NHS
Dorset
Clinical Commissioning Group

DORSET MEDICINES ADVISORY GROUP
Recommendation Summary

Formerly the Bournemouth, Dorset and Poole Health Technologies Forum, DMAG represents the four provider Trusts and GPs within the Clinical Commissioning Group (CCG). It provides recommendations to the CCG on the prescribing and commissioning of medicines.

Summary of recommendations considered at a meeting of the group on 3rd May 2016. Formulary entries and associated documents can be accessed at www.dorsetformulary.nhs.uk.

PRODUCT	DECISION	COMMENTS
1. Products re-categorised		
Aquaform®	Make all sizes formulary	Aquaform® gel 8g is formulary, 15g tube is non-formulary
Flaminal®	Make all sizes formulary	Flaminal® Forte and Hydro (Crawford) versions 15g tube is formulary and 50g tube is non-formulary
Silicone dressings	Remove classification	Silicone dressings – fall into both wound contact layers and foams. Therefore for clarity it is easier to drop this as a separate category and identify the silicone products within the other categories.
Mesorb®	Remove from formulary	Mesorb ® to be removed from the formulary as there have been some reports of peri-wound maceration/deterioration due to the blue edging particularly in leg ulcer patients. This has not been seen in alternative absorbent pads such as Zetuvit ® (Hartmans).

PRODUCT	DECISION	COMMENTS
• Cyclizine • Furosemide – injectable • Hyoscine hydrobromide – all formulations • Levopromazine - injectable • Lorazepam (Genus®) – oral as off-label sublingual use • Midazolam – subcutaneous • Glycopyrronium • Haloperidol – oral and injectable	Green	All to be added to chapter 21 Palliative Care Formulary
2. New requests		
Polymem®	Not accepted	It was considered that if it is only used for patients with epidermolysis bullosa this should be managed as non-formulary item.
Zetuvit Plus®	Requires more supportive evidence	The proposal suggests that it is the only product for heavily exuding wounds as an absorbent dressing and has the potential to decrease the number of dressing changes. The DMAG members considered that they wanted more information on the place in therapy of this dressing. They requested more information on the product and how and where it would be used, either as a written report or attendance at the July meeting. The proposal needs to include likely patient numbers, length of use, type of wound it can be used for, any alternatives
Emerade®	Amber	Emerade® and adrenaline pen devices for anaphylaxis, the formulary to state "use the brand which training has been provided on". Emerade® provides appropriate dosages for all ages

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3. Products considered by NICE		
Ezetimibe®	Amber	NICE TA385 (update to NICE TA132) – Ezetimibe for the treatment of primary (heterozygous-familial and non-familial) hypercholesterolemia. No significant changes in content were required, the group recommended ezetimibe remain amber and use in accordance with the TA only.
Sacubitril valsartan ®	Amber with Shared Care Guidelines	NICE TA388 – (expected publication April 27th). Sacubitril valsartan for treating symptomatic chronic heart failure with reduced ejection fraction. The group recommended the drug hold amber with shared care status; a draft shared care guideline based upon the FAD document from NICE is included in appendices, any discernible differences in use between the FAD and the TA once published will be highlighted at the next meeting.
4. Miscellaneous recommendations by DMAG		
DMAG annual report 2015/2016	Approved	Now Pending Medicines Optimisation Group approval prior to publication. MOG meeting scheduled for 14th June 2016
The revised local pathway for the use of biologics in AS and spondyloarthritis	Approved	Pathway reflects NICE TA383
Commissioning statement to support the use of biosimilar etanercept (Benepali®)	Approved	Commissioning statement to be added to formulary and website
The shared care guideline for LMWH in the treatment of patients with a	Approval Pending	It was noted that it should be clear prophylactic doses relate to all inpatient settings

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recently diagnosed thromboembolic disease		(acute and community). The Group approved the guideline and recommended wider circulation for feedback, including Primary Care Commissioning Lead.
Statement on commissioning of pre-NICE approved PBR excluded drugs	Approved	A position statement on commissioning of medicines prior to a NICE TA publication
Guidelines outlining the duty of care regarding drugs recommended by outpatients	Approval Pending	Pending a couple of slight amendments, the guidelines were approved.

Classification of products:
'RED' drugs for hospital use only
'AMBER with shared care' drugs suitable for use with shared care arrangements
'AMBER' drugs suitable for use without shared care arrangements
'GREEN' drugs suitable for prescribing in primary and secondary care
'Not Recommended' – drugs not recommended for use in Dorset

The new traffic light system can be found on the Dorset CCG internet at: Dorset CCG - Traffic light scheme