

Minutes

Meeting	Pan Mersey Area Prescribing Committee
Venue	Microsoft Teams online meeting
Date and time	Wednesday 29 July 2020, 2.00-3.30pm

Attendance		
AL-JAFFAR, Hannah	Southport and Ormskirk Hospital NHS Trust	Y
ATKINSON, Anna	Lancashire and South Cumbria NHS Foundation Trust	Y
BARKER, Catrin	Alder Hey Children's NHS Foundation Trust	Y
BARNETT, Rob Dr	Liverpool Local Medical Committee	Y
BARTON, Carolyn	NHS Knowsley CCG	Y
CAMPBOR, Ivan Dr	Mid Mersey Local Medical Committee	N
CARTWRIGHT, Nicola	NHS St Helens CCG	Y
CHILTON, Neil	North West Boroughs Healthcare NHS Foundation Trust	Y
COLLINS, Daniel	Liverpool Women's Hospital NHS Foundation Trust	N
CROSBY, John Dr	Mersey Care NHS Foundation Trust	N
CULLUMBINE, Ann Dr	Wirral Local Medical Committee	Y
DOYLE, Catherine Dr	NHS Warrington CCG	Y
EVANS, Alison	Wirral University Teaching Hospital NHS Foundation Trust	Y
FITZGERALD, Richard Dr	Liverpool University Hospitals NHS Foundation Trust (Royal)	Y
FORDE, Claire Dr	NHS Halton CCG	N
FORREST, Danny	Liverpool Heart and Chest Hospital NHS Foundation Trust	Y
HAWCUTT, Dan Dr	Alder Hey Children's NHS Foundation Trust	N
HAYES, Nicola	Warrington and Halton Hospitals NHS Foundation Trust	Y
HENSHAW, Anne	Midlands and Lancashire Commissioning Support Unit	Y
HUNTER, Anna Dr	NHS South Sefton CCG, Southport and Formby CCG	N
IRVINE, Adam	Cheshire and Merseyside Local Pharmaceutical Committee	Y
JAEGER, Emma	NHS Wirral CCG	Y

Attendance		
JAIN, Adit Dr CHAIR	NHS Knowsley CCG	Y
JALAN, Saket Dr	NHS Wirral CCG	N
JOHNSTONE, Peter	NHS Liverpool CCG	N
KNIGHT, Lisa	Wirral Community NHS Foundation Trust	N
KNOWLES, Lee	Mersey Care NHS Foundation Trust	N
LLOYD, Barry	NHS West Lancashire CCG	N
LUNN, Jenny	NHS Warrington CCG	N
LYNCH, Susanne	NHS South Sefton CCG, NHS Southport and Formby CCG	Y
McNULTY, Sid Dr	St Helens and Knowsley Teaching Hospitals NHS Trust	Y
MUNYIKA, Agatha	Mersey Care NHS Foundation Trust	Y
PARKER, James	Liverpool University Hospitals NHS Foundation Trust (Royal)	N
PHILLIPS, Eleri	The Walton Centre	Y
PHILLIPS, Kathryn	Bridgewater Community Healthcare NHS Foundation Trust	Y
RAFFERTY, Sarah	Mersey Care NHS Foundation Trust	N
REID, Lucy	NHS Halton CCG	Y
SAWERS, Claire	NHS Warrington CCG	Y
SHAIKH, Omar Dr	NHS St Helens CCG	Y
SKIPPER, Paul	Liverpool University Hospitals NHS Foundation Trust (Royal)	Y
SZYNALSKI, Jackie	Mersey Care NHS Foundation Trust, Community Services Division	Y
THORNTON, Dave	Liverpool University Hospitals NHS Foundation Trust (Aintree)	Y
VAN MIERT, Matthew Dr	Wirral University Teaching Hospitals NHS Foundation Trust	N
WELSBY, Mike	St Helens and Knowsley Teaching Hospitals NHS Trust	Y
WILLIAMS, John	Southport and Ormskirk Hospital NHS Trust	N
Non-voting		
DINGLE, Helen	Midlands and Lancashire Commissioning Support Unit	Y
GILLESPIE-GREENE, Donna	Midlands and Lancashire Commissioning Support Unit	Y
HALL, Gareth	Warrington CCG; Halton CCG	Y
MARSDEN, Ashley	North West Medicines Information Centre	Y
MORONEY, Tamsin	Midlands and Lancashire Commissioning Support Unit	Y
WILSON, Paula	Midlands and Lancashire Commissioning Support Unit	Y

1	Welcome and apologies	
	The Chair welcomed members and accepted apologies from the following: John Williams, Dr Anna Hunter, Sarah Rafferty (Agatha Munyika attending), Graham Reader, Jenny Lunn (Claire Sawers attending), Peter Johnstone, Sarah Quinn, James Parker (Paul Skipper attending) and Barry Lloyd.	
2	Declarations of interest and quoracy	
	A quoracy check confirmed that this meeting was quorate. There was one declaration of interest from DF for item 5.1 (rivaroxaban) on the agenda.	
3	APC Update	
3.1	<p>Resumption of APC activity</p> <p>CCG Lead pharmacists and Trust Chief pharmacists were presented with a number of options around resuming APC activity following the recent pause due to COVID-19. It was agreed that a “priority-driven” plan working to agreed timescales was the preferred way forward. While mindful of capacity, priority will drive the subgroup workplans and what comes to the APC in the next few months. AH outlined the agreed resumption plan, to get back on track. It is expected that items will need to be re-prioritised as things move forward. It was acknowledged that the APC meetings, at least in the medium-term but potentially longer-term, will need to continue to be held as an online forum. AH invited feedback after the meeting regarding the experience of holding the meeting online via Microsoft Teams along with any issues experienced so that these can be worked through and addressed for future meetings.</p>	All
3.2	<p>APC membership update</p> <p>AH welcomed Gareth Hall to the meeting, as an observer today. GH has expressed an interest in the APC Lay Person role. AJ and AH will meet with Gareth prior to the September meeting and it is hoped that GH will join the Pan Mersey APC officially from September. GH has just retired from banking, before that he was in the health sector and he has worked with Warrington CCG and now with Halton CCG.</p> <p>AH introduced Adam Irvine, LPC representative on behalf of Cheshire and Merseyside LPCs. He is a community pharmacist by background and has previously sat on the GMMMGM committee so is familiar with the APC function.</p> <p>AH advised the committee that Dr Onyia, Consultant in Public Health for Halton, has expressed an interest in the APC Public Health representative role. AH will contact her to discuss this further.</p> <p>Finance representative – AH informed the committee that options are being considered to establish the best way to progress this. Once a finance representative has been identified then the APC will have the full membership complement appointed.</p>	
3.3	<p>APC Chair</p> <p>The one-year tenure has been reached. Members are asked to please send nominations to AH by early September so these can be discussed at the September meeting.</p>	All

4	Minutes of the last meeting	
4.1	Minutes of the last meeting on 26 February 2020 The minutes were agreed to be an accurate record of the 26 February 2020 meeting.	
5	Matters arising (high priority only)	
5.1	Rivaroxaban for preventing atherothrombotic events in CAD/PAD – NICE TA607; APC letter to NICE When TA607 was brought to the APC meeting, the committee had a number of concerns, and points they wanted clarified. The Chair and AH wrote to NICE for clarification. A response was received from NICE just before lockdown. NICE has answered the questions the best they can from the evidence available to them. NICE has advised that appropriate patients for therapy would be patients who meet the COMPASS trial inclusion criteria. It would then be a clinical judgement to commence therapy or switch therapy in accordance with TA607 whilst also taking individual patient bleeding risk into consideration. It was acknowledged that whilst there could be a significant cohort for treatment, once the inclusion criteria are applied and bleeding risk reviewed, the patient numbers are likely to be small. NICE confirmed that a decision support tool to accompany this TA is now in the process of being produced. RB and AJ both commented that they have not heard of any problems in relation to Pharma activity promoting use of rivaroxaban in this patient cohort and do not think there has been a noticeable increase in prescribing.	
5.2	Items approved by Chair's action (March 2020): Patiromer (hyperkalaemia) Due process requires any items approved by Chair's action to be presented at the following meeting for formal APC ratification. Two Pan Mersey policy statements were sent out by email in March, asking for approval in line with NICE TA623. Patiromer for hyperkalaemia is red for emergency use and amber initiated for ongoing outpatient use. A quorate response was received from a GP perspective but was not quorate from a consultant perspective with only one consultant response received. All responses received were in support of the two documents with the exception of the Wirral CCG pharmacist representative who proposed it should be red for all usage; subsequently Wirral CCG has ratified a temporary red RAG rating for patiromer, which will be reviewed in August. The Chair was informed of the responses received and approved both documents by Chair's action and is asking today for the committee's formal support for the decision that has been made. There were no objections and the committee supported the decision.	
6	New medicines	
6.1	Grey statement summary The MLCSU team has been working in the background to issue grey statements for new drugs or indications which have come to light during the Covid-19 lockdown. The following grey 'holding' statements have been produced and uploaded to the APC website and will be reviewed in due time. NICE paused all non-urgent and non-Covid workstreams but	

	<p>have now restarted work on non-Covid workstreams and it is expected that timescales for publication of NICE TAs will be clarified in the coming months.</p> <p><u>DIENOGEST tablets (Zalkya®▼) for endometriosis</u>: This will be reviewed if a formal application for use is received and prioritised for in-year review.</p> <p><u>ROMOSOZUMAB solution for injection (EVENTY®▼) for severe osteoporosis in postmenopausal women</u>: Will be reviewed when the NICE TA is published (currently TBC)</p> <p><u>BROLUCIZUMAB solution for injection (Beovu® for neovascular (wet) age-related macular degeneration</u>: Will be reviewed when the NICE TA is published (currently TBC).</p> <p><u>SECUKINUMAB solution for injection (Cosentyx®) for Non-radiographic axial spondyloarthritis</u>: Will be reviewed when the NICE TA is published (currently TBC).</p> <p><u>IXEKIZUMAB solution for injection (Taltz®▼) for axial spondyloarthritis</u>: Will be reviewed when the NICE TA is published (currently TBC).</p> <p>The Pan Mersey APC approved the above.</p>	
6.2	<p>Fremanezumab for prevention of migraine – NICE TA631; red statement</p> <p>A positive NICE TA was published on 3 June. Eleri Phillips of The Walton Centre summarised the details of the red statement. EP advised the committee that there is also now a pre-filled pen formulation and it was agreed that the title of the document should be changed to “Fremanezumab injection”. No objection was raised, and the red statement was approved.</p> <p>A concern was raised that assuming agreement with a decision when no comments are raised during an online meeting was not appropriate, and that individuals may experience technical difficulties during the meeting that prevent them from commenting or voicing their concerns. It was agreed that a robust process was required for committee members to explicitly indicate their agreement with a decision. A discussion took place about the voting process for an online meeting and it was agreed that if a decision was being made, this would be via a ‘show of hands’ for each agenda item using the ‘raise hand’ function on Microsoft Teams.</p>	
6.3	<p>Avatrombopag for treating severe thrombocytopenia in adults with chronic liver disease having planned invasive procedures – NICE TA626; red statement</p> <p>NICE published a positive TA on 24 June. Avatrombopag is a tariff-excluded, specialist-only drug. TM presented the red statement. The wording regarding which specialist is able to prescribe avatrombopag is consistent with that agreed for lusutrombopag. The APC approved this statement by a show of hands.</p>	
6.4	<p>Ustekinumab for ulcerative colitis – NICE TA633; red statement</p> <p>A red statement has been produced in line with NICE TA633, published on 17 June. AH outlined the details. This statement was approved by a show of hands.</p>	
7	Formulary and Guidelines	
7.1	<p>Inflammatory Bowel Disease Guidelines – minor update to reflect NICE TA633</p> <p>HD explained that this was a minor update to include ustekinumab for ulcerative colitis in line with NICE TA633 and the newly approved Pan Mersey Red statement. This has been</p>	

	emailed to all FGSG members for information and they agreed it could to come to this meeting for noting. The APC confirmed by a show of hands that it supported this update.	
7.2	<p>Adult Asthma Guideline – routine review</p> <p>The consultation feedback was constructive and most of it was incorporated into the guideline. It was ready to go to APC in March and has been on hold, but it was allocated high priority in the recent workplan review. HD explained the changes that have been made. MW suggested that the word microgram should be used throughout the document rather than the mcg abbreviation – this was agreed. The APC approved the guideline by a show of hands.</p>	
7.3	<p>Sunscreens Guideline – routine review</p> <p>The small amendments made were outlined to members. It had been out to consultation and has been on hold since March. It was felt that this update would be helpful during the summer period. The APC approved the guideline and approved it being added to the static list by a show of hands.</p>	
7.4	<p>Sterimar nasal spray – RAG Change</p> <p>Self-care is the first option. The proposal to change the RAG designation to amber recommended is for people with chronic rhinosinusitis who are unable to purchase it on grounds of low income or cannot make the nasal douche solution themselves. Feedback expressed concern about a potential increase in the existing prescribing for large numbers of patients and stated that self-care should be strongly promoted. Liverpool University Hospital has agreed to do this, encouraging patients to make their own solution or buy it where possible. PS reported that the trust has a fairly small population with an unmet need and the ENT consultants are very clear that the majority of people can purchase, and they will promote that. It was suggested that the primary care prescribing data could be reviewed in 6-months' time to see if the trajectory is considered to be reasonable or whether this needs to be reviewed again. The APC indicated their approval of this RAG change by a show of hands.</p>	
7.5	<p>Headache pathway</p> <p>This is the latest version of The Walton Centre Headache Pathway. The version agreed last year is currently on the Pan Mersey website and this updated version is currently on The Walton Centre website. The majority of the amendments are in the advice on migraine prophylaxis including dose titration and duration of therapy. There are a few minor changes to wording elsewhere in the document. This pathway is being considered again by The Walton Centre with regard to the inclusion of fremanezumab as another red drug and the update will be brought back to APC for noting. The pathway was approved by a show of hands.</p> <p>RB reported that some GPs had expressed concern regarding the complexity of this pathway, but he will outline their concerns when the next amendment is circulated. Others found it quite helpful. It was also noted that an online document is available on the Walton Centre website.</p>	

8	Shared care	
8.1	<p>Denosumab prescribing support information – routine review</p> <p>This was a routine review of the existing prescribing support information. Changes were minor but a template letter has been added which is hoped will help with implementation. This has been on hold since March and CCG Leads had indicated this is high priority. HD gave details of the information that has been added, in line with some of the feedback received. RB advised the committee that denosumab shared care is not being well received by GPs. HD confirmed that the shared care subgroup was aware of this.</p> <p>The updated prescribing support information and accompanying letter were approved by a show of hands.</p>	
9	APC reports	
9.1	<p>NICE TA Adherence Checklist (June 2020) – for noting</p> <p>Pan Mersey APC is compliant up to the end of June 2020. This report will be uploaded to the website.</p>	
9.2	<p>Pan Mersey APC Annual Report 2019/20</p> <p>The report describes the committee and its remit and the key developments that have happened over the year. The attendance figures indicate good engagement and the through-puts show good progress. This is a public document and can be shared as appropriate; it will be uploaded to the APC website.</p>	
10	Any other business	
	<p><u>APC Voting</u>: AH will investigate options for voting in an online meeting and bring them to the September APC meeting. In the meantime, it was agreed to use the Microsoft Teams “raise hand” feature after each item, then after each vote the APC Secretary will announce “votes counted, hands down”.</p> <p>There was no other business.</p>	AH
11	Next meeting	
	<p>Wednesday 23 September 2020 at 2.00 – 4.00 pm</p> <p>Online meeting via Microsoft Teams</p>	