



**MEETING OF THE BORDERS FORMULARY COMMITTEE HELD
ON WEDNESDAY 16th DECEMBER 2020 @ 12:30pm via MICROSOFT TEAMS**

MINUTE

Present: Alison Wilson (Director of Pharmacy - Chair); Liz Leitch (Formulary Pharmacist); Dr Paul Neary (Cardiology Consultant); Dr Nicola Henderson (GP); Cathryn Park (Lead Clinical Pharmacist); Keith Maclure, Lead Pharmacist; Dr Michael McDermott (ST3 - Junior Doctors Changeover); Dr Charlotte Squires (Registrar; Junior Doctor Rep); Kate Warner (Minute Secretary)

New Member: Fiona Grant (Consultant Physiotherapist)

Guests: Joining us to consider becoming members of BFC - Cheryl Macneil (Advanced Nurse Prescriber, Braeside Medical Practice); Nicola Robertson (Neonatal Nurse Practitioner); Deborah Watson (Advanced Nurse Practitioner, Eildon Practice Melrose);

1. **Apologies:** Gillian Donaldson (Lead Cardiac Specialist Nurse) was to be guest will join February meeting

Item No.	Situation ; Background ; Assessment	Recommendation	Lead	Timescale
2	Welcome and any declarations of interest: - None			
3	Minute from BFC meeting 21 st October 2020 was approved with no changes as an accurate record of the meeting.	Upload to internet	KW	22/12/20
4	Matters Arising From Previous Minute:			
4.1	BFC Terms of Reference back for approval at 9.1	BFC Approved; upload	KW	22/12/20
5	New Medicine Applications & Non Formulary Requests:			
a)	NMA Canagliflozin Applicant: Dr Rachel Williamson (by email; signed copy to come) Clinical Director: ; Indication: 1st line Sodium-glucose co-transporter 2 (SGLT2) inhibitor for diabetic nephropathy in Type 2 diabetes; Generic Name: Canagliflozin; Brand Name: Invokana Dosage: 100mg once daily (at any level of renal function above an eGFR 30) – other levels in application; Cost: included in application; Number of patients in first year: 20; Projected increase in patients: yes. Application from Diabetic team; application was outlined and likely benefits and outcomes highlighted. Team would use in addition to standard current therapy. Costs and comparable costs and number of patients covered. A guideline for use will be published and diabetic and renal team happy to receive enquiries from primary care team.	BFC Approved: for general use - hospital and general practice (Category A) Letter to applicant Change NMA form – wording in comparable section	KW KW LL	22/12/20 07/01/21

	Monitoring will be part of the guideline; secondary care patients will be able to arrange with newly formed hubs. Evidence and trials covered; specific safety issues were highlighted – patient with past history GU tract infection not suitable and associated with risk of DKA plus there is significant safety guidance in BNF. Benefits should be assessed with risks. This is specifically for this defined patient group – no transfer of patients as other two treatments remain on formulary – this is a new indication. GP request for communication and education to GPs to be clear and in conjunction with going onto formulary.			
b)	NMA Cannabidiol oral solution (Epidyolex) Applicant: Dr C Irving; and G Eunson; Clinical Director: Dr C Irving; Indication: Epilepsy - for seizures associated with Lennox-Gastaut syndrome in conjunction with clobazam or Dravet syndrome in conjunction with clobazam in patients over 2 years of age who are inadequately controlled by other anti-epileptic medicines; Generic Name: Cannabidiol oral solution; Brand Name: Epidyolex; Dosage: Initially 2.5mg/kg twice daily for 1 week then increased to 5mg/kg twice daily, then increase in steps of 2.5mg/kg twice daily according to response, maximum of 20mg/kg per day; Cost: included in application; Number of patients in first year: 2 (1 started in Lothian); Projected increase in patients: unlikely to be >2 per annum. One application with two different indications and SMC advice pdfs. Both orphan medicine indications, both through PACE system. Application was summarised; patient numbers and costs discussed. Small selective set of patients. No comparable treatments. Monitoring would depend on age of patient. Safety – significant number of adverse events in safety profile – effect on liver discussed; patients also prescribed sodium valproate – close monitoring of liver function would be required. Positive impact on patient, family and carers was commented on. GP commented too complex for general practice prescribing; shared care protocol must be produced if prescribed in primary care in future and monitoring must be in secondary care. BFC supported this change. BFC approved as specialist use only not, as requested, specialist initiation, with ongoing prescribing in general practice and requested a follow up report on patient experience/feedback after one year.	BFC Approved : For Specialist Use Only Letter to applicant Include comments re change of use; shared care protocol and feedback requested.	KW	22/12/20
6	Scottish Medicines Consortium (SMC) Decisions			
6.1	SMC – verbal update from Dr Paul Neary – no update to add; Dr Neary has agreed to continue in his SMC role; AW thanked him for his commitment.	BFC Noted		
6.2	SMC decisions November - December 2020 to be updated after this meeting. Locally, all decisions have gone out to clinical teams; further update at February meeting.	BFC Noted		
7	Borders Joint Formulary:			
7.1	Update to chapter 1.5 Inflammatory Bowel Disease – changes highlighted; cost efficacy. Guidance from secondary care and prescribing in conjunction with secondary care.	BFC Approved		
7.2	Update to Eye section of Borders Joint Formulary; two new Ophthalmologists in post; changes to formulary highlighted. BFC requested that KMacI monitor use as changes have potential to deliver savings to invest. KMacI reported on ongoing pressure for requests for eye lubricants from patients on recommendation from opticians.	BFC Approved Forward to PST after formulary updated on web Monitor use	KMacI KMacI	Jan 2021 On-going
7.3	Article for discussion - Bevacizumab and wAMD; current situation with pandemic and newer	BFC Noted		

	products emerging which require fewer injections discussed. Information has been forwarded to clinical management team in BGH.			
7.4	Covid19 – Remdesivir therapeutic alert from 3 September 2020 and rapid policy statement from 6 November 2020. BFC were updated on introduction of Remdesivir through EAMS, lack of benefit and evidence, local clinicians' decision and ITU concern regarding safety and evidence in ITU patients. Decided locally not to use currently and to regularly review emerging evidence. Since then there has been questions about this decision and BFC agreed that up to date evidence and trial data should be reviewed and a statement available regarding the up to date decision. Also included in review will be use of Tocilizumab, currently available through recovery trial only. A guideline protocol would be required on drugs available for Covid; patient criteria and current NHS Borders position. There is currently no clinical lead for Covid at NHS Borders and until they are in post, it was agreed that clear response and guideline was required from BFC. Other recent evidence was outlined and it was agreed that MM would compile evidence and information and circulate. Local clinicians to meet to discuss and agree NHS Borders guidance for approval at next ADTC/BFC.	Forward evidence and recent information to BFC	MM	31/12/20
7.5	Covid Medicines Microsite Page – available with up to date information around medicines in use. AW thanked the Anticoagulation Committee for this significant amount of work.	BFC Noted		
8	East Region Formulary:			
8.1	Verbal update on East Region Formulary progress – project group came at to October BFC meeting and AW has since met with other East DoPs to plan a stakeholder event early in 2021 to discuss how the regional formulary will work for each Board and how this can reflect local choices and formularies. Each Board has their process, local choices and requirements to consider and this will be done at regional meetings.	BFC Noted		
8.2	Pharmacy First – replaces minor ailments; the approved list was made available to BFC.	BFC Noted		
9	Other Items for Approval			
9.1	Guidance for Rapid Reversal of Rivaroxaban and Apixaban with Andexanet alfa in life/limb threatening bleeding – clinical guideline November 2020 – November 2022. This was approved at previous BFC and Anticoagulation Committee was asked to develop protocol guidance for use. The next meeting of that committee is at end January and BFC agreed that the guideline could be emailed to BFC for any changes/approval and put into use as soon as required – with any changes being made by Anticoagulation Committee at their next meeting.	BFC Approved To come to BFC for approval by email if any changes are made.	LL	Dec 2020
9.2	BFC Terms of Reference – updated after comments from October BFC meeting; updated NFR form to include declaration of interest. Included Vice Chair position. Vice Chair nominated and approved as GP Nicola Henderson.	BFC Approved	AW	
10	For Information and Noting			
10.1	Tocilizumab letter and statement embedded for noting. Discussed at item 7.4.	BFC Noted		
10.2	Anticoagulation Committee – next meeting January 2021			
10.3	Wound Formulary Group DRAFT meeting minute – 25 th November 2020	BFC Noted		

10.4	Tissue Viability Group – no recent meeting			
10.5	IV Therapy Group meeting notes and actions – 11 th November 2020	BFC Noted		
10.6	Lothian Formulary Committee meeting minutes – 11 th November 2020	BFC Noted		
11	A.O.C.B. –			
11.1	New Medicines Application for FreeStyle Libre2 Sensor – sent 14/12/20. Background from Keith Maclure - Abbott are bringing out the updated model of their Libre device in January. The new device has improved algorithms meaning no blood testing is required. The team will start moving Libre 1 patients across to the new device, Libre2, when they see them in the New Year. The company have generated considerable patient anticipation so Team Diabetes will be writing to all patients (&Pharmacies) to re-set expectations. Important to do the switch in a controlled manner to allow the old stock to filter through and minimise the risk of old device - new scanner, or vice versa. It's been in the Drug Tariff since 1st Dec and stock will be available from 1st Jan. KMacI outlined the application which other boards are now using; no blood testing, new alarms,	BFC Approved for: Specialist Initiation with ongoing prescribing in general practice (Category C) Letter to applicant	KW	22/12/20
11.2	This meeting clashes with SMSC meeting – there was a request to change from February onwards to the fourth Wednesday of the month (if possible) for other meetings.	Reschedule meetings	KW	Jan 2021
Next Meeting: Wednesday 24th February 2021 at 12:30 via Microsoft Teams				