

## PAN MERSEY AREA PRESCRIBING COMMITTEE MEETING

Minutes of the Meeting held on Wednesday 26 November 2014 in The Gallery Room, at The Venue, Civic Way, off Poplar Bank, Huyton L36 9GD

**Present:**

MEMBERS		Present	Apologies
Dr M G Semple (Chair)	Senior Lecturer in Child Health – Alder Hey Children’s NHS Foundation Trust	X	
Isam Badhawi	Senior Pharmacist – Liverpool Women’s NHS Foundation Trust		X
Catrin Barker	Chief Pharmacist – Alder Hey Children’s NHS Foundation Trust	X	
Dr Rob Barnett	LMC Representative, Liverpool		X
Nicola Baxter	Head of Medicines Optimisation – West Lancs CCG	X	
Alison Butt	Joint Head of Medicines Management - Liverpool Community Health		X
Dr Catherine Doyle	Clinical Lead Medicines Management – Warrington CCG	X	
Dr Janice Eldridge	GP Medicines Management Lead – Southport & Formby CCG	X	
Alison Ewing	Clinical Director Pharmacy – The Royal Liverpool & Broadgreen University Hospitals NHS Trust		X
Dr Anna Ferguson	GP Clinical Lead – South Sefton CCG	X	
Dr Claire Forde	CCG Governing Body Member, Prescribing Lead – Halton CCG		X
Simon Gelder	Chief Pharmacist – St Helens & Knowsley Teaching Hospitals NHS Trust	X	
Margaret Geoghegan	Head of Medicines Management – St Helens CCG	X	
Donna Gillespie-Greene	Deputy Head of Meds Management – Cheshire and Merseyside Commissioning Support Unit	X	
Gillian Gow	Chief Pharmacist – Liverpool Heart & Chest Hospital NHS Foundation Trust	X	
Maureen Hendry	Practice pharmacist/Interface support pharmacist, Liverpool Community Health (representing Alison Butt)	X	
Dr Aftab Hossain	Clinical Lead, Prescribing – Knowsley CCG	X	
Peter Johnstone	Prescribing Commissioner – Liverpool CCG	X	
Dr Cecilia Jukka	Consultant Microbiologist/Chair Drug & Therapeutics Committee – Southport & Ormskirk NHS Trust		X
Dr Tom Kennedy	Consultant at RLBUHT and Chair of D&T		X
Dr Tom Kinloch	LMC Representative , Mid-Mersey LMC		X
Lee Knowles	Chief Pharmacist – Mersey care NHS Trust		X
Jenny Lunn	Pharmaceutical Adviser & Team Lead, Medicines Management – Warrington CCG	X	
Susanne Lynch	CCG Lead Medicines Management – South Sefton CCG and Southport & Formby CCG	X	
Diane Matthew (Mina McFaul attending)	Chief Pharmacist, Warrington & Halton Hospitals NHS Foundation Trust		X
Dr Sid McNulty	Consultant Endocrinologist/Chair Drug & Therapeutics Committee – St Helens & Knowsley Teaching Hospitals NHS Trust	X	
Sarah McParland	Pharmacist – (representing Neil Chilton, 5 Boroughs Partnership NHS Trust)	X	

Dr Neil Mercer	Consultant Anaesthetist/Chair Drug & Therapeutics Committee – Aintree University Hospitals NHS Trust		X
Graham Pimblett	Medicines Management Team Leader – Knowsley CCG	X	
Lucy Reid (Jill Edwards attended)	Lead Pharmacist – Halton CCG Locality Medicines Management Team		X
Dr Shamim Rose	GP Prescribing Lead & Board Sponsor – Liverpool CCG		X
Steve Simpson	Deputy Chief Pharmacist – Southport and Ormskirk NHS Trust	X	
Paul Skipper	Deputy Director of Pharmacy – The Royal Liverpool & Broadgreen University Hospitals NHS Trust (representing Alison Ewing)	X	
Dave Thornton	Principal Pharmacist, Clinical Services – Aintree University Hospitals NHS Trust (representing Mags Norval)	X	
Heather Tomlinson	Senior Clinical Pharmacist – Bridgewater Community Healthcare NHS Trust	X	
Janet Walsh	Medicines Optimisation Pharmacist – West Lancs		X
Dr Julie Whittaker	St Helens CCG Governing Body Medicines Management Lead GP		X
<b>IN ATTENDANCE</b>			
Erika Baker	Senior Pharmacist – Cheshire & Merseyside CSU		X
Jill Edwards	Pharmacist – Halton CCG	X	
Anne Henshaw	Senior Pharmacist – Cheshire & Merseyside CSU		X
Mina McFaul	Attending on behalf of Diane Matthew	X	
Graham Reader	Senior Pharmacist – Cheshire & Merseyside CSU	X	
Helen Stubbs	Senior Pharmacist – Cheshire & Merseyside CSU	X	
Janeth Ward	Prescribing Adviser, MedsMan, Warrington CCG	X	

1	<p><b>APC/14/84 – Welcome and Apologies for Absence</b></p> <p>The Chair welcomed the members and accepted the apologies of the following:</p> <p>Dr Claire Forde, Dr Cecilia Jukka, Dr Shamim Rose, Lee Knowles, Dr. Neil Mercer, Alison Butt (Maureen Hendry attending), Alison Ewing (Paul Skipper attending), Diane Matthew (Mina McFaul attending), Lucy Reid (Jill Edwards attending), Anne Henshaw and Erika Baker.</p>	<b>Action:</b>
2	<p><b>APC/14/85 – Declarations of Interest and Quoracy Check</b></p> <p>A quoracy check confirmed that this meeting was quorate.</p> <p>There were no declarations of interest at this meeting.</p>	
3	<p><b>APC/14/86 – Minutes of the previous meeting and matters arising.</b></p> <p><b>14/86/01 – Minutes from the Previous Meeting</b></p> <p>The Minutes were agreed to be an accurate record of the previous meeting, once the following two amendments have been made.</p> <p>Item 14/79/07: Change spelling from 'lactose' to 'lactase'.</p> <p>Item 14/79/10 (a): Change wording from "...GPs that they should not be writing private prescriptions ..." to "...GPs that they need not write private prescriptions..."</p> <p><b>Matters Arising:</b></p> <p><b>14/86/02 – Update on EHC Pathway</b></p> <p>DGG reported that she had been in contact with Dr Sue Forster, Assistant Director of Public Health at St Helens Council, since the September meeting. This work is now being progressed by Helen Stubbs on behalf of Pan Mersey in collaboration with Dr Forster. It is likely to require not one but two pathways, as a result of the differences of commissioning of these services across the patch.</p> <p>The committee agreed.</p>	

	<p><b>14/86/03 – Meeting Etiquette</b> Feedback has been received about meeting behaviour. Members were reminded that some visitors or members may find this meeting to be an intimidating forum and therefore it would be useful to be mindful of the impression the committee gives. When external people come in to speak to this meeting, the nature should be of a general inquiry not an inquisition. The Chair will endeavour to interrupt members if he feels that the questioning is too strong. This is also an opportunity to think about how we work together and ensure that we behave in a professional manner to each other.</p> <p>DGG agreed to a request to produce guidelines about acceptable meeting behaviour, which will be included in the terms of reference. In addition, guest speakers are to be provided with an accurate brief giving a clear expectation of what is required by the Committee.</p> <p><b>14/86/04 – Letter to NICE re NOAC data</b> The letter was ratified this morning by Warrington CCG and Dr Doyle is now able to forward it to DGG.</p>	<p><b>DGG</b></p> <p><b>CD/ DGG</b></p>
4	<p><b>APC/14/87 – New Medicines</b> <b>14/87/01 – Grey Statement Summary</b> There is only one this month, for Rivaroxaban. The NICE TA is expected in March 2015. This has been brought to the meeting for information only.</p> <p><b>14/87/02 – NMSG processes for NICE TA's</b> This piece of work came about because, despite having an agreed process, the procedure when a NICE TA is delayed was not clear. JL talked through all 5 parts of the document and the committee agreed to each, in turn. The flow charts for the New Medicines Sub Group will now be updated. JL was asked about whether a note could be added to cover the situation where a review is being delayed because we are awaiting publication of other interacting NICE TAs. The NMSG will look at some suitable wording for this situation. This was approved by members.</p> <p><b>14/87/03 – Tapentadol immediate-release</b> The statement for Tapentadol immediate release tablets has been updated to read 'preparations' due to the availability of an oral solution, which has recently become available. No objections were raised to this amendment.</p>	
5	<p><b>APC/14/88 – Formulary and Guidelines</b> <b>14/88/01 – Formulary Chapter 2 (Cardiovascular) review, and statement removals</b> This section of the formulary has been reviewed. Alder Hey have added paediatric information regarding different RAG rating for children compared to adults where appropriate, and additional information in certain cases where no BNFC entry exists. The majority of comments received from the consultation process have been adopted.</p> <p>There were some stakeholder comments on the RAG rating of moxonidine. Overall the sub group felt it would be best to leave it as amber as it is not specifically included in NICE hypertension guideline and this was supported by the Committee. It was agreed to list diltiazem and nifedipine M/R products generically but not to list all brands. The link to omega 3 fatty acids in IgA nephropathy Black statement will be added. It was agreed to consistently refer to "unlicensed special" throughout the document as a variety of terms were used in the draft. It was agreed captopril and enalapril would be green for existing adult patients with a note they are not normal ACEI prescription choice for adult patients (and amber for paediatrics).</p> <p>The updated Chapter 2 section was approved with the above amendments and will be uploaded to the APC website in Netformulary format.</p> <p>Members approved the removal of statements from the legacy websites that were superseded by the update to Chapter 2 (ARB red statement, ARB + ACEI red statement, Sevikar and Sevikar HCT Black statements, atorvastatin chewable grey statement and ranolazine amber statement).</p> <p><b>14/88/02 – Formulary Chapter 1 (Gastroenterology) review</b> This section of the formulary has been reviewed. It does not include paediatric information due to workload considerations at Alder Hey in dealing with the volume of chapter reviews in the</p>	

	<p>given timescales. It was recommended by the FGSG and the Hospital Chief / CCG Lead Pharmacists that, rather than delay reviewed chapters, some reviewed chapters would come to the APC having not had paediatric information added and they will come back with the paediatric additions for approval as soon as possible as managed by the FGSG. The Committee supported this approach.</p> <p>Comments received from consultation process had generally been incorporated in the chapter. In particular domperidone and metoclopramide have been removed from this section of the BNF for use as motility stimulants due to MHRA warnings over risk : benefit balance in this indication. Ciclosporin and tacrolimus are included as red for UC and Crohn's in both acute and chronic management and it was agreed co-danthromer/danthrusate can now be rated green, not amber. Antacid and oxetecaine oral suspension added and wording re prucalopride restriction amended</p> <p>The committee approved the section as above and will be uploaded to the APC website in Netformulary format.</p> <p><b>14/88/03 – Formulary Chapter 4.7.4 (Migraine)</b> This chapter has had paediatric information incorporated. There has been specific consultation on RAG rating of domperidone in paediatrics, majority of opinion felt it should be amber. One consultee had felt that a number of prophylactic drugs could be green but in light of other comments most remained amber, other than amitriptyline which was changed to green. It was suggested that a GP would not be expected to write a Home Oxygen Order Form for cluster headache therefore it was agreed that 'or GP' would be deleted. MG agreed to look into whether CCGs were commissioning oxygen for cluster headache and DT agreed to ask the Walton Centre regarding this. Two minor wording changes were also agreed.</p> <p>The committee approved the section as above and it will be uploaded to the APC website in Netformulary format.</p> <p><b>14/88/04 – Desiccated Thyroid extracts black statement</b> GPs are sometimes being asked to prescribe desiccated thyroid which is an unlicensed product. There is no evidence of benefit over licensed thyroid products so FGSG recommended this should be a black drug and majority of consultee comments agreed that if an individual consultant felt there was a role for it rarely in individual patients prescribing should remain with the consultant. The committee approved the black statement.</p> <p><b>14/88/05 – Overactive bladder drug guideline</b> These guidelines are for men and women. The management of OAB in neurological disease is not covered. It was noted NICE only give first line recommendations not second line treatment because there have never been any trials once first line treatments have failed. The guideline also extrapolates choice of antimuscarinic drugs recommended in CG171 in women to men, as NICE CG97 in men does not specify which of this class of drugs is preferred in men and it was thought helpful to provide prescribers with local recommendations on this. A list of 1<sup>st</sup> and 2<sup>nd</sup> line antimuscarinic drugs which could be considered has been listed. JW explained the guidelines and pointed out the statement in the guideline on <i>Vesomni</i> (combination of solifenacin and tamsulosin) which states it is not recommended. This will replace the Vesomni grey statement and result in it being added as Black in the formulary. Minor amendments in style and layout will be made as suggested. The committee approved the guideline and addition of Black formulary entry for Vesomni.</p>	<p><b>MG/ DT</b></p>
<p>6</p>	<p><b>14/89 – Safety</b> <b>14/89/01 – Dexamethasone safety statement</b> The dose and volume are different for different brands so it was felt that there should be a safety statement to reflect the differences. Three products are available and at different doses per ml. The Aspen product must be stored in the fridge. DGG wanted to highlight these different brands are available for purchase. It was not known why there are different strengths.</p> <p>CB confirmed that Alder Hey Hospital has no issues with paediatric prescribing. The committee approved the statement.</p>	

7	<p><b>APC/14/90 – Shared Care</b>  <b>14/90/01 – Shared Care update</b></p> <p>The deadline for the shared care consultation feedback is 30 November. While some comments have been received, Helen Stubbs reminded those whose organisations have not given feedback, to do so by the end of this week.</p>	
8	<p><b>APC/14/91 – Any Other Business</b></p> <p><b>14/91/01 – AOB</b>  <b>Parking and APC Meeting Venue</b></p> <p>Following the car parking difficulties at the last APC Meeting, the Medicines Management team looked at alternative parking (for the short term) and forwarded a map to members. For the long term, Lee Knowles has investigated whether the V7 Room is available. It would appear that the only cost for the V7 Room would be for teas and coffees. DGG will now check if we have to honour our contract with this Huyton Civic Centre venue.</p> <p>All members agreed to DGG making further enquiries about this option.</p> <p><b>Chair</b></p> <p>Having occupied the position for two years, going forward, the Chair is keen to have a chair elect. Members were asked for expressions of interest for the Chair in January so that in March the process can be finalised. The Chair expressed the opinion that he feels that primary care should take the lead next but asked all members to give the matter due consideration. The committee confirmed their support of this proposal to record a chair elect in January.</p>	<p><b>Meds Man Team</b></p> <p><b>ALL</b></p>
9	<p><b>APC/14/92 Date, Time and Venue of the next meeting</b></p> <p>There will be <b>no meeting in December</b>. The next APC meeting will be on Wednesday 26 January 2015 at 1.30 – 3.30pm in The Gallery, The Venue, Civic Way, Poplar Bank, Huyton, L36 9GD</p>	

***The agenda and minutes of this meeting may be made available to public and persons outside of The Pan Mersey Area Prescribing Committee Health Community in order to comply with requests made under the Freedom of Information Act 2000.***