

Prescribing and Formulary Panel

5pm Tuesday November 15th 2022 Oak MDT Room

Minutes

Members Present

Geraldine O’Riordan, Prescribing Advisor and Chair
Andrew Ward, Hospital Pharmacy Services Manager /NMP representative
Beverley Hall, Chief Pharmacist, States of Guernsey (Visiting Member)
Peter Rabey, Medical Director and representative of States-employed doctors
Paul Williams, Island Health Medical Practice
Douglas Wilson, Queens Road Medical Practice
Mike McCarthy, Healthcare Group
Peter Gomes, Medical Specialist Group
Tom Saunders, Medical Specialist Group
Alex Hawkins-Drew, Public Health (for Avian Influenza item)
Liz Dorey, Consultant Nurse Palliative Care (for Anticipatory Prescribing Item)

Apologies

Paul Williams, Island Health Medical Practice
Douglas Wilson, Queens Road Medical Practice

- Draft minutes of the October 2022 meeting were approved.
- **PHE Managing the human health risk of avian influenza in poultry and wild birds**

Alex Hawkins-Drew provided an update on local situation with respect to avian ‘flu. If an outbreak occurs in a commercial farm the birds may need to be slaughtered. Pre- and post-exposure prophylaxis with oseltamivir will be required for the people involved. After a discussion it was agreed that the dispensing, or supply in the case of States-employed staff, would be Occupational Health provision from the ‘flu pandemic stock at PEH pharmacy and could be provided in advance with instructions of how to take, and when to take. There will be a requirement to have access to supplies for farm workers also, numbers TBC, via occupational health provision or the patients GP stock could be accessed via PEH or from Community Pharmacies.

- **New Drugs**

1. Pembrolizumab TA737

A paper on Pembrolizumab in oesophageal and gastro-oesophageal junction adenocarcinoma according to TA737 was considered. The benefits in terms of outcomes reported were modest in the trial patients and the cost high, making the

ICER per QALY gained above the threshold of affordability set for NICE TAs by the States of Guernsey. After a discussion and with regret the request was declined unanimously.

GOR said that the two year review on the NICE TA project is due to begin in 2023 and the threshold will be reconsidered.

- **Minor and/or cost-neutral additions or changes to the Prescribing List or the Hospital Formulary were approved**

1. Vedolizumab 108 mg solution for injection in pre-filled syringe: which is a new formulation for maintenance, for PEH pharmacy dispensing only
2. Oseltamivir oral solution: remove “special order”, it is now available as a licensed and much better value product.

Action : GOR

- **New NICE TA** attached for information

TA837 Pembrolizumab for melanoma with an ICER per QALY gained £20,000 was approved.

Action : GOR

- **Guidelines for update**

1. **Short Burst Oxygen Therapy (SBOT) for cluster headaches:**

V4 of this guideline was presented. It was noted that the Locum Consultant Neurologist is happy for GPs to contact him for advice about new patients presenting with cluster headache for the first time. For initiation of SBOT, if treatment with triptans has not been effective, the Consultant can be contacted (via PEH Switchboard, email or letter) for advice. If unavailable SBOT can be prescribed. It is recommended that all GP practices have a lead GP. After a discussion the guideline was approved.

Action : GOR

2. **Anticipatory Prescribing** : LD answered questions about this guideline.

- **Black Triangle Drugs:** no change
- **DOAC Prescribing** : no developments to report on the availability of better value generic versions of apixaban.
- **New NMPs** : none
- **AOB**

1. AW reported that the Southampton Anti-infective Guidelines will now become organisational policy following the cessation of support from Birmingham. GOR said that the new guidelines will need to be added to Microguide and the document checked. NICE now produces many guidelines on the topic that are widely used, so it is unlikely that there will be much difference between the two sets of guidelines.
2. GOR said that some concerns were expressed by Community Pharmacies about prescribing for people who become NBM or who are unable to swallow tablets. Prescriptions stating “all in liquids” have been presented without the prescriber checking what liquids are on the prescribing list. This takes up a lot of pharmacists’ time. Unlicensed specials had been a huge cost pressure, which took a long time to resolve. Prescribers are earnestly requested to review treatment regimes and to stop all but clinically essential treatments. TS agreed, but noted that more pharmacy advice and support would help a lot. GOR will write to all prescribers to advise as above.

Action : GOR

- **Date of next meeting Tuesday December 6th 2022**