

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](mailto: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
brentuximab vedotin 50mg powder for concentrate for solution for infusion (Adcetris®)	<a href="#">2762</a>	For adults with previously untreated CD30+ Stage III or IV Hodgkin lymphoma (HL) in combination with doxorubicin, vinblastine and dacarbazine (AVD).	Routinely available in line with national guidance, SMC 2762 <a href="https://scottishmedicines.org.uk/media/9372/brentuximab-vedotin-adcetris-final-july-2025-for-website.pdf">https://scottishmedicines.org.uk/media/9372/brentuximab-vedotin-adcetris-final-july-2025-for-website.pdf</a>	17/02/2026
donanemab 350mg concentrate for solution for infusion (Kisunla®)	<a href="#">2871</a>	For the treatment of mild cognitive impairment and mild dementia due to Alzheimer’s disease (AD) in adult patients that are apolipoprotein E ε4 (ApoE ε4) heterozygotes or non-carriers.	Not routinely available as not recommended for use in NHS Scotland, SMC 2871 <a href="https://scottishmedicines.org.uk/media/9787/donanemab-kisunla-final-jan-2026-for-website.pdf">https://scottishmedicines.org.uk/media/9787/donanemab-kisunla-final-jan-2026-for-website.pdf</a>	17/02/2026
drospirenone 4mg film-coated tablets (Slynd®)	<a href="#">479/25</a>	Contraception in adults as a second-line alternative progestogen-only pill for use when desogestrel is not tolerated or is unsuitable. <b>Restriction:</b> use is restricted to specialists in Sexual and Reproductive Health (SRH) or GPs and Independent prescribers with SRH competence.	Routinely available in line with local guidance	17/02/2026
exagamglogene autotemcel 4-13 x 10Exp6 cells/mL dispersion for infusion dispersion for infusion (Casgevy®)	<a href="#">2852</a>	For the treatment of sickle cell disease in patients 12 years of age and older with recurrent vaso-occlusive crises who have the βS/βS, βS/β+ or βS/β0 genotype, for whom haematopoietic stem cell transplantation is appropriate and a human leukocyte antigen matched related haematopoietic stem cell donor is not available.	Routinely available from a specialist centre in another health board	17/02/2026
fruquintinib 1mg, 5mg hard capsule (Fruzaqla®)	<a href="#">2858</a>	Treatment of adults with metastatic colorectal cancer (mCRC) who have been previously treated with available therapies, including fluoropyrimidine-, oxaliplatin-, and irinotecan-based chemotherapy, with or without an anti-VEGF therapy, and if RAS wildtype and medically appropriate, an anti-EGFR therapy.	Routinely available in line with national guidance, SMC 2858 <a href="https://scottishmedicines.org.uk/media/9479/fruquintinib-fruzaqla-resub-final-sept-2025-for-website.pdf">https://scottishmedicines.org.uk/media/9479/fruquintinib-fruzaqla-resub-final-sept-2025-for-website.pdf</a>	17/02/2026

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methoxyflurane 99.9% 3mL inhalation vapour liquid (Penthrox®)		[Off-label use] in adults for difficult coil insertion/removal. <b>Restriction:</b> to use by senior medical staff within the Sexual and Reproductive Health Service.	Routinely available in line with local guidance	17/02/2026
ribociclib 200mg film-coated tablets (Kisqali®)	<a href="#">2803</a>	In combination with an aromatase inhibitor for the adjuvant treatment of adults with hormone receptor (HR)-positive, human epidermal growth factor receptor 2 (HER2)-negative early breast cancer at high risk of recurrence. In pre- or perimenopausal women, or in men, the aromatase inhibitor should be combined with a luteinising hormone-releasing hormone (LHRH) agonist.	Routinely available in line with national guidance, SMC 2803 <a href="https://scottishmedicines.org.uk/media/9549/ribociclib-kisqali-final-oct-2025-for-website.pdf">https://scottishmedicines.org.uk/media/9549/ribociclib-kisqali-final-oct-2025-for-website.pdf</a>	17/02/2026
sotatercept 45mg, 60mg powder and solvent for solution for injection (Winrevair®)	<a href="#">2831</a>	In combination with other pulmonary arterial hypertension (PAH) therapies, for the treatment of PAH in adult patients with WHO Functional Class (FC) II to III, to improve exercise capacity.	Not routinely available as not recommended for use in NHS Scotland, SMC 2831 <a href="https://scottishmedicines.org.uk/media/9785/sotatercept-winrevair-final-jan-2026-for-website.pdf">https://scottishmedicines.org.uk/media/9785/sotatercept-winrevair-final-jan-2026-for-website.pdf</a>	17/02/2026
zanubrutinib 80mg hard capsules (Brukinsa®)	<a href="#">2819</a>	As monotherapy for the treatment of adults with mantle cell lymphoma (MCL) who have received at least one prior therapy.	Routinely available in line with national guidance, SMC 2819 <a href="https://scottishmedicines.org.uk/media/9371/zanubrutinib-brukinsa-abb-final-july-2025-for-website.pdf">https://scottishmedicines.org.uk/media/9371/zanubrutinib-brukinsa-abb-final-july-2025-for-website.pdf</a>	17/02/2026
zuranolone 20mg, 25mg, 30mg hard capsule (Zurzuvae®)	<a href="#">2862</a>	Treatment of moderate or severe postnatal depression (PND) in adults following childbirth.	Not routinely available as not recommended for use in NHS Scotland, SMC 2862 <a href="https://scottishmedicines.org.uk/media/9786/zuranolone-zurzuvae-final-jan-2026-for-website.pdf">https://scottishmedicines.org.uk/media/9786/zuranolone-zurzuvae-final-jan-2026-for-website.pdf</a>	17/02/2026