Formulary Adherence Checklist for NICE Technology Appraisals About Medicines



Pan Mersey
Area Prescribing Committee

This spreadsheet is updated monthly and details Pan Mersey APC adherence to current NICE Technology Appraisals. All guidelines refer to adults unless indicated.

Technology appraisal (TA) Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	Adherence of local formulary to NICE					
		,	Yes (mark 'x' if applicable)	N/A (mark 'x' if applicable)	Date of APC website upload	Time to implement (days)	Notes (e.g. rationale, method of making available)	
2014-15								
Empagliflozin in combination therapy for treating type 2 diabetes (TA 336)	25/03/2015	Empagliflozin - an option in combination with other treatments for some patients with type 2 diabetes.	Х		30/04/2015	36	Pan Mersey GREEN policy statement APPROVED 29/04/15	
Pomalidomide for relapsed and refractory multiple myeloma previously treated with lenalidomide and bortezomib (TA 338)	25/03/2015	Pomalidomide - not recommended, in combination with dexamethasone, for treating relapsed and refractory multiple myeloma in adults who have had at least 2 previous treatments, including lenalidomide and bortezomib, and whose disease has progressed on the last thereby	x		27/03/2015	2	NHSE commissioned. Link added to formulary 27/03/15	
Rifaximin for preventing episodes of overt hepatic encephalopathy (TA 337)	25/03/2015	Rifaximin - an option for reducing the recurrence of episodes of overt hepatic encephalopathy	Х		30/04/2015		Pan Mersey AMBER RETAINED policy statement approved 29/04/15	
Rivaroxaban for preventing adverse outcomes after acute management of acute coronary syndrome (TA 335)	25/03/2015	Rivaroxaban - an option, in combination with aspirin plus clopidogrel or aspirin alone, for preventing atherothrombotic events in people who have had an acute coronary syndrome with elevated cardiac biomarkers. Treatment should only be started after careful assessment of bleeding risk and informed discussion between clinician and patient of benefits and risks. Treatment should be reviewed no later than 12 months after starting. Clinicians should regularly reassess the relative benefits and risks of continuing treatment with rivaroxaban and discuss them with the	x		30/04/2015		Pan Mersey AMBER INITIATED policy statement approved 29/04/15	
Axitinib for treating advanced renal cell carcinoma after failure of prior systemic treatment (TA 333)	25/02/2015	Axitinib - an option for treatment of advanced renal cell carcinoma after failure with a first-line tyrosine kinase inhibitor, e.g. sunitinib, or a cytokine, only if the drug is provided with the discount agreed in the patient access scheme. If it is considered for use after any other first-line treatments, the prescriber should obtain patient's written consent and follow General Medical Council guidance on prescribing unlicensed medicines. Use after tyrosine kinase inhibitors other than sunitinib is not subject to statutory funding.	x		27/03/2015	30	NHSE commissioned. Link added to formulary 27/03/15	

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2014-15								
Infliximab, adalimumab and golimumab for treating moderately to severely active ulcerative colitis after the failure of conventional therapy (including a review of TA140 and TA262) (TA 329)		Infliximab, adalimumab, golimumab - all options for treatment of moderately to severely active ulcerative colitis in adults whose disease has responded inadequately to, or who cannot tolerate or have medical contraindications to, conventional therapy. Golimumab only recommended if the 100 mg dose is provided at same cost as the 50 mg dose, as agreed in the patient access scheme. Infliximab also an option for children and young people aged 6-17 years. Treatment should be continued for at least 12 months, unless it fails. Specialists should then discuss the benefits and risks of continuing or stopping treatment. Treatment should only be continued if there is clear evidence of response. Treatment should be reassessed at least every 12 months. A trial withdrawal should be considered for patients in stable clinical remission. People whose disease relapses after treatment is stopped should have the option to start treatment again.	x		26/03/2015	29	Pan Mersey RED Policy statement approved 25/03/15	
Regorafenib for metastatic colorectal cancer after treatment for metastatic disease (TA 334)	25/02/2015	Regorafenib - unable to recommend NHS use because no evidence received from manufacturer (Terminated Appraisal).		х			Terminated Appraisal	
Simeprevir in combination with peginterferon alfa and ribavirin for treating genotypes 1 and 4 chronic hepatitis C (TA 331)		Simeprevir - an option, in combination with peginterferon alfa and ribavirin, for treatment of genotypes 1 or 4 chronic hepatitis C.	Х		06/03/2015	9	NHSE commissioned. Link added to formulary 06/03/15	
Sipuleucel-T for treating asymptomatic or minimally symptomatic metastatic hormone-relapsed prostate cancer (TA 332)		Sipuleucel-T - not recommended as a treatment for asymptomatic or minimally symptomatic metastatic non-visceral hormone-relapsed prostate cancer when chemotherapy is not yet suitable.	х		09/03/2015	12	NHSE commissioned. Link added to formulary 09/03/15	
Sofosbuvir for treating chronic hepatitis C (TA 330)		Sofosbuvir - an option, in combination with peginterferon alfa and ribavirin, or with ribavirin alone, for the treatment for adults with certain genotypes of chronic hepatitis C.	х		06/03/2015		NHSE commissioned. Link added to formulary 06/03/15	
Dabigatran etexilate for the treatment and secondary prevention of deep vein thrombosis and/or pulmonary embolism (TA327)		Dabigatran etexilate - an option for treatment and for secondary prevention of recurrent DVT and PE	х		29/01/2015	43	Pan Mersey AMBER Policy Statement approved 28/01/15	
Idelalisib for treating follicular lymphoma that is refractory to 2 prior treatments (terminated appraisal) (TA328)	31/12/2014	Idelalisib - unable to recommend NHS use because no evidence received from manufacturer		Х			Terminated Appraisal	

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2014-15								
Nalmefene for reducing alcohol consumption in people with alcohol dependence (TA325)	30/11/2014	Nalmefene - an option for reducing alcohol consumption, for people with alcohol dependence who have a high drinking risk level without physical withdrawal symptoms and who do not require immediate detoxification. Should only be prescribed in conjunction with continuous psychosocial support and	х		29/01/2015	60	Pan Mersey AMBER Policy Statement approved 28/01/15	
Erythropoiesis-stimulating agents (epoetin and darbepoetin) for treating anaemia in people with cancer having chemotherapy (including review of TA142) (TA323)	26/11/2014	Erythropoiesis-stimulating agents (epoetin alfa, beta, theta and zeta, and darbepoetin alfa) - options for treating anaemia in people with cancer who are having chemotherapy. If different agents are equally suitable, the product with the lowest cost should be used.	x		27/11/2014	1	NHSE commissioned. Link added to formulary 27/11/14	
Imatinib for the adjuvant treatment of gastrointestinal stromal tumours (review of TA196) (TA326)	26/11/2014	Imatinib - an option as adjuvant treatment for up to 3 years for adults who are at high risk of relapse after surgery for KIT (CD117)-positive gastrointestinal stromal tumours, as defined by the Miettinen 2006 criteria.	x		27/11/2014	1	NHSE commissioned. Link added to formulary 27/11/14	
Dabrafenib for treating unresectable or metastatic BRAF V600 mutation-positive melanoma (TA321)	22/10/2014	Dabrafenib - an option for treating unresectable or metastatic BRAF V600 mutation-positive melanoma only if the manufacturer provides the medicine with the discount agreed in the patient access scheme.	x		23/10/2014	1	NHSE commissioned. Link added to formulary 23/10/14	
Lenalidomide for treating myelodysplastic syndromes associated with an isolated deletion 5q cytogenetic abnormality (TA322)	24/09/2014	Lenalidomide - an option for treating transfusion-dependent anaemia caused by low or intermediate-1 risk myelodysplastic syndromes associated with an isolated deletion 5q cytogenetic abnormality when other options are insufficient or inadequate, with the proviso that the cost of the drug (excluding any related costs) for people who remain on treatment for more than 26 cycles will be met by the company.	x		23/10/2014	29	NHSE commissioned. Link added to formulary 23/10/14	

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2014-15								
Dimethyl fumarate for treating relapsing-remitting multiple sclerosis (TA320)	27/08/2014	Dimethyl fumarate - an option for treating adults with active relapsing-remitting multiple sclerosis (normally defined as 2 clinically significant relapses in the previous 2 years), only if they do not have highly active or rapidly evolving severe relapsing-remitting multiple sclerosis and the manufacturer provides the medicine with the discount agreed in the patient access scheme.			05/09/2014	9	NHSE commissioned. Link added to formulary 05/09/14	
Ipilimumab for previously untreated advanced (unresectable or metastatic) melanoma (TA319)	23/07/2014	Ipilimumab - an option, within its marketing authorisation, for treating adults with previously untreated advanced (unresectable or metastatic) melanoma, only if the manufacturer provides ipilimumab with the discount agreed in the patient access scheme.	х		24/07/2014	1	NHSE commissioned. Link added to formulary 24/07/14	
Lubiprostone for treating chronic idiopathic constipation (TA318)	23/07/2014	Lubiprostone - an option for adults with chronic idiopathic constipation in whom treatment with at least 2 laxatives from different classes, at the highest tolerated recommended doses for at least 6 months, has failed to provide adequate relief and for whom invasive treatment for constipation is being considered.	х		15/09/2014	54	Pan Mersey GREEN Policy Statement approved virtually and circulated 15/09/14	
Prasugrel with percutaneous coronary intervention for treating acute coronary syndromes (review of technology appraisal guidance 182) (TA317)	23/07/2014	Prasugrel 10mg - an option, in combination with aspirin, for preventing atherothrombotic events in adults with acute coronary syndrome (unstable angina, non-ST segment elevation myocardial infarction or ST segment elevation myocardial infarction) having primary or delayed percutaneous coronary intervention.	х		15/09/2014	54	Pan Mersey AMBER Policy Statement approved virtually and circulated 15/09/14	
Enzalutamide for metastatic hormone-relapsed prostate cancer previously treated with a docetaxel-containing regimen (TA316)	23/07/2014	Enzalutamide - an option, within its marketing authorisation, for metastatic hormone-relapsed prostate cancer in adults whose disease has progressed during or after docetaxel-containing chemotherapy, only if the manufacturer provides enzalutamide with the discount agreed in the patient access scheme.	х		24/07/2014	1	NHSE commissioned. Link added to formulary 24/07/14	
Canagliflozin in combination therapy for treating type 2 diabetes (TA315)	25/06/2014	Canagliflozin - an option in combination with other treatments for some patients with type 2 diabetes.	х		31/07/2014	36	Pan Mersey GREEN Policy Statement approved 30/07/14	
Psoriatic arthritis (active) - ustekinumab (TA313)	28/05/2014	Ustekinumab - not recommended alone or with methotrexate for adults when the response to previous non-biological disease-modifying antirheumatic drug therapy has been inadequate.	х		26/06/2014	29	Pan Mersey BLACK Policy Statement approved 25/06/14	

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2014-15								
Multiple sclerosis (relapsing-remitting) - alemtuzumab (TA312)	28/05/2014	Alemtuzumab - an option for adults with active relapsing-remitting multiple sclerosis.	х		02/06/2014	5	NHSE commissioned. Link added to formulary 02/06/14	
Multiple myeloma - bortezomib (induction therapy) (TA311)	23/04/2014	Bortezomib - an option, in combination with dexamethasone, or with dexamethasone and thalidomide, for the induction treatment of adults with previously untreated multiple myeloma, who are eligible for high-dose chemotherapy with haematopoietic stem cell transplantation.	х		24/04/2014	1	NHSE commissioned. Link added to formulary 24/04/14	
Lung cancer (non small cell, EGFR mutation positive) - afatinib (TA310)	23/04/2014	Afatinib - an option for adults with locally advanced or metastatic non-small-cell lung cancer only if they have the EGFR-TK mutation and have not had an EGFR-TK inhibitor previously and the drug is provided at the discount agreed in the patient access scheme.	х		24/04/2014	1	NHSE commissioned. Link added to formulary 24/04/14	
Lung cancer (non small cell, non squamous) - pemetrexed (TA309)	23/04/2014	Pemetrexed - not recommended as maintenance treatment for locally advanced or metastatic non-squamous non-small-cell lung cancer in people whose disease has not progressed immediately following induction therapy with pemetrexed and cisplatin.	х		24/04/2014	1	NHSE commissioned. Link added to formulary 24/04/14	
			26	2				
			% "Yes"	% "N/A"	-	Average implement time (days)		
Adherence statistics for 2014-15			100%	100%		20		

Adapted from original document produced by East & South East England Specialist Pharmacy Services and Wessex Academic Health Science Network