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.

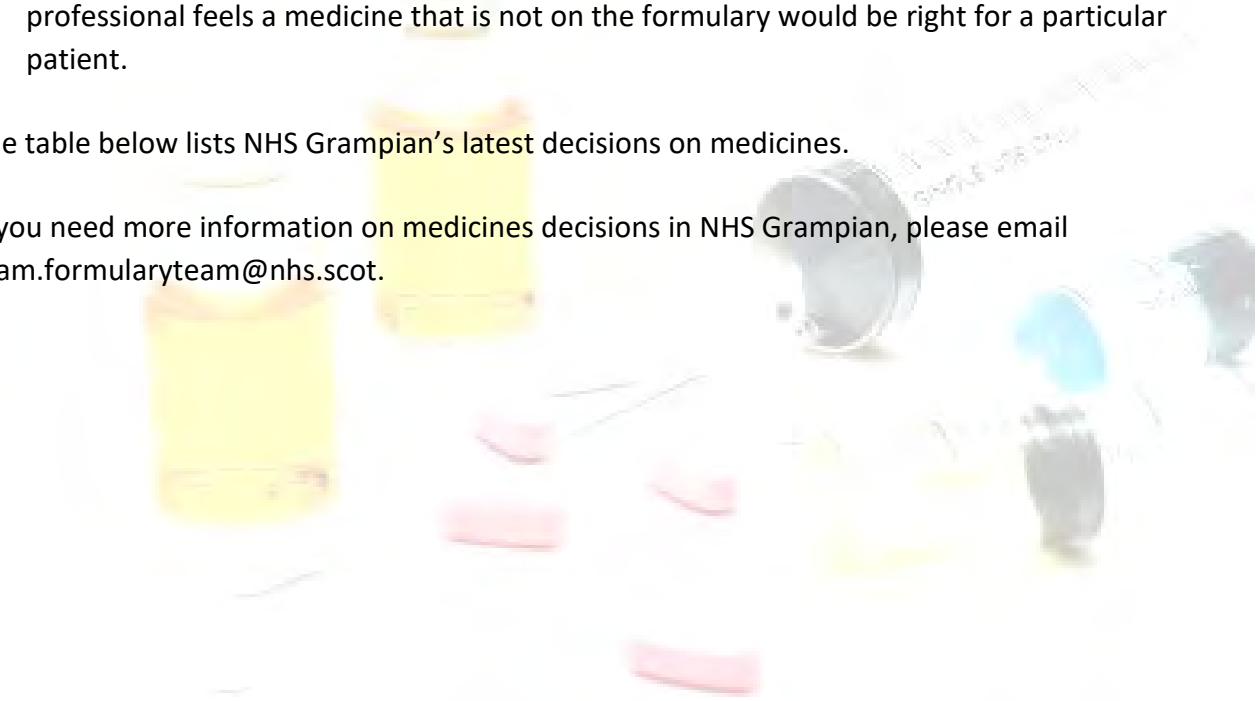

Image courtesy of Baitong333 - image ID: 100128772/ FreeDigitalPhotos.net

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 |
|---|---|---|---|---|
| aflibercept 40mg/mL solution for injection in pre-filled syringe (Mynzepli®) | | For adults for the treatment of:<br>- neovascular (wet) age-related macular degeneration (AMD)<br>- visual impairment due to macular oedema secondary to retinal vein occlusion (branch RVO or central RVO)<br>- visual impairment due to diabetic macular oedema in those with best corrected visual acuity (BCVA) 75 Early Treatment Diabetic Retinopathy Study (ETDRS) letters or less at baseline.<br>- visual impairment due to myopic choroidal neovascularisation (myopic CNV) | Routinely available in line with local guidance | 17/03/2026 |
| Alyftrek® 50mg/20mg/4mg, 125mg/50mg/10mg film-coated tablets (deutivacaftor/ tezacaftor/ vanzacaftor) | 2800 | For the treatment of cystic fibrosis (CF) in people aged 6 years and older who have at least one F508del mutation or another responsive mutation in the cystic fibrosis transmembrane conductance regulator (CFTR) gene.<br>**SMC restriction**: patients aged 6 years and older who have at least one F508del mutation in the CFTR gene. | Not routinely available as the ADTC is waiting for further advice from local clinical experts | 17/03/2026 |
| apraclonidine 5mg/mL (0.5%) eye drops (Iopidine®) | | For short-term adjunctive therapy of chronic glaucoma in patients on maximally tolerated medical therapy who require additional intraocular pressure (IOP) reduction to delay laser treatment or glaucoma surgery. | This medicine is now withdrawn from use/discontinued | 17/03/2026 |
| capsaicin 0.025% cream (Zacin®) | | For adults for the symptomatic relief of pain associated with osteoarthritis. | Routinely available in line with local guidance | 17/03/2026 |

| Name | Unique identifier | Condition being treated | NHS Grampian decision | Date of decision |
|---|---|---|---|---|
| capsaicin 0.075% w/w cream (Axsain®) | | For adults for the:<br>- symptomatic relief of neuralgia associated with and following Herpes Zoster infections (post-herpetic neuralgia) after open skin lesions have healed.<br>- symptomatic management of painful diabetic peripheral polyneuropathy | Routinely available in line with local guidance | 17/03/2026 |
| chloroquine phosphate 250mg tablets (Avloclor®) | | - Treatment of malaria<br>- Prophylaxis and suppression of malaria<br>- Treatment of amoebic hepatitis and abscess<br>- Treatment of discoid and systemic lupus erythematosus<br>- Treatment of rheumatoid arthritis | This medicine is now withdrawn from use/discontinued | 17/03/2026 |
| cobicistat 150mg tablets (Tybost®) | | As a pharmacokinetic enhancer of atazanavir 300mg once daily or darunavir 800mg once daily as part of antiretroviral combination therapy in human immunodeficiency virus-1 (HIV-1) infected adults and adolescents aged 12 years and older:<br>- weighing at least 35kg co-administered with atazanavir or<br>- weighing at least 40kg co-administered with darunavir | This medicine is now withdrawn from use/discontinued | 17/03/2026 |
| crisantaspase 10,000unit powder for solution for injection vials (Erwinase®) | | In infants from the age of 4 months and in adults as a component of a chemotherapeutic regimen for the treatment of patients with acute lymphoblastic leukaemia (ALL) who have developed hypersensitivity to E. coli-derived asparaginase. | This medicine is now withdrawn from use/discontinued | 17/03/2026 |

| Name | Unique identifier | Condition being treated | NHS Grampian decision | Date of decision |
|---|---|---|---|---|
| Defatted powder of Arachis hypogaea L, semen 0.5mg, 1mg, 10mg, 20mg, 100mg oral powder in capsules for opening and 300mg oral powder in sachet (Palforzia®) | | For the treatment of patients aged 4 to 17 years with a confirmed diagnosis of peanut allergy. Palforzia may be continued in patients 18 years of age and older. Palforzia should be used in conjunction with a peanut-avoidant diet. | This medicine is now withdrawn from use/discontinued | 17/03/2026 |
| delgocitinib 20mg/g cream (Anzupgo®) | 2817 | Treatment of moderate to severe chronic hand eczema (CHE) in adults for whom topical corticosteroids are inadequate or inappropriate. | Routinely available in line with national guidance, SMC 2817 https://scottishmedicines.org.uk/media/9635/delgocitinib-anzupgo-final-nov-2025-for-website.pdf | 17/03/2026 |
| inotersen 284mg solution for injection in pre-filled syringe (Tegsedi®) | | For the treatment of stage 1 or stage 2 polyneuropathy in adult patients with hereditary transthyretin amyloidosis (hATTR). | This medicine is now withdrawn from use/discontinued | 17/03/2026 |
| isatuximab 20mg/mL concentrate for solution for infusion (Sarclisa®) | 2914 | In combination with bortezomib, lenalidomide, and dexamethasone, for the induction treatment of adult patients with newly diagnosed multiple myeloma who are eligible for autologous stem cell transplant. | Not routinely available as not recommended for use in NHS Scotland, SMC 2914 https://scottishmedicines.org.uk/media/9889/isatuximab-sarclisa-non-sub-final-feb-2026-for-website.pdf | 17/03/2026 |
| leniolisib 70mg film-coated tablet (Joenja®) | 2836 | Treatment of activated phosphoinositide 3-kinase delta (PI3K-delta) syndrome (APDS) in adult and paediatric patients 12 years of age and older. | Not routinely available in NHS Grampian. If local need identified treatment is available through the National Services Scotland Ultra orphan medicines Risk Share Scheme | 17/03/2026 |
| lusutrombopag 3mg film-coated tablets (Mulpleo®) | | For the treatment of severe thrombocytopenia in adult patients with chronic liver disease undergoing invasive procedures (see section 5.1 of SmPC). | This medicine is now withdrawn from use/discontinued | 17/03/2026 |
| mercaptamine bitartrate 25mg, 75mg gastro-resistant hard capsules (Procysbi®) | 2824 | Treatment of proven nephropathic cystinosis. Cysteamine reduces cystine accumulation in some cells (e.g. leukocytes, muscle and liver cells) of nephropathic cystinosis patients and, when treatment is started early, it delays the development of renal failure. | Routinely available in line with national guidance, SMC 2824 https://scottishmedicines.org.uk/media/9548/mercaptamine-procysbi-resub-final-oct-2025-for-website.pdf | 17/03/2026 |

| Name | Unique identifier | Condition being treated | NHS Grampian decision | Date of decision |
|---|---|---|---|---|
| omaveloxolone 50mg hard capsules (Skyclarys®) | 2845 | For the treatment of Friedreich's ataxia in adults and adolescents aged 16 years and older. | Not routinely available as not recommended for use in NHS Scotland, SMC 2845 https://scottishmedicines.org.uk/media/9893/omaveloxolone-skyclarys-final-feb-2026-for-website.pdf | 17/03/2026 |
| pembrolizumab 165mg/mL solution for injection (Keytruda®) | | Subject to the product's licensing status for adults and in line with the current formulary acceptance for the intravenous infusion, including any restrictions. | Routinely available in line with local guidance | 17/03/2026 |
| pembrolizumab 25mg/mL concentrate for solution for infusion (Keytruda®) | 2915 | In combination with pemetrexed and platinum chemotherapy for the first line treatment of adults with unresectable non-epithelioid malignant pleural mesothelioma. | Not routinely available as not recommended for use in NHS Scotland, SMC 2915 https://scottishmedicines.org.uk/media/9891/pembrolizumab-keytruda-non-sub-final-feb-2026-for-website.pdf | 17/03/2026 |
| sacituzumab govitecan 180mg powder for concentrate for solution for infusion (Trodelvy®) | 2916 | As monotherapy for the treatment of adult patients with unresectable or metastatic hormone receptor (HR)-positive, HER2-negative breast cancer who have received endocrine-based therapy, and at least two additional systemic therapies in the advanced setting. | Not routinely available as not recommended for use in NHS Scotland, SMC 2916 https://scottishmedicines.org.uk/media/9884/sacituzumab-govitecan-trodelvy-non-sub-final-feb-2026-for-website.pdf | 17/03/2026 |
| seladelpar 10mg capsules (Livdelzi®) | 2899 | For the treatment of primary biliary cholangitis (PBC), including pruritus, in adults in combination with ursodeoxycholic acid (UDCA) who have an inadequate response to UDCA alone, or as monotherapy in those unable to tolerate UDCA. | Not routinely available as not recommended for use in NHS Scotland, SMC 2899 https://scottishmedicines.org.uk/media/9885/seladelpar-livdelzi-resub-final-feb-2026-for-website.pdf | 17/03/2026 |

| Name | Unique identifier | Condition being treated | NHS Grampian decision | Date of decision |
|---|---|---|---|---|
| selpercatinib 40mg, 80mg tablets (Retsevmo®) | | In line with current formulary approval for selpercatinib 40mg, 80mg capsules as monotherapy for the treatment of:<br>- adults with advanced RET fusion-positive thyroid cancer who require systemic therapy following prior treatment with sorafenib and/or lenvatinib [SMC 2370, Sept 2021]<br>- adults and adolescents 12 years and older with advanced RET-mutant medullary thyroid cancer who require systemic therapy following prior treatment with cabozantinib and/or vandetanib [SMC 2370, Sept 2021]<br>- treatment-naïve adults with advanced RET fusion-positive NSCLC who have not previously received a RET-inhibitor or any other systemic treatments for their advanced stage of disease [SMC 2573, Nov 2023] | Routinely available in line with national guidance, on an interim basis subject to ongoing evaluation and future reassessment,<br>SMC 2370 and SMC 2573 | 17/03/2026 |
| spironolactone 25mg, 50mg, 100mg tablets | 484/25 | [Off-label use] for the treatment of adult females with persistent acne.<br>**Restriction:** patients who have failed to respond to two courses of antibiotics, at least 3 months in duration. | Decision deferred to future meeting | 17/03/2026 |
| sulfadiazine silver 1% cream (Flamazine®) | | - for the prophylaxis and treatment of infection in burn wounds.<br>- as an aid to the short-term treatment of infection in leg ulcers and pressure sores, and as an aid to the prophylaxis of infection in skin graft donor sites and extensive abrasions.<br>- for the conservative management of finger- tip injuries where pulp, nail loss and/or partial loss of the distal phalanx has occurred | This medicine is now withdrawn from use/discontinued | 17/03/2026 |

| Name | Unique identifier | Condition being treated | NHS Grampian decision | Date of decision |
|---|---|---|---|---|
| vorasidenib 10mg, 40mg film-coated tablets (Voranigo®) | 2844 | For the treatment of Grade 2 astrocytoma or oligodendroglioma with a susceptible isocitrate dehydrogenase-1 (IDH1) mutation or isocitrate dehydrogenase-2 (IDH2) mutation in adults and paediatric patients 12 years and older, who are not in need of immediate chemotherapy or radiotherapy following surgical intervention. | Not routinely available as the ADTC is waiting for further advice from local clinical experts | 17/03/2026 |
| zilucoplan 16.6mg, 23mg, 32.4mg solution for injection in pre-filled syringe (Zilbrysq®) | 2830 | As an add-on to standard therapy for the treatment of generalised myasthenia gravis (gMG) in adult patients who are anti-acetylcholine receptor (AChR) antibody positive. | Not routinely available as not recommended for use in NHS Scotland,<br>SMC 2830<br>https://scottishmedicines.org.uk/media/9888/zilucoplan-zilbrysq-final-feb-2026-for-website.pdf | 17/03/2026 |