 9.00 – Training on Critical Appraisal and Ethics, Boardroom, Lower Ground Floor

Monday 10th February 2014, 8.00 - 9.00 Boardroom, Lower Ground Floor

Closing date for papers: Friday 17th January 2013