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?

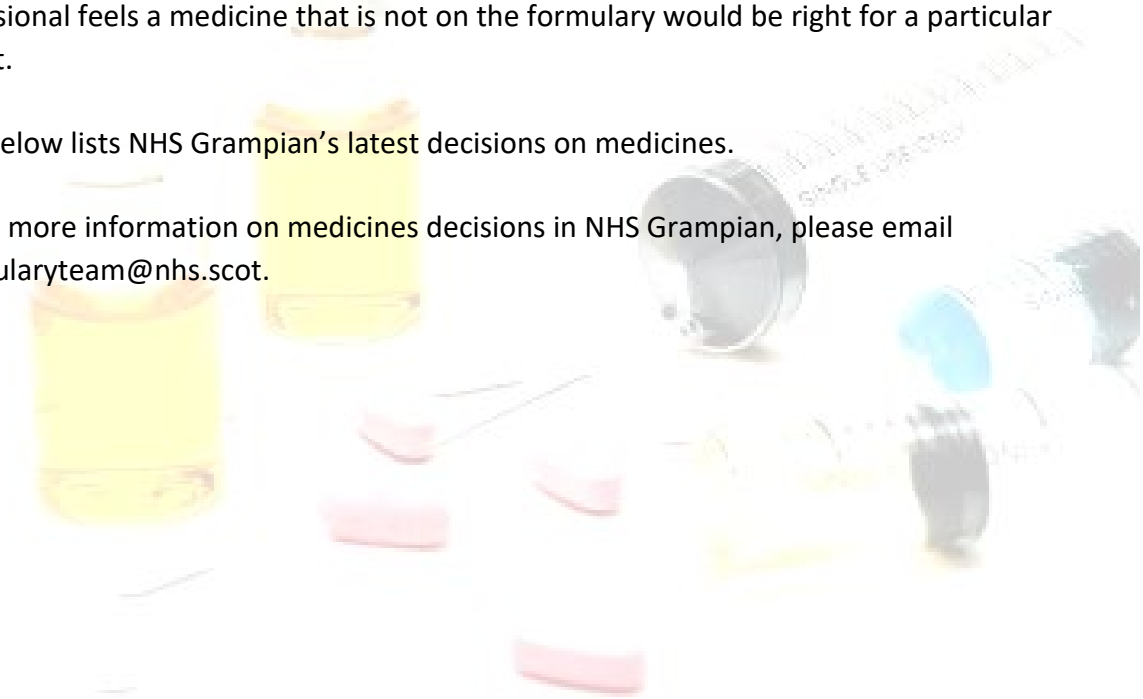
- This is usually because the medicine is not recommended for use in NHS Scotland by the SMC.
- The medicine may not be routinely available in a health board, particularly in smaller health boards, because there is not a suitable specialist who may use the medicine.
- There may also be differences as 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.



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
arsenic trioxide 1mg/mL concentrate for solution for infusion	127	[off-label use] in combination with all-trans retinoic acid (ATRA [tretinoin]) for the treatment of high-risk acute promyelocytic leukaemia.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	18/08/2026
avapritinib 25mg, 50mg, 100mg, 200mg, 300mg film-coated tablets (Ayvakyt®)	2849	As monotherapy for the treatment of adult patients with aggressive systemic mastocytosis (ASM), systemic mastocytosis with an associated haematological neoplasm (SM-AHN), or mast cell leukaemia (MCL).	Not routinely available as not recommended for use in NHS Scotland, SMC 2849 https://scottishmedicines.org.uk/media/10458/avapritinib-ayvakyt-final-june-2026-for-website.pdf	18/08/2026
benralizumab 30mg solution for injection in pre-filled pen (Fasenra®)	2870	As an add-on treatment for adult patients with relapsing or refractory eosinophilic granulomatosis with polyangiitis (EGPA).	Not routinely available as the ADTC is waiting for further advice from local clinical experts	18/08/2026
budesonide 4mg modified release hard capsules (Kinpeygo®)	2814	Treatment of adults with primary immunoglobulin A nephropathy (IgAN) with a urine protein excretion ≥1.0 g/day (or urine protein-to-creatinine ratio ≥0.8 g/g*). *equivalent to ≥90 mg/mmol	Routinely available in line with national guidance, SMC 2814 https://scottishmedicines.org.uk/media/10274/budesonide-kinpeygo-final-april-2026-for-website.pdf	18/08/2026
cabozantinib 20mg, 40mg, 60mg film-coated tablets (Cabozantinib Ipsen®)	2967	For the treatment of adult patients with unresectable or metastatic, well-differentiated extra-pancreatic (epNET) and pancreatic (pNET) neuroendocrine tumours who have progressed following at least one prior systemic therapy other than somatostatin analogues.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	18/08/2026
calcitriol 3micrograms/g ointment (Silkis®)		Topical treatment of mild to moderately severe plaque psoriasis (psoriasis vulgaris) with up to 35% of body surface area involvement.	This medicine is now withdrawn from use/discontinued	18/08/2026
denosumab 120mg/1.7mL solution for injection vials (Jubereq®)		In line with current formulary acceptance for the reference product Xgeva®.	Routinely available in line with local guidance	18/08/2026
dequalinium chloride 10mg vaginal tablets (Fluomizin®)		For the treatment of bacterial vaginosis.	This medicine is now withdrawn from use/discontinued	18/08/2026

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
dostarlimab 500mg concentrate for solution for infusion (Jemperli®)	2953	In combination with platinum-containing chemotherapy for the treatment of adult patients with 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	18/08/2026
durvalumab 50mg/mL concentrate for solution for infusion (Imfinzi®)	2880	In combination with gemcitabine and cisplatin as neoadjuvant treatment, followed by durvalumab as monotherapy adjuvant treatment after radical cystectomy, for the treatment of adults with resectable muscle invasive bladder cancer (MIBC).	Not routinely available as the ADTC is waiting for further advice from local clinical experts	18/08/2026
efgartigimod alfa 1,000mg solution for injection (Vyvgart®)	2964	As monotherapy for the treatment of adult patients with progressive or relapsing active chronic inflammatory demyelinating polyneuropathy (CIDP) after prior treatment with corticosteroids or immunoglobulins.	Not routinely available as not recommended for use in NHS Scotland, SMC 2964 https://scottishmedicines.org.uk/media/10611/efgartigimod-alfa-vyvgart-non-sub-final-july-2026-for-website.pdf	18/08/2026
elinzanetant 60mg soft capsules (Lynkuet®)	2965	Treatment of moderate to severe vasomotor symptoms (VMS) associated with menopause.	Not routinely available as not recommended for use in NHS Scotland, SMC 2965 https://scottishmedicines.org.uk/media/10612/elinzanetant-lynkuet-non-sub-final-july-2026-for-website.pdf	18/08/2026
enfortumab vedotin 20mg, 30mg powder for concentrate for solution for infusion (Padcev®)	2842	In combination with pembrolizumab, for the first-line treatment of adults with unresectable or metastatic urothelial cancer who are eligible for platinum-containing chemotherapy. Treatment with pembrolizumab is subject to a two-year clinical stopping rule.	Routinely available in line with national guidance, SMC 2842 https://scottishmedicines.org.uk/media/10267/enfortumab-vedotin-padcev-final-april-2026-amended-210426-for-website.pdf	18/08/2026
fezolinetant 45mg film-coated tablets (Veoza®)	2898	For the treatment of moderate to severe vasomotor symptoms (VMS) associated with menopause. **SMC restriction**: for use in patients for whom hormone replacement therapy (HRT) is not deemed suitable.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	18/08/2026

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
glofitamab 2.5mg, 10mg concentrate for solution for infusion (Columvi®)	2846	In combination with gemcitabine and oxaliplatin for the treatment of adult patients with relapsed or refractory diffuse large B-cell lymphoma not otherwise specified (DLBCL NOS) who are ineligible for autologous stem cell transplant (ASCT). **SMC restriction**: restricted to patients who have progressed during or after one systemic therapy only (that is, for patients in the second line setting).	Not routinely available as the ADTC is waiting for further advice from local clinical experts	18/08/2026
Harvoni® 33.75mg/150mg, 45mg/200mg coated granules in sachet (ledipasvir/ sofosbuvir)		For the treatment of chronic hepatitis C (CHC) in adult and paediatric patients aged 3 years and above.	This medicine is now withdrawn from use/discontinued	18/08/2026
Lecigon® 20mg/mL + 5mg/mL + 20mg/mL (levodopa/ carbidopa/ entacapone) intestinal gel	2876	Treatment of advanced Parkinson's disease with severe motor fluctuations and hyperkinesia or dyskinesia when available oral combinations of Parkinson medicinal products have not given satisfactory results. **SMC restriction**: for use in patients not eligible for deep brain stimulation (DBS).	Not routinely available as the ADTC is waiting for further advice from local clinical experts	18/08/2026
ledipasvir/ sofosbuvir Gilead 45mg/200 mg film-coated tablets (previously known as Harvoni®)		For the treatment of chronic hepatitis C (CHC) in adult and paediatric patients aged 3 years and above.	This medicine is now withdrawn from use/discontinued	18/08/2026
Levemir® FlexPen 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	18/08/2026
Levemir® Penfill 100units/mL solution for injection cartridge (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	18/08/2026

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
lutetium (177Lu) vipivotide tetraxetan solution for injection or infusion (Pluvicto®)	2966	Treatment of adult patients with prostate-specific membrane antigen (PSMA)-positive metastatic castration-resistant prostate cancer (mCRPC) who have progressed on or after treatment with androgen receptor pathway inhibitor (ARPI) therapy and are considered appropriate to delay taxane-based chemotherapy.	Not routinely available as not recommended for use in NHS Scotland, SMC 2966 https://scottishmedicines.org.uk/media/10614/lutetium-177lu-vipivotide-tetraxetan-pluvicto-non-sub-final-july-2026-for-website.pdf	18/08/2026
Mucogel® suspension 195mg/220mg (magnesium hydroxide/aluminium hydroxide)		In adults and children aged 12 years and older: - antacid therapy in gastric and duodenal ulcer, gastritis, heartburn, gastric hyperacidity - treatment of indigestion - relief of symptoms of heartburn and dyspepsia associated with gastric reflux in hiatus hernia, reflux oesophagitis and similar conditions.	This medicine is now withdrawn from use/discontinued	18/08/2026
nemolizumab 30mg powder and solvent for solution for injection in pre-filled pen (Nemluvio®)	2833	For the treatment of moderate-to-severe atopic dermatitis in combination with topical corticosteroids and/or calcineurin inhibitors in adults and adolescents 12 years and older with a body weight of at least 30kg, who have had an inadequate response to an existing systemic immunosuppressant such as ciclosporin, or in whom such treatment is considered unsuitable and where a biologic would otherwise be offered.	Routinely available in line with national guidance, SMC 2833 https://scottishmedicines.org.uk/media/9967/nemolizumab-nemluvio-ad-final-march-2026-amended-020426-for-website.pdf	18/08/2026
pazopanib 200mg, 400mg film-coated tablets	128	For the treatment of adult patients with selective subtypes of advanced soft tissue sarcoma who have received prior chemotherapy for metastatic disease or who have progressed within 12 months of (neo) adjuvant therapy.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	18/08/2026
quinagolide 25micrograms, 50micrograms, 75micrograms tablets		Hyperprolactinaemia (idiopathic or originating from a prolactin-secreting pituitary microadenoma or macroadenoma).	This medicine is now withdrawn from use/discontinued	18/08/2026

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
semaglutide 1.5mg, 4mg, 9mg, 25mg tablets (Wegovy®)		As an adjunct to a reduced-calorie diet and increased physical activity for weight management, including weight loss and weight maintenance, in adults with an initial Body Mass Index (BMI) of: • ≥30 kg/m^2 (obesity), or • ≥27 kg/m^2 to <30 kg/m^2 (overweight) in the presence of at least one weight-related comorbidity.	Not routinely available in NHS Grampian	18/08/2026
sodium zirconium cyclosilicate 5g, 10g powder for oral suspension (Lokelma®)	2884	Treatment of hyperkalaemia in adult patients. **SMC restriction**: patients with persistent hyperkalaemia (defined as a serum potassium of 5.5 to 6.0 mmol/L) with chronic kidney disease (CKD) stage 3b to 5 and/or heart failure, who would otherwise need to down-titrate or discontinue their renin-angiotensin-aldosterone system inhibitor (RAASi) therapy to maintain a clinically acceptable serum potassium level (normokalaemia).	Not routinely available as the ADTC is waiting for further advice from local clinical experts	18/08/2026
sparsentan 200mg, 400mg film-coated tablet (Filspari®)	2847	For the treatment of adults with primary immunoglobulin A nephropathy (IgAN) with a urine protein excretion ≥1.0g/day (or urine protein-to-creatinine ratio ≥0.75g/g*) whose condition has not responded adequately to current standard of care that is; maximally tolerated angiotensin converting enzyme inhibitor or angiotensin receptor blocker and sodium-glucose cotransporter-2 inhibitor, as appropriate. Patients should stop sparsentan at week 24 if no response to treatment. *equivalent to ≥85 mg/mmol	Routinely available in line with national guidance, SMC 2847 https://scottishmedicines.org.uk/media/10358/sparsentan-filspari-final-may-2026-for-website.pdf	18/08/2026

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
standardised allergen extract from the house dust mites Dermatophagoides pteronyssinus and Dermatophagoides farinae sublingual lyophilisate (Acarizax®)	2885	In adult patients (18-65 years) diagnosed by clinical history and a positive test of house dust mite sensitisation (skin prick test and/or specific immunoglobulin E (IgE) with at least one of the following conditions: - persistent moderate to severe house dust mite allergic rhinitis despite use of symptom-relieving medication - house dust mite allergic asthma not well controlled by inhaled corticosteroids and associated with mild to severe house dust mite allergic rhinitis. Patients' asthma status should be carefully evaluated before the initiation of treatment. **SMC restriction**: persistent moderate to severe house dust mite allergic rhinitis despite use of symptom-relieving medication.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	18/08/2026
tebentafusp 200micrograms/mL concentrate for solution for infusion (Kimmtrak®)	2910	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 the ADTC is waiting for further advice from local clinical experts	18/08/2026
tocilizumab 162mg solution for injection in pre-filled pen/syringe (Avtozma®)		In line with current NHSG formulary acceptance for subcutaneous tocilizumab used in the adult rheumatology service.	Routinely available in line with local guidance	18/08/2026
upadacitinib 15mg prolonged-release tablets (Rinvoq®)	2879	For the treatment of giant cell arteritis in adult patients. **SMC restriction**: for use in patients where tocilizumab is unsuitable, not tolerated or has failed.	Not routinely available as the ADTC is waiting for further advice from local clinical experts	18/08/2026

Name	Unique identifier	Condition being treated	NHS Grampian decision	Date of decision
zilucoplan 16.6mg, 23mg, 32.4mg solution for injection in prefilled syringe (Zilbrysq®)	2955	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. **SMC restriction**: for adult patients with refractory anti-AChR antibody positive gMG if: - the disease has not responded adequately to corticosteroids and at least two other treatments including non-steroidal immunosuppressive therapies (NSISTs) and rituximab, or these options are contraindicated or not tolerated, and - the disease is uncontrolled, as defined by a Myasthenia Gravis-Activities of Daily Living (MG-ADL) score of six or greater or a Quantitative Myasthenia Gravis (QMG) score of 12 or greater, and - patients are being considered for, or treated with, maintenance intravenous immunoglobulin (IVIg) or plasma exchange (PLEX)	Not routinely available as the ADTC is waiting for further advice from local clinical experts	18/08/2026