

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.

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
aliskiren 150mg, 300mg tablets (Rasilez®)		For the treatment of essential hypertension in adults.	This medicine is now withdrawn from use/discontinued	18/02/2025
apomorphine hydrochloride 50mg/10mL solution for infusion pre-filled syringes (APO-go®)		For the treatment of motor fluctuations ('on-off' phenomena) in patients with Parkinson's disease which are not sufficiently controlled by oral anti-Parkinson medication.	This medicine is now withdrawn from use/discontinued	18/02/2025
cabotegravir 600mg prolonged-release suspension for injection, 30mg film coated tablets (Apretude®)	2718	<p>Cabotegravir prolonged-release injection: in combination with safer sex practices for pre-exposure prophylaxis (PrEP) to reduce the risk of sexually acquired HIV-1 infection in high-risk adults and adolescents, weighing at least 35kg. Cabotegravir tablets: in combination with safer sex practices for short term pre-exposure prophylaxis (PrEP) to reduce the risk of sexually acquired HIV-1 infection in high-risk adults and adolescents, weighing at least 35kg. Cabotegravir tablets may be used as:</p> <ul style="list-style-type: none"> - oral lead-in to assess tolerability of cabotegravir prior to administration of long acting cabotegravir injection. - oral PrEP for individuals who will miss planned dosing with cabotegravir injection. <p>SMC restriction: Adults and adolescents (weighing at least 35kg) at high risk of sexually acquired HIV who are eligible for PrEP, including oral PrEP, but for whom oral PrEP is not appropriate to meet their HIV prevention needs.</p>	Not routinely available as the ADTC is waiting for further advice from local clinical experts	18/02/2025
cemiplimab 350mg concentrate for solution for infusion (Libtayo®)	2719	As monotherapy for the treatment of adult patients with recurrent or metastatic cervical cancer and disease progression on or after platinum-based chemotherapy.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	18/02/2025

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
daridorexant 25mg, 50mg film-coated tablets (Quviviq®)	2611	For the treatment of adults with insomnia characterised by symptoms present for at least 3 months and considerable impact on daytime functioning and who have failed cognitive behavioural therapy for insomnia (CBT-I) or for whom CBT-I is unsuitable or unavailable.	Decision deferred to future meeting	18/02/2025
dasatinib 20mg, 50mg, 100mg film-coated tablets	116	[Off-label use] for the treatment of adults with newly diagnosed Philadelphia chromosome positive (Ph+) acute lymphoblastic leukaemia (ALL) integrated with chemotherapy.	Routinely available in line with national guidance, NCMAG 116 https://www.healthcareimprovementscotland.scot/wp-content/uploads/2024/07/NCMAG116_Dasatinib_Newly_diagnosed_AD_July_2024.pdf	18/02/2025
durvalumab 50 mg/mL concentrate for solution for infusion (Imfinzi®)	2734	In combination with etoposide and either carboplatin or cisplatin for the first-line treatment of adults with extensive-stage small cell lung cancer (ES-SCLC).	Not routinely available as the ADTC is waiting for further advice from local clinical experts	18/02/2025
fenfluramine 2.2mg/mL oral solution (Fintepla®)	2723	Treatment of seizures associated with Lennox-Gastaut syndrome as an add-on therapy to other anti-epileptic medicines for patients 2 years of age and older. SMC restriction: patients whose seizures have not been controlled after trying two or more anti-epileptic medicines.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	18/02/2025
fosdenopterin 9.5mg powder for solution for injection (Nulibry®)	2624	For the treatment of patients with molybdenum cofactor deficiency (MoCD) Type A.	Not routinely available in NHS Grampian. If local need identified, treatment is available through the National Services Scotland Ultra-orphan medicines Risk Share Scheme.	18/02/2025

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
galcanezumab 120mg solution for injection in pre-filled pen (Emgality®)		<p>For the prophylaxis of migraine in adults with:</p> <p>1) chronic migraine (headaches on at least 15 days per month of which at least 8 days are with migraine)</p> <p>2) high frequency episodic migraine (headaches on 10 to 15 days per month)</p> <p>Restriction: adults whose condition has failed to respond to at least three prior oral prophylactic treatments.</p> <p>Selection of appropriate patients and provision of galcanezumab is limited to the NHS Grampian Headache Service.</p>	Routinely available in line with local guidance	18/02/2025
lecanemab 100mg/mL concentrate for solution for infusion (Leqembi®)	2700	For the treatment of mild cognitive impairment and mild dementia due to Alzheimer's disease in adult patients that are apolipoprotein E ε 4 (ApoEε4) heterozygotes or non-carriers.	<p>Not routinely available as not recommended for use in NHS Scotland,</p> <p>SMC 2700</p> <p>https://scottishmedicines.org.uk/media/8949/lecanemab-leqembi-final-jan-2025-amended-030225-070225-for-website.pdf</p>	18/02/2025
olaparib 100mg, 150mg film-coated tablets (Lynparza®)	2737	<p>Monotherapy for the treatment of adult patients with germline BRCA1/2-mutations, who have HER2 negative locally advanced or metastatic breast cancer. Patients should have previously been treated with an anthracycline and a taxane in the (neo)adjuvant or metastatic setting unless patients were not suitable for these treatments. Patients with hormone receptor (HR)-positive breast cancer should also have progressed on or after prior endocrine therapy, or be considered unsuitable for endocrine therapy.</p>	Not routinely available as the ADTC is waiting for further advice from local clinical experts	18/02/2025

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pembrolizumab 25mg/mL concentrate for solution for infusion (Keytruda®)	2660	In combination with fluoropyrimidine and platinum-containing chemotherapy, for the first-line treatment of locally advanced unresectable or metastatic human epidermal growth factor 2 (HER2)-negative gastric or gastro-oesophageal junction adenocarcinoma in adults whose tumours express programmed death-ligand 1 (PD-L1) with a combined positive score (CPS) \geq 1. Restriction: treatment with pembrolizumab is subject to a two-year clinical stopping rule.	Routinely available in line with national guidance, SMC 2660 https://scottishmedicines.org.uk/media/8461/pembrolizumab-keytruda-final-june-2024-for-website.pdf	18/02/2025
Roclanda® 50micrograms/mL / 200micrograms/mL eye drops, solution (latanoprost/netarsudil)	2720	For the reduction of elevated intraocular pressure (IOP) in adult patients with primary open-angle glaucoma or ocular hypertension for whom monotherapy with a prostaglandin or netarsudil provides insufficient IOP reduction. SMC restriction: for use in patients for whom treatment with a prostaglandin analogue alone provides insufficient IOP reduction, only if: - the patient has then tried a fixed-dose combination treatment and it has not sufficiently reduced IOP, or - a fixed-dose combination treatment containing beta-blockers is unsuitable	Not routinely available as the ADTC is waiting for further advice from local clinical experts	18/02/2025
tepotinib 225mg film-coated tablets (Tepmetko®)	2535	For the treatment of adults with advanced non-small cell lung cancer (NSCLC) harbouring mesenchymal-epithelial transition factor gene (MET) exon 14 (METex14) skipping alterations.	Routinely available in line with national guidance, SMC 2535 https://scottishmedicines.org.uk/media/7359/tepotinib-tepmekto-resub-final-dec-2022-updated-211222docxfor-website.pdf	18/02/2025

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Tridestra® tablets (estradiol 2mg, estradiol/medroxyprogesterone 2mg/20mg, placebo)		For hormone replacement therapy (HRT) for oestrogen deficiency symptoms in peri and postmenopausal women, and prevention of osteoporosis in postmenopausal women at high risk of future fractures who are intolerant of, or contraindicated for, other medicinal products approved for the prevention of osteoporosis.	This medicine is now withdrawn from use/discontinued	18/02/2025