NHS
Cheshire and Merseyside

Area Prescribing Group report

Date: Friday 06 December 2024 **Quorate**: Yes

The items in this report are supported by the area prescribing group and approval by NHS Cheshire and Merseyside Integrated Care Board (ICB) is detailed below.

Document links provided for any APG recommendations are temporarily hosted on the legacy Pan Mersey APC website as a pragmatic solution until such time as a Cheshire and Merseyside APG website is available. The legacy Cheshire formulary will also be updated to reflect these changes.

CMAPG governance documents are now hosted on the new Prescribing section of the NHS Cheshire and Merseyside website.

New medicines other

Proposal	Notes	Approval
Baricitinib for COVID-19 **RAG designation**: Red **APG subgroup**: 08 Nov 2024 **APG**: 06 Dec 2024	Proposal to withdraw the existing APG red policy statement for BARICITINIB tablets (Olumiant®) for COVID-19 and adopt the recommendations for baricitinib in NICE guideline [NG]191: COVID-19 rapid guideline: managing COVID-19. The existing APG red policy statement for baricitinib for COVID-19 is based on the template NHS England Clinical Commissioning Policy: Baricitinib for patients hospitalised due to COVID-19 (adults and children aged 2 years and over). The NMSG reviewed the policy statement in comparison to NICE NG191 and identified that the presence of viral pneumonia is not included in the	**ICB Medicines Optimisation and Pharmacy (MOP) group**: 19 December 2024, approved by MOP group.

	eligibility criteria in NICE NG191. However, NICE confirmed that there is no intention to have different criteria from the NHS England commissioning policy and the presence of viral pneumonia syndrome is implicit in specifying the need for supplemental oxygen for COVID-19. Therefore, the recommendations for baricitinib in NICE NG191 are in accordance with the NHS England Clinical Commissioning Policy for baricitinib. It has been raised that Trusts use internal COVID-19 protocols and are not likely to refer to the clinical information within the policy statement. Therefore, the NMSG felt that the statement does not add value. The Blueteq form will require a minor update.	
Lecanemab and donamemab for Alzheimer's disease **RAG designation**: Grey **APG subgroup**: 08 Nov 2024 **APG**: 06 Dec 2024	A grey RAG designation has been assigned for each drug, pending publication of the NICE TAs, with additional information about NHS availability. Lecanemab and donamemab are not currently available in the NHS, but the NHS England communication 'Information Note: Acute Management of Potential Adverse Treatment Effects of Lecanemab' states that the manufacturers are making these available via independent sector clinics. It was noted that this document does not contain any official badging or authorship. Patients may begin to seek support from NHS clinicians with referrals to private clinics and for clinical assessment and treatment of potential adverse treatment effects, and it was agreed that relevant information should be included in the formulary to support clinicians.	**MOP**: 19 December 2024, approved by MOP group.

	The APG agreed that the NHSE document should be added to the formulary when a badged version is available and NHSE have been contacted about this.	
Somapacitan for growth hormone deficiency **RAG designation**: Grey **APG subgroup**: 08 Nov 2024 **APG**: 06 Dec 2024	For noting. A grey RAG designation has been assigned pending publication of the NICE TA.	**MOP**: 19 December 2024, noted by MOP group.

Formulary and guidelines

Proposal	Notes	Approval
Corticosteroids in gout – minor formulary amendment **RAG designation**: Green **APG subgroup**: 15 Oct 2024 **APG**: 06 Dec 2024	In June 2022, NICE published NG 219 Gout: diagnosis and management. This guideline makes the following recommendations in section 1.3 - Managing gout flares: • Offer a non-steroidal anti-inflammatory drug (NSAID), colchicine or a short course of an oral corticosteroid for first-line treatment of a gout flare, taking into account the person's comorbidities, co-prescriptions and preferences. • Consider an intra-articular or intramuscular corticosteroid injection to treat a gout flare if NSAIDs and colchicine are contraindicated, not tolerated or ineffective. The Formulary and Guidelines subgroup proposes the addition of corticosteroids to section 10.01.04 of the formulary, RAG designation Green, for the treatment of acute attacks of gout. NICE recommends the following formulations which are proposed to be included:	**MOP**: 19 December 2024, approved by MOP group.

Proposal	Notes	Approval
	• Prednisolone 5mg tablets • Methylprednisolone / lidocaine injection 1ml and 2ml • Methylprednisolone acetate injection 1ml, 2ml,3ml • Triamcinolone acetonide 40mg/ml and 50mg/5ml The subgroup believes it is likely these corticosteroids are already being prescribed for gout and this will ensure the formulary reflects current practice. No increase in prescribing is anticipated.	

Interface prescribing

Proposal	Notes	Approval
RAG definitions and criteria **RAG designation**: None **APG subgroup**: 12 Nov 2024 **APG**: 06 Dec 2024	Minor amendments to two sections of this document which are highlighted in yellow. On page 4 a sentence has been added to the bottom of the Amber criteria which says, 'For any complex safety issues such as the Pregnancy Prevention Programme, the specialist must not discharge the patient as occasional specialist input is required'. On page 5, the Black RAG rating has been changed to Do Not Prescribe (DNP). This will bring the Cheshire and Merseyside formulary in line with other areas.	**MOP**: 19 December 2024, approved by MOP group.

APG reports

Title	Notes	Approval
NICE TA adherence checklist October 2024	For noting.	**MOP**: 19 December 2024, noted by MOP group.