In Scotland, a newly licensed medicine is routinely available in a health board only after it has been:

- accepted for use in NHS Scotland by the Scottish Medicines Consortium (SMC), and
- accepted for use by the health board's Area Drug and Therapeutics Committee (ADTC).

All medicines accepted by SMC are available in Scotland, but may not be considered 'routinely available' within a particular health board because of available services and preferences for alternative medicines.

'Routinely available' means that a medicine can be prescribed by the appropriately qualified person within a health board.

Each health board has an ADTC. The ADTC, Grampian Area Drug and Therapeutics Committee, is responsible for advising NHS Grampian health board on all aspects of the use of medicines.

Medicines routinely available within NHS Grampian are usually included in the Grampian Joint Formulary. The formulary is a list of medicines for use in the health board that has been agreed by the ADTC in consultation with local clinical experts. It offers a choice of medicines for healthcare professionals to prescribe for common medical conditions. A formulary can help improve safety as prescribers are likely to become more familiar with the medicines in it and also helps make sure that standards of care are consistent across the health board.

How does the health board decide which new medicines to make routinely available for patients?

The ADTC in a health board will consider national and local guidance before deciding whether to make a new medicine routinely available.

What national guidance does the ADTC consider?

- SMC advice: The SMC considers newly licensed medicines and advises health boards in Scotland whether they should be available. When SMC considers a new medicine for the NHS in Scotland, it looks at:
 - how well the medicine works,
 - which patients might benefit from it,
 - whether it is as good or better than medicines the NHS already uses to treat the medical condition, and
 - whether it is good value for money.
- In the table below, national guidance usually refers to SMC advice. Links to SMC advice for individual medicines are also included in the table.
- In some cases, other agencies may also provide guidance on how medicines should be used.
 For example, Healthcare Improvement Scotland issues alerts to advise if National Institute for Health and Care Excellence Multiple Technology Appraisals (NICE MTAs) are applicable in Scotland.

What local guidance does the ADTC consider?

 Advice from local clinical experts who would be expected to prescribe a particular medicine, where that service is available in a health board.

Why is a particular medicine not routinely available in NHS Grampian?

- This is usually because the medicine is not recommended for use in NHS Scotland by the SMC.
- The medicine may not be routinely available in a health board, particularly in smaller health boards, because there is not a suitable specialist who may use the medicine.
- There may also be differences as to which medicines are preferred in health boards.
 Sometimes SMC accepts more than one medicine for treating a specific medical condition.
 Clinical experts in each health board consider whether to add new medicines to their formulary and advise the ADTC. Sometimes it is agreed that established medicines are a better choice than new medicines.

What happens if a particular medicine is not routinely available in NHS Grampian?

If a medicine is not routinely available and not included in the Grampian Joint Formulary and there are no suitable alternatives on the formulary, a healthcare professional can request to prescribe a medicine that is not on the formulary if they think you will benefit from using it. All health boards have procedures in place to consider requests when a healthcare professional feels a medicine that is not on the formulary would be right for a particular patient.

The table below lists NHS Grampian's latest decisions on medicines.

If you need more information on medicines decisions in NHS Grampian, please email gram.formularyteam@nhs.scot.

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This document is also available in large print and other formats and languages, upon request. Please call NHS Grampian Corporate Communications on (01224) 551116 or (01224) 552245.

NHS Grampian New Medicines Decisions – Formulary Group decisions 16 April 2024

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
adalimumab 40mg/0.4mL, 80mg/0.8mL solution for injection in pre-filled pen/syringe (Yuflyma®)		In line with the current formulary approval for adalimumab.	Routinely available in line with local guidance	16/04/2024
aflibercept 114.3mg/mL solution for intravitreal injection (Eylea®)		For the treatment of adults with neovascular (wet) age-related macular degeneration (nAMD). Restriction: as an alternative choice when aflibercept 2mg does not provide a durable response.	Routinely available in line with local guidance	16/04/2024
aflibercept 114.3mg/mL solution for intravitreal injection (Eylea®)		For the treatment of visual impairment due to diabetic macular oedema (DMO) in adults with best corrected visual acuity (BCVA) 75 Early Treatment Diabetic Retinopathy Study (ETDRS) letters or less at baseline. Restriction: as an alternative choice when aflibercept 2mg does not provide a durable response.	Routinely available in line with local guidance	16/04/2024
avacopan 10mg hard capsules (Tavneos®)	<u>2578</u>	In combination with a rituximab or cyclophosphamide regimen, for the treatment of adults with severe, active granulomatosis with polyangiitis (GPA) or microscopic polyangiitis (MPA).	Routinely available in line with national guidance, SMC 2578 https://www.scottishmedicines.org.uk/media/7938/avacopa n-tavneos-final-oct-2023-for-website.pdf	16/04/2024
Bevespi Aerosphere® 7.2micrograms/5micrograms pressurised inhalation, suspension (glycopyrronium/formoterol fumarate)	<u>2652</u>	As a maintenance bronchodilator treatment to relieve symptoms in adult patients with chronic obstructive pulmonary disease (COPD).	Not routinely available as there is a local preference for alternative medicines	16/04/2024

NHS Grampian New Medicines Decisions – Formulary Group decisions 16 April 2024

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
daridorexant 25mg, 50mg film-coated tablets (Quviviq®)	<u>2611</u>	Treatment of adult patients with insomnia characterised by symptoms present for at least 3 months and considerable impact on daytime functioning. SMC restriction : in patients who have failed cognitive behavioural therapy for insomnia (CBT-I) or for whom CBT-I is unsuitable or unavailable.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	16/04/2024
dostarlimab 500mg concentrate for solution for infusion (Jemperli®)	<u>2635</u>	In combination with platinum-containing chemotherapy for the treatment of adult patients with mismatch repair deficient (dMMR)/microsatellite instability-high (MSI-H) primary advanced or recurrent endometrial cancer and who are candidates for systemic therapy.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	16/04/2024
Epimax Ointment		Management of dry skin conditions.	Not routinely available as there is a local preference for alternative medicines	16/04/2024
Epimax Original Cream		Management of dry skin conditions.	Not routinely available as there is a local preference for alternative medicines	16/04/2024
Epimax Paraffin free Ointment		Management of dry skin conditions.	Not routinely available as there is a local preference for alternative medicines	16/04/2024
estriol 1mg/g vaginal cream		 treatment of vaginal oestrogen deficiency symptoms: treatment of symptoms of vaginal atrophy due to oestrogen deficiency in postmenopausal women as pre-surgery therapy for vaginal operations and during subsequent convalescence 	Routinely available in line with local guidance	16/04/2024
finerenone 10mg, 20mg film-coated tablets (Kerendia®)	<u>2486</u>	For the treatment of chronic kidney disease (stage 3 and 4 with albuminuria) associated with type 2 diabetes in adults.	Decision deferred to future meeting	16/04/2024
Advice undeted to $30/04/2024$				Page / of 6

NHS Grampian New Medicines Decisions – Formulary Group decisions 16 April 2024

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
Insulatard [®] InnoLet [®] 100units/mL suspension for injection in pre-filled pen (human isophane insulin)		For treatment of diabetes mellitus.	This medicine is now withdrawn from use/discontinued	16/04/2024
Levemir [®] InnoLet [®] 100units/mL solution for injection in pre-filled pen (insulin detemir)		For treatment of diabetes mellitus in adults, adolescents and children aged 1 year and above.	This medicine is now withdrawn from use/discontinued	16/04/2024
loncastuximab tesirine 10mg powder for concentrate for solution for infusion (Zynlonta®)	<u>2609</u>	As monotherapy for the treatment of adults with relapsed or refractory diffuse large B-cell lymphoma (DLBCL) and high-grade B-cell lymphoma (HGBL), after two or more lines of systemic therapy where chimeric antigen receptor (CAR) T-cell therapy is unsuitable, not tolerated or ineffective.	Routinely available in line with national guidance, SMC 2609 https://www.scottishmedicines.org.uk/media/8110/loncastu ximab-tesirine-zynlonta-final-jan-2024-for-website.pdf	16/04/2024
mavacamten 2.5mg, 5mg, 10mg, 15mg hard capsules (Camzyos®)	<u>2618</u>	Treatment of symptomatic (New York Heart Association, NYHA, class II to III) obstructive hypertrophic cardiomyopathy (oHCM) in adult patients.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	16/04/2024
mirikizumab 100mg solution for injection in pre-filled pen, 300mg concentrate for solution for infusion (Omvoh®)	<u>2650</u>	For the treatment of adult patients with moderately to severely active ulcerative colitis who have had an inadequate response with, lost response to, or were intolerant to either conventional therapy or a biologic treatment.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	16/04/2024
olaparib 100mg, 150mg film-coated tablets (Lynparza®)	<u>2518</u>	As monotherapy or in combination with endocrine therapy for the adjuvant treatment of adults with germline BRCA1/2-mutations who have human epidermal growth factor receptor 2 (HER2)- negative, high risk early breast cancer previously treated with neoadjuvant or adjuvant chemotherapy.	Routinely available in line with national guidance, SMC 2518 https://www.scottishmedicines.org.uk/media/7876/olaparib- lynparza-final-sept-2023-amended-210923-for-website.pdf	16/04/2024

NHS Grampian New Medicines Decisions – Formular	v Group decisions 16 April 2024

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
Ovestin® 1mg/g vaginal cream (estriol)		 treatment of vaginal oestrogen deficiency symptoms: treatment of symptoms of vaginal atrophy due to oestrogen deficiency in postmenopausal women as pre-surgery therapy for vaginal operations and during subsequent convalescence 	This medicine is now withdrawn from use/discontinued	16/04/2024
pralsetinib 100mg hard capsules (Gavreto®)	2496	As monotherapy for the treatment of adult patients with rearranged during transfection (RET) fusion-positive advanced non-small cell lung cancer (NSCLC) not previously treated with a RET inhibitor.	This medicine is now withdrawn from use/discontinued	16/04/2024
ritlecitinib tosylate 50mg hard capsules (Litfulo®)	<u>2610</u>	For the treatment of severe alopecia areata in adults and adolescents 12 years of age and older.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	16/04/2024
tirzepatide 2.5mg, 5mg, 7.5mg, 10mg 12,5mg, 15mg solution for injection ir pre-filled pen (Mounjaro®)		For the treatment of adults with insufficiently controlled type 2 diabetes mellitus as an adjunct to diet and exercise: - as monotherapy when metformin is considered inappropriate due to intolerance or contraindications - in addition to other medicinal products for the treatment of diabetes. SMC restriction: in addition to other oral anti- diabetic medicines as an option when glucagon- like peptide-1 (GLP-1) receptor agonists would be considered.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	16/04/2024
tocilizumab 162mg solution for injection in pre-filled pen/syringe, 20mg/mL concentrate for solution for infusion (Tyenne [®])		In line with the current SMC and Healthcare Improvement Scotland advice for the reference product tocilizumab (RoActemra [®]).	Routinely available in line with local guidance	16/04/2024