

Basingstoke, Southampton and Winchester

District Prescribing Committee (DPC)

Recommendations of the meeting of Tuesday 14th August 2018

Supported or limited support e.g. Specialist recommendation

- **Kyleena** (19.5mg Levonorgestrel - releasing intrauterine system for contraception). This is now the preferred hormone-releasing IUD (intrauterine device) of this dose locally. It has the advantage of providing contraceptive cover for 5 years vs 3 years and is more cost effective. Kyleena has the same diameter and insertion device/technique as currently used products.
- **Levosert** (52mg Levonorgestrel - releasing intrauterine systems for contraception) is supported in addition to currently available hormone-releasing IUD (intrauterine device) of this dose. It may be considered for use in patients who would benefit from the shorter duration of action than current products (It is licensed for 4 yrs. rather than 5 yrs.) particularly for women who may wish to remove the device sooner, e.g. planning pregnancy. Levosert has a slightly larger diameter (4.8mm vs 4.4mm) and different insertion device/technique (two-handed). It is also licensed for heavy menstrual bleeding.
- **Golimumab (Simponi®) SC injection for Crohn's disease**- Based on scientific evaluation of the evidence for efficacy, safety and cost effectiveness the committee supports the use of Golimumab for patients with Crohn's disease (CD) who have lost response to prior anti-TNF therapies.
This is an off-label use and should be restricted to gastroenterology specialists only, i.e. it should be classed as red on formularies.
- **Glycopyrronium bromide (Sialanar®) oral solution**—The committee supports the use of this licensed oral solution for the treatment of severe sialorrhoea in children and adolescents (aged ≥3 years) with chronic neurological disorders.
Doses should ideally be prescribed in millilitres and the strength and/or brand name should be specified on formularies.
- **Trehalose 3%/hyaluronate 0.15% eye drops multi-dose bottle (Thealoz Duo®)** -Based on scientific evaluation of the evidence for efficacy, safety and cost effectiveness the committee supports the use of **Thealoz-Duo** 10ml multidose bottle as an option for the treatment of moderate to severe dry eye syndrome. Thealoz-Duo will be incorporated into the current dry eyes guidelines to ensure it is not used as a first-line option. Prescribing may be initiated in primary care, i.e. it should be classed as green on formularies.
- **Fluticasone Furoate/Umeclidinium/Vilanterol inhalation powder (Trelegy® Ellipta)** – This triple inhaler is supported for use for maintenance treatment of moderate to severe COPD in patients not adequately controlled by combination of ICS and LABA. The COPD guidelines will be updated to reflect the availability and place in therapy of the triple combination inhalers.
- **Dupilumab Injection**: Following the NICE TA 534 Dupilumab is supported for the treatment of moderate to severe atopic dermatitis. It should be restricted to specialists prescribing only and classed as red on formularies.
- **Piracetam tablets and oral solution (Nootropil®)**: Following the NICE CG 137 Epilepsies: diagnosis and management: Piracetam is supported for the treatment of myoclonic seizures in children, young people and adults when adjunctive treatment is ineffective or not tolerated. It should be initiated by specialists then can be continued in primary care (i.e. Amber on formularies)
- **Stiripentol capsules and powder sachets (Diacomit®)** Following the NICE CG 137 Epilepsies: diagnosis and management: Stiripentol is supported for use as an adjunctive treatment for Dravet syndrome in children, young people and adults when first line treatments are ineffective or not tolerated. It should be initiated by specialists then can be continued in primary care under a shared care guideline – to follow) (i.e. Amber on formularies).
- **Budesonide prolonged release tablets (Cortiment®)** - These tablets are supported for use locally for the induction of remission in Ulcerative Colitis, they are formulated to release budesonide throughout the large colon. Consider adding to the formulary as Amber.

Not supported

- **Cenegermin eye drops (Oxervate®)** for treating neurotrophic keratitis. NICE TA532: Cenegermin is not recommended, within its marketing authorisation, for treating moderate or severe neurotrophic keratitis in adults. This recommendation is not intended to affect treatment with Cenegermin that was started in the NHS before this guidance was published.

Other Information and formulary updates

- **Methotrexate IM injection**– a reminder that methotrexate injections should be brand prescribed as the mechanisms for the injections are different with each brand. This will ensure the patient receives the correct dose and device.
 - **Oxycodone injection**- This has been changed from Red to Amber on the formulary for use in palliative care.
 - **Enoxaparin Injection** – This has been changed from Red to Amber on the formulary for extended prophylaxis.
 - **Riluzole liquid (Teglutik®)** is now a licensed product and can be used in patients with swallowing difficulties. Riluzole is supported by NICE for use in Motor Neurone Disease. See the Link for more information <https://www.nice.org.uk/Guidance/ta20>
- Guidance documents are available [Here](#) (hosted by West Hampshire CCG)

Summarised on behalf of the District Prescribing Committee by Andrea White (Southampton City CCG)