

Minutes of meeting held on 19th September 2023, 9am-11.30am

Virtual online meeting via Microsoft Teams

Present:

Position	Lead	Voting Member	July 2023	Sept 2023
Chair	Dr Janet Walker <i>Medical Director, ICB</i>	Yes	✓	✓
Secretary	Gavin Mankin, Principal Pharmacist – Medicines Management, Regional Drug & Therapeutics Centre (Newcastle)	No	✓	✓
Provider hospital trusts representative (2 x consultant, 2 x pharmacy plus Mental Health)	Mental Health Trust Chief Pharmacist <i>Chris Williams Chief Pharmacist Tees Esk & Wear Valleys NHS Foundation Trust</i>	Yes	✓	Richard Morris
	Mental Health Trust Consultant <i>TBC</i>	Yes		
	Consultant <i>Dr Andrew Lloyd Consultant Anaesthetist and Chair of South Tees Hospital NHS Foundation Trust D&T</i>	Yes	✓	Tracy Percival
	Consultant <i>Dr Simon Hill Consultant in Clinical Pharmacology & Therapeutics and Clinical Toxicologist, NuTH</i>	Yes	✓	Apols
	Trust Chief Pharmacist <i>Jamie Harris Chief Pharmacist County Durham & Darlington NHS Foundation Trust</i>	Yes	✓ From 9.20am	✓
	Pharmacist <i>Al Green Formulary Pharmacist Northumbria Healthcare Foundation Trust</i>	Yes	✓	✓
Primary Care (2 x GP, 2 x MO Pharmacist)	GP <i>Fadi Khalil ICB Clinical Lead with prescribing (Sunderland place)</i>	Yes	✓	✓
	GP <i>Chris Jewitt Prescribing and LTC Clinical Lead (North)</i>	Yes	✓	✓
	MO Pharmacist <i>Kate Huddart Head of Pharmacy and Medicines (Central)</i>	Yes	<i>Helena Gregory</i>	✓
	MO Pharmacist <i>Angela Dixon Head of Pharmacy and Medicines (Tees Valley)</i>	Yes	✓	✓
Paediatric representative	<i>Dr Yincen Tse Consultant Paediatric Nephrologist, Great North Children's Hospital</i>	Yes	✓	Apols
Finance representative	<i>Charles Welbourn Finance Director (North Cumbria)</i>	Yes	✓	✓
Patient representative	<i>Jim Welch</i>	Yes	<i>Apols</i>	✓
Public Health	<i>Dr Toks Sangowawa Clinical Advisor/Locum Consultant in Public Health, South Tyneside MBC Clinical Advisor IFR North</i>	Yes	✓	✓

Local Authority Pharmacist (1 representing all stakeholder local authorities)	<i>Jo Linton Public Health Pharmacy Adviser Stockton and Hartlepool</i>	Yes	<i>Apols</i>	<i>Apols</i>
AHSN	<i>Helen Seymour NENC AHSN Medicines Optimisation Workstream Lead</i>	Yes	✓	✓
LPC (1 representing all stakeholder LPCs)	<i>TBC</i>	Yes		
LMC (1 representing all stakeholder LPCs)	<i>Rachel McMahon</i>	Yes	✓	✓
Chair of Formulary Working Group	<i>Shafie Kamaruddin Consultant County Durham & Darlington NHS Foundation Trust</i>	Yes	✓	<i>Apols</i>
Professional Secretary of Formulary Working Group	<i>Matthew Lowery Formulary Pharmacist, NuTH</i>	Yes	✓	✓
Chair of Guidelines and Pathways Group	<i>Matthew Grove Consultant Rheumatologist, Northumbria Healthcare Foundation Trust</i>	Yes	✓	✓
Professional Secretary Guidelines and Pathways Group	<i>Susan Turner Pharmacist, NECS</i>	Yes	✓	✓

The meeting was quorate.

Part 1 – General business

1) Apologies for absence

Apologies were received from: Yincent Tse, Simon Hill, Andy Lloyd, Shafie Kamaruddin, Jo Linton

NTAG noted apologies from consultant colleagues due to national strike action and some members providing clinical cover due to strike.

2) Declarations of interest

No declarations were received prior to the meeting on receipt of the agenda, and when the Chair invited any declarations of interest to be made none were declared.

3) Draft minutes July 2023 meeting

The group approved the minutes of the 18th July 2023 NTAG meeting.

ACTION: Secretary to submit July 2023 minutes to NENC Medicines Subcommittee.

4) Matters arising not on the agenda

Nil.

5) Action log

NTAG terms of reference

Sent to September 2023 Medicines subcommittee and approved. ITEM NOW CLOSED.
Chair emailed NTAG members to seek a Vice-Chair for NTAG.

RDTC monthly formulary amendments – NICE TA/MHRA Drug Safety Updates – April + May 2023

Sent to September 2023 Medicines Subcommittee and all approved. ITEM NOW CLOSED.

NTAG CGM position statement – review due to updated NICE guidance

Sent to September 2023 Medicines Subcommittee and all approved. ITEM NOW CLOSED.

Chair has raised around CGM workload/initiation and training in primary care with ICB Medical Directors. ITEM NOW CLOSED.

Waste issue and general issues around collection of clinical waste in primary care have been flagged to ICB and work is in progress. ITEM NOW CLOSED.

NENC regional SGLT2 top tips - update to include TA902

Secretary to send recommendation to October 2023 NENC Medicines Subcommittee for final sign off when the NICE TAs from June 2023 are submitted to the NENC Medicines Subcommittee.

Review of NTAG recommendation on sodium oxybate (Xyrem®) in the management of narcolepsy with cataplexy in adult patients in light of RMOC position statement

Secretary to request audit from NuTH and STHFT and present this to NTAG in November 2023.

Teriparatide use outside of NICE guidance as per NOGG

April 2023 NENC Medicines Committee: The committee considered the recommendations made by NTAG at their March 2023 meeting. The committee was unable to support the recommendation made by NTAG concerning the use of teriparatide outside NICE guidance as per NOGG 2021 guidelines. It asked that further information pertaining to the cost impact and benefit of this use be returned to the Medicines Committee with full costed NENC osteoporosis pathway. No further action for NTAG

September 2023: RDTC to produce a paper with some costings in to go to October 2023 Medicines Subcommittee.

6) Appeals against previous NTAG decisions

Nil received since last meeting.

Part 2 – Formulary and RAG

7) RDTC monthly formulary amendments – NICE TA/MHRA Drug Safety Updates – June + July 2023

The RDTC Monthly Formulary Amendments – NICE TA/MHRA Drug Safety Updates – June + July 2023 were presented to NTAG to make a recommendation to the NENC Medicines Subcommittee on the formulary status and approval of medicines contained within these documents.

NICE TAs published in June 2023

- Been out for 4-week consultation via NTAG website:
- The comments received are attached. Had responses from:
 - Northumbria Trust
 - NuTH
 - STHFT
- No respond from:
 - North Tees Trust
 - CDDFT

- North Cumbria Trust
- South Tyneside & Sunderland Trust
- QE Gateshead
- All those who responded agreed with the suggested RAG status in the RDTC Monthly Formulary Amendments June 2023 document.
- No barriers to implementation were raised.

30-day NICE TA905: Upadacitinib for previously treated moderately to severely active Crohn's disease

- Been out for 4-week consultation via NTAG website:
- The comments received are attached. Had responses from:
 - Northumbria Trust
 - NuTH
 - STHFT
 - South Tyneside & Sunderland Trust
 - QE Gateshead
 - Tees Valley
 - CDDFT
- No respond from:
 - North Tees Trust
 - North Cumbria Trust
- All those who responded agreed with the suggested RAG status.
- No barriers to implementation were raised.

NICE TAs published in July 2023

- Been out for 4-week consultation via NTAG website:
- The comments received are attached. Had responses from:
 - STHFT
 - CDDFT
 - Tees Valley
 - South Tyneside & Sunderland Trust
- No respond from:
 - North Tees Trust
 - North Cumbria Trust
 - QE Gateshead
 - Northumbria Trust
 - NuTH
- All those who responded agreed with the suggested RAG status in the RDTC Monthly Formulary Amendments July 2023 document.
- Comments received all related to NICE TA906 Rimegepant for migraine:
 - The block contract arrangement may inhibit Trust ability to implement this NICETA, however do feel that the suggested RAG status which does not limit the prescribing only to secondary care, may result in a more workable solution.
 - Would not agree to Amber or Red status because fear it would leave Trust with an unfunded pressure. NICE says it will be cost neutral because it would offset use of the existing injectable CGRPRis, but as an oral option there is a high chance of it creating additional usage.
 - The 12-week review for continuation of the medicine would require careful consideration. If this is to be done in secondary care and then passed out to primary care if it has worked -is there capacity?
If this 12 week review is to be done in primary care, there would need to be assurance that the information has transferred into primary care in this window and further guidance to GPs would be needed on how to assess effectiveness and what

to do if this hasn't worked. This would generate another referral and would not be cost effective ?

It would seem most sensible for the patient to be given 3 months' supply of medicine at the neurologist appointment and then reviewed at 12 weeks by secondary care. If the treatment is successful at that point to pass out to primary care.

- Suggest therefore Rimegepant be approved as Green+ drug with first three months' supply from secondary care followed by 12-week review which could be telephone and pass out to primary care with a further 4-week prescription to allow for handover. Agreed that Green+ was the appropriate status for Rimegepant as no special monitoring requirements or toxicity.

NTAG agreed with the suggested formulary status for each drug with a NICE TA published in June and July 2023.

ACTION: Secretary to send recommendations to October 2023 meeting of NENC Medicines Subcommittee for final sign off.

8) Formulary applications

Nil this month.

9) Other formulary amendments - July 2023 Formulary Working Group

- Been out for 4-week consultation via NTAG website:
- The comments received are attached. Had responses from:
 - County Durham sub-ICB
 - QE Gateshead
 - CDDFT
 - Tees Valley
- No respond from:
 - North Tees Trust
 - North Cumbria Trust
 - South Tees Trust
 - South Tyneside and Sunderland Trust
 - Northumbria Trust
 - NuTH
- All those who responded agreed with the suggested RAG status in the RDTC Monthly Formulary Amendments April 2023 document with exception of metformin for polycystic ovary syndrome which as proposed as a Green+ drug. Suggested may be more appropriate for as a Green drug because:
 - GPs can currently often make a clinical or clinical and USS diagnosis of PCOS in primary care and manage complications (endometrial protection, hirsutism, menstrual disorders) without need for a referral to gynaecology.
 - Some local Trusts (e.g. CDDFT) recommend GPs routinely initiate metformin (subject to usual cautions and contraindications) in PCOS.
 - Local Trust recommends GPs routinely initiate metformin (subject to usual cautions and contraindications) in PCOS.
 - Note NICE CKS states: "Consider seeking specialist advice before initiating metformin in primary care for women without diabetes."
 - Note BNF states: "initiated by a specialist".

NTAG agreed with the suggested formulary status for each drug and maintaining metformin for PCOS as Green+ in line with NICE CKS and the BNF.

ACTION: Secretary to send recommendations to October 2023 meeting of NENC Medicines Subcommittee for final sign off.

10) NHSE Specialised Commissioning Circulars

A list of NHSE Specialised Commissioning Circulars published since July 2023 was circulated for information. The formulary will reflect the NHSE Specialised Commissioning Circulars.

Part 3 – Pathways and clinical guidelines

11) NENC Mucolytics at a glance clinical consensus guide

A NENC Mucolytics At a Glance Clinical Consensus Guide produced by NENC Respiratory Network was presented to NTAG.

It was recommended for approval by NTAG as a clinical consensus not as a guideline but as a framework to support appropriate prescribing of mucolytics. Agreed that no wider consultation required on this occasion to avoid delay as in QIPP plans but in future documents such as this will follow the new process for guidelines in the NENC via the Medicines Guidelines Subgroup.

ACTION: Secretary to send recommendation to October 2023 meeting of NENC Medicines Subcommittee for final sign off.

12) Northern England Evaluation and Lipid Intensification guideline – updated

An updated Northern England Evaluation and Lipid Intensification guideline was presented to NTAG. It has been out for 4 week's consultation via NTAG website, and all comments received have been reviewed by the group of clinicians that produced this guideline. The guideline was supported by the NENC Medicines Guidelines Group on the 5th September 2023.

During the meeting confirmed that GPs can request an apolipoprotein blood test.

NTAG agreed to recommend to the NENC Medicines Subcommittee approval of the latest version of the Northern England Evaluation and Lipid Intensification guideline.

ACTION: Secretary to send recommendation to October 2023 meeting of NENC Medicines Subcommittee for final sign off.

13) NENC Menopause guideline

A NENC menopause guideline was presented to NTAG. Previous versions of guideline already approved in North of Tyne, Gateshead & North Cumbria plus Sunderland & South Tyneside. It has been out for 4 week's consultation via NTAG website, and all comments received have been reviewed by the group of clinicians that produced this guideline. The guideline was supported by the NENC Medicines Guidelines Group on the 5th September 2023.

NTAG agreed to recommend to the NENC Medicines Subcommittee approval of the NENC menopause guideline.

ACTION: Secretary to send recommendation to October 2023 meeting of NENC Medicines Subcommittee for final sign off.

14) NENC Osteoporosis guideline

A NENC osteoporosis guideline was presented to NTAG. It has been out for 4 week's consultation via NTAG website, and all comments received have been reviewed by the group of clinicians that produced this guideline. The guideline was supported by the NENC Medicines Guidelines Group on the 5th September 2023.

Proposes teriparatide be used as alternative anabolic agent where romosozumab contraindicated – this is as per NOGG 2021 guidelines but out with proposed use for teriparatide in NICE TA161 (2008). Formulary application for this has been supported by NTAG but is still with Medicines board. It should be cost-effective at usual NICE thresholds.

Concerns were expressed by members of NTAG with regard to the GREEN+ status for denosumab. There was strong feeling on the grounds of safety that it may be more appropriate for AMBER SC status.

General discussion took place on how feedback on comments received during the consultation process is provided.

NTAG agreed not to recommend approval of the NENC osteoporosis guideline until the Formulary Working Group as reviewed the formulary RAG status of Denosumab.

ACTION: ML to ask Formulary Working Group to review RAG status of Denosumab and consider changing from GREEN+ to AMBER SC.

ACTION: Professional Secretaries of NTAG and subgroups to discussed process for review/feedback of comments received following consultations.

Part 4 – Shared care

15) NENC Amiodarone SCG

A national shared care guideline for dronedarone was published by RMOC/NHS England in July 2022.

It was put in the NECN format and has been out four week's consultation in April 2023. All comments received have now been reviewed by the NENC Cardiac Network, the Clinical Lead Medicines Management and Long-Term Conditions, NENC ICB (North Area), and the NENC Medicine Guidelines Group. The content and monitoring requirements match that of national amiodarone shared care guideline (SCG).

This SCG has the support of the of the NENC Cardiac Network and was approved by NENC Medicines Guidelines Group on 5th September 2023.

It was agreed at the April 2023 NENC Medicines Subcommittee that each SCG coming for approval should have an implementation plan.

The following implementation issues with this shared care guideline have been highlighted:

- In County Durham & Tees Valley amiodarone previously classed as Green+ with no shared care in place unlike rest of the NENC.

- Tees had a prescribing guideline which contained all the same monitoring requirements as the SCG, but this did not specify who monitored what and whether specialist continued to review the patient at set intervals as would occur with shared care.
- NHSE Items which should not routinely be prescribed in primary care: policy guidance updated in August 2023 now states for first time for amiodarone that:
Where there is an existing cohort of patients taking amiodarone who are not currently under shared care, it is recommended that these patients are reviewed to ensure that prescribing remains safe and appropriate and a shared care arrangement is introduced.

Therefore, question has arisen about what to do with historical patients on amiodarone not under shared care currently particularly in County Durham and Tees Valley. It was suggested that may be reasonable to request specialist complete shared care documentation when patient next comes for annual review at GP practice so that there is phased approach. Suggested that contact the NENC Cardiac Network for guidance on implementation and risk stratification to prioritise those patients at greatest risk for referral to secondary care for review/set up of shared care e.g. those at greatest risk of lung toxicity.

Noted that secondary care may not be aware of all patients currently on amiodarone so they will need to be identified by primary care.

NTAG agreed to recommend to the NENC Medicines Subcommittee approval of the NENC amiodarone shared care guideline subject to implementation/risk stratification plan from cardiac network for historical patients.

ACTION: JW/Secretary to ask Cardiac Network for implementation/risk stratification plan from cardiac network for historical patients.

ACTION: Secretary to send recommendation to October 2023 meeting of NENC Medicines Subcommittee for final sign off.

Part 5 - Updates from Subgroups

16) NENC Formulary Working Group

Agreed that NENC ICB Formulary Application form should be hosted on the formulary and NTAG website.

The NENC Formulary Working Group Terms of Reference were also received by NTAG.

17) NENC Medicines Guidelines Group

The minutes of the second meeting of the new NENC Medicines Guidelines Group were circulated for information together with the NENC Medicines Guidelines Group Terms of Reference.

NTAG discussed what the process should be for non-medicine related clinical guidelines as currently no process for approval or hosting on websites exists within the NENC ICB.

ACTION: JW to discuss with NENC Medical Directors what the process for approval should be for non-medicine related clinical guidelines.

Part 6 – Workplan and horizon scanning

18) RDTC monthly horizon scanning July and August 2023

NTAG received the RDTC monthly horizon scanning report for July and August 2023 for information.

19) Work plan

The group discussed the work plan. Agreed to add updating CGM position statement to consider including children & young people with non-type 1 or 2 diabetes.

Part 7 - Other

20) RDTC Medicine Value Bulletins

- **Metformin 1g immediate release**
- **Methylphenidate modified release**
- **Promethazine**
- **Acetylcysteine vs carbocisteine**

These bulletins produced by the RDTC suggest some potential savings for the NENC for the suggested recommendations within them are followed. Noted that topics are being considered for local QIPP plans.

NTAG agreed to ask the NENC formulary group to suggest any changes to the NENC Medicines Formulary that may be required to support achieving these potential savings.

ACTION: ML to take the RDTC Medicines Bulletins to the NENC formulary group to consider any changes to the NENC Medicines Formulary that may be required.

21) NTAG recommendation update - vaginal devices for female urinary stress incontinence

NTAG considered updating its recommendation on Vaginal devices for female urinary stress incontinence to change this sentence: "The product should only be initiated by a specialist pelvic health physiotherapist and only continue if evidence of continued benefit" to include initiation by specialist pelvic health physiotherapist and specialist nurses. This is because in some bladder services in the NENC the specialist nurses also initiate these products,

NTAG agreed to recommend to the NENC Medicines Subcommittee updating the current NTAG recommendation on vaginal devices for female urinary stress incontinence as above.

ACTION: Secretary to send recommendation to October 2023 meeting of NENC Medicines Subcommittee for final sign off.

22) NENC Regional 'At A Glance: Supporting Greener Respiratory Care Guide' – updated

The original At a Glance Carbon footprint consensus guide has been updated to reflect the change in national frameworks, and the name of the document altered slightly to At a Glance Supporting Greener Respiratory Care.

Felt the document in future could benefit from better formatting and visualisation.

NTAG agreed to recommend to the NENC Medicines Subcommittee approval of the latest version of the NENC Regional 'At A Glance: Supporting Greener Respiratory Care Guide'. Agreed that no wider consultation required on this occasion to avoid delay and this an update of guidance previously approved by APCs. But in future documents such as this will follow the new process for guidelines in the NENC via the Medicines Guidelines Subgroup.

ACTION: Secretary to send recommendation to October 2023 meeting of NENC Medicines Subcommittee for final sign off.

23) General guidelines for the use of hormone treatment in gender dysphoria- Northern Region Gender Dysphoria Service – request to host on NTAG website

This is regional guidance that was approved via separate APCs. Version 2 came just ahead of the NTAG remit expanding to include guidelines last Autumn and so there has been no NTAG involvement previously.

It was brought to the Medicines Guidelines Group and NTAG to enable NENC hosting on the NTAG website and as it has been previously approved in separate areas there is not felt to be a need for further consultation.

It was noted that the service is NHSE commissioned but GPs are asked by NHSE to prescribe. The author has been in touch to indicate that a minor review is expected by early 2024.

Discussion took place on the complexity of the document, issues around the commissioning of the service including ability to prescribe, and assumption that existence of this guidance means GPs will prescribe. Strong feeling from NTAG members that these should be shared care drugs and prescribing/monitoring properly resources. Concerns that hosting on NTAG website will give it NTAG badge of approval and standing.

Discussed need for mechanism for those who wish to use/refer to this guidance to be able to access it.

NTAG agreed not to recommend to the NENC Medicines Subcommittee approval of hosting this guideline on the NTAG website but to link to the guideline on the CNTW website instead making it clear that this guideline is not endorsed by NTAG, and that simply hosting for ease of access for those who wish to refer to it. This is because of the reasons stated above.

ACTION: Secretary to send recommendation to October 2023 meeting of NENC Medicines Subcommittee for final sign off.

24) NENC Liver Network guidelines for the management of adults with asymptomatic liver blood test abnormalities – request to host on NTAG website

These guidelines were developed by the North East and Cumbria Hepatology network and have been used across the region of many years. There have been minor updates to the guidance every

2-3 years. There has been agreement that these should be used across the whole of NENC and in most areas they are used. GP are regularly updated about these guidelines across the region.

NTAG agreed to recommend to the NENC Medicines Subcommittee approval of hosting this guideline on the NTAG website subject to checking if the following should be included:

- **Patients with an isolated rise in ALT/AST (i.e. ALP, bilirubin are normal) should have a CK check in case the AST/ALT originate from rhabdomyolysis and not from hepatitis. If CK is > 10 x ULN then a 2-3x ULN rise in AST/ALT is expected.**
- **Isolated Gamma GT – should there be mention of this and what to do?**

ACTION: Secretary to send recommendation to October 2023 meeting of NENC Medicines Subcommittee for final sign off.
--

NTAG chair's action since last NTAG meeting

25) Nil this month.

AOB

Nil

No other business was raised, and the meeting concluded.

The date of the next meeting was agreed as 21st November 2023 and will be held virtually via Microsoft Teams.

Minutes produced by G Mankin, Professional Secretary to NTAG, 19th September 2023