

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
alectinib 150mg hard capsules (Alecensa®)	2749	As monotherapy as adjuvant treatment for adult patients with Stage IB (tumours \geq 4 cm) to IIIA (7th edition of the UICC/AJCC-staging system) anaplastic lymphoma kinase (ALK)-positive non-small cell lung cancer (NSCLC) following complete tumour resection.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	15/04/2025
bimekizumab 160mg, 320mg solution for injection in pre-filled syringe, pre-filled pen (Bimzelx®)	2698	For the treatment of active moderate to severe hidradenitis suppurativa (HS) (acne inversa) in adults with an inadequate response to conventional systemic HS therapy. SMC restriction: for use in adult patients with active moderate to severe HS for whom adalimumab is contraindicated or otherwise unsuitable, including those who have failed to respond or have lost response to prior adalimumab treatment.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	15/04/2025
dabrafenib 10mg dispersible tablets (Finlee®)	2667	In combination with trametinib (Spexotras®) for: - the treatment of paediatric patients aged 1 year and older with low-grade glioma with a BRAF V600E mutation who require systemic therapy - the treatment of paediatric patients aged 1 year and older with high-grade glioma with a BRAF V600E mutation who have received at least one prior radiation and / or chemotherapy treatment	Routinely available in line with national guidance, SMC 2667 https://scottishmedicines.org.uk/media/8575/dabrafenib-finlee-final-august-2024-for-website.pdf	15/04/2025

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
dapagliflozin 10mg film-coated tablets (Forxiga®)	2763	In adults for the treatment of chronic kidney disease (CKD). SMC restriction: in patients having individually optimised standard care (including angiotensin converting enzyme inhibitors or angiotensin II receptor blockers, unless these are contraindicated or not tolerated), and either, at the start of treatment: - an estimated glomerular filtration rate (eGFR) of 20mL/min/1.73m ² up to 45mL/min/1.73m ² , or - an eGFR of 45mL/min/1.73m ² up to 90mL/min/1.73m ² and either: o A urine albumin-to-creatinine ratio (uACR) of 22.6mg/mmol or more, or o Type 2 Diabetes Mellitus (T2DM).	Not routinely available as the ADTC is waiting for further advice from local clinical experts	15/04/2025
elafibranor 80mg film-coated tablets (Iqirvo®)	2714	For the treatment of primary biliary cholangitis (PBC) in combination with ursodeoxycholic acid (UDCA) in adults with an inadequate response to UDCA, or as monotherapy in adults unable to tolerate UDCA.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	15/04/2025
eplontersen 45mg/0.8mL solution for injection in pre-filled pen (Wainzua®)	2755	For the treatment of hereditary transthyretin-mediated amyloidosis (ATTRv amyloidosis) in adult patients with Stage 1 and 2 polyneuropathy.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	15/04/2025
futibatinib 4mg film-coated tablets (Lytgobi®)	2661	As monotherapy for the treatment of adult patients with locally advanced or metastatic cholangiocarcinoma with a fibroblast growth factor receptor 2 (FGFR2) fusion or rearrangement that have progressed after at least one prior line of systemic therapy.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	15/04/2025

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
Lonsurf® 15mg/6.14mg, 20mg/8.19mg film-coated tablets (trifluridine/tipiracil)	2654	In combination with bevacizumab for the treatment of adults with metastatic colorectal cancer (CRC) who have received two prior anticancer treatment regimens including fluoropyrimidine-, oxaliplatin- and irinotecan-based chemotherapies, anti-VEGF agents, and/or anti-EGFR agents.	Routinely available in line with national guidance, https://scottishmedicines.org.uk/media/8523/trifluridine-tipiracil-lonsurf-final-july-2024-for-website.pdf	15/04/2025
methoxyflurane 99.9% 3mL inhalation vapour liquid (Penthrox®)	473/25	[Off-label use] in combination with local anaesthetic for adults having surgical termination of pregnancy or evacuation of retained products of conception. Restriction: limited to use in theatre at ARI.	Routinely available in line with local guidance	15/04/2025
tebentafusp 200micrograms/mL concentrate for solution for infusion (Kimmtrak®)	2746	As monotherapy for the treatment of human leukocyte antigen (HLA)-A*02:01-positive adult patients with unresectable or metastatic uveal melanoma.	Not routinely available as not recommended for use in NHS Scotland, SMC 2746 https://scottishmedicines.org.uk/media/9088/tebentafusp-kimmtrak-resub-final-march-2025-amended-030425-for-website.pdf	15/04/2025
trametinib dimethyl sulfoxide 0.05mg/mL powder for oral solution (Spexotras®)	2667	In combination with dabrafenib (Finlee®) for: - the treatment of paediatric patients aged 1 year and older with low-grade glioma with a BRAF V600E mutation who require systemic therapy - the treatment of paediatric patients aged 1 year and older with high-grade glioma with a BRAF V600E mutation who have received at least one prior radiation and / or chemotherapy treatment	Routinely available in line with national guidance, SMC 2667 https://scottishmedicines.org.uk/media/8575/dabrafenib-finlee-final-august-2024-for-website.pdf	15/04/2025
zanubrutinib 80mg hard capsules (Brukinsa®)	2684	As monotherapy for the treatment of adults with marginal zone lymphoma (MZL) who have received at least one prior anti-CD20-based therapy.	Routinely available in line with national guidance, SMC 2684 https://scottishmedicines.org.uk/media/8809/zanubrutinib-brukinsa-final-nov-2024-for-website.pdf	15/04/2025