

**Northern, Eastern & Western Devon Clinical Commissioning Group**  
**South Devon and Torbay Clinical Commissioning Group**

Notes of the meeting of the South and West Devon Formulary Interface Group

Tuesday 11<sup>th</sup> October 2013 - 2pm – 4.30pm

The Watermark, Erme Court, Leonards Road, Ivybridge PL21 0SZ

<b>Present:</b>	Chris Roome (CR) – Chair Phil Melliush (PM) – GP Keith Gillespie (KG) - GP Bill Nolan (BN) - GP Larissa Sullivan (LS) – Interface Pharmacist Sarah Marner (SM) – Interface Pharmacist Carol Webb (CW) – Joint Formularies Technician Margaret Hinchliffe (MH) Jeremy Morris (JM) – Formulary Pharmacist Gareth Franklin (GF) – Clinical Guidance Manager Iain Roberts (IR) – Lead MO Pharmacist Petrina Trueman (PT) – Joint Formularies Pharmacist Amanda Gulbranson (AG2)- Clinical Effectiveness Lead Paul Manson (PM) – Lead MO Pharmacist Steve Cooke (SC) – Chief Pharmacist	NEW Devon CCG South Devon & Torbay CCG NEW Devon CCG South Devon & Torbay CCG NEW Devon CCG NEW Devon CCG NEW Devon CCG Lay member Plymouth Hospitals NHS Trust NEW Devon CCG South Devon & Torbay CCG NEW Devon CCG Devon Partnership Trust NEW Devon CCG Plymouth Community Healthcare
<b>Invited:</b>	Rebecca Prosser – Medicines Optimisation Pharmacist South Devon & Torbay CCG	
<b>Apologies</b>	Elena Mercer (EM) – Formulary Pharmacist South Devon NHS Trust Andrew Gunatilleke (AG1) – Consultant, Chair SDNT DTC South Devon NHS Trust Paul Humphriss (PH1) – Head of Medicines Management South Devon NHS Trust Paul Hughes (PH2) – Deputy Head of Prescribing Kernow CCG Mike Finnegan (MF) – Consultant, Chair PHNT DTC Plymouth Hospitals NHS Trust	
<b>1 Welcome:</b>	The Chair welcomed everyone. Apologies as noted above.	
<b>3 Notes of last meeting 13<sup>th</sup> September 2013:</b>	These were noted and agreed.	
<b>4 Action log:</b>	<ul style="list-style-type: none"> <li>● <b>Revised Osteoporosis pathway:</b> A revised pathway is being worked up by the specialists across Devon. It was asked that this work be followed up as there is a need for this guidance. <b>Action: To be followed up and bring a revised osteoporosis pathway to future meeting</b></li> <li>● <b>Rivaroxaban DVT guidance:</b> Added to the South Devon Formulary.</li> <li>● <b>Dapagliflozin TA:</b> Formulary entry has been finalised</li> <li>● <b>Mirabegron TA:</b> This has been added to both formularies</li> </ul>	
<b>5 Primary care antibacterial section</b>	This section has been re-formatted and put onto the new website, not yet live. There are still some outstanding issues but these are being resolved. Particularly in the South Devon area it was asked that the revised guidance could be issues swiftly. The appendices relevant to this section will be looked at and added.	

**Action: GF to contact Graham Parsons regarding the relevant appendices.**

## 6 Chapter 1 Gastrointestinal

The merge work for this Chapter has been done by Rebecca Prosser. Rebecca outlined the proposed changes to both formularies. There was discussion in different areas, the main points/questions:

- Is there a need for Diabact UBT, to check with the NICE Dyspepsia guidance about treating/testing for H.pylori
- PPI:
  - Choice of omeprazole tablets, MUPS can be used in MDS so agreed to delete tablets
  - MUPS are also now licensed for use in PEG tubes, the notes regarding esomeprazole to be amended in regard to PEG tubes
  - Lansoprazole, to include the dose for NSAID gastroprotection
  - To add notes regarding using a PPI for gastroprotection for patients taking an SSRI
- Infacol<sup>®</sup>, included for hospital use in pre-endoscopy. To add notes that it is available to purchase.
- It was agreed to add dicycloverine syrup as a liquid antispasmodic
- Metoclopramide, due to the MHRA warnings against chronic use it will not be referenced in this Chapter
- It was agreed to remove cimetidine from the formulary
- Macrogol, brand prescribing be highlighted (Laxido<sup>®</sup>)
- Magnesium Hydroxide, little used as a laxative. To change the colour to 'amber' and notes to indicate its use in hypomagnesaemia. JM to send Rebecca the appropriate doses.
- Lactulose and Macrogol to be changed to 'green'
- To add the cautions for use for phosphate enemas
- Diltiazem cream, to remain as second line as an unlicensed preparation. The most cost-effective preparation to be included
- Pancreatin, the need for the notes about high dose, non-formulary, preparations to be checked with the specialists. It was noted that the NHS England commissioning of cystic fibrosis treatments is for inhaled preparations, oral treatments would remain in primary care prescribing.
- H.pylori treatment regimens, to include as per the BNF and to remain in this chapter

**Action: Chapter to be bought back to the next meeting**

## 7 Chapter 11 Eye

This is a very draft merge of this chapter and has not been sent to any clinicians. Comments and questions were required from the meeting. There was discussion in different areas, the main points/questions:

- Paediatric prescribing guidance for conjunctivitis to be moved into the Antibacterial Guidance. Remaining notes to be removed.
- Administration aids, to increase the information and include the products
- Quinolone eye drops, all are being used. Can this be rationalised?
- The colour of the prostaglandin eye drops to remain as amber but to clearly indicate that generic latanoprost is the first line choice
- To suggest removing remove tafluprost

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- Sodium chloride 5% eye drops/ointment to be included as yellow
- Lubricants, to look at being able to rationalise the formulary choices. Lucy Wessels (SD&TCCG) has been doing some work in this area

There was discussion about encouraging generic prescribing. It was asked that a note be added about being aware of changes in container and methods of administration and the difficulties that patients whose vision is not good may have.

**8 Terms of reference** - deferred

**9 Recent drug approvals (including NICE)**

These were noted.

Renavit – this has been approved by the CPC. Specialist initiated drug.

**Action: GF to send the proposed formulary entry to the group**

**10 MHRA Drug Safety Update – September**

Noted, nothing to include in the formularies

**11 Formulary merger update**

It is hoped that Pain, Cardiovascular and possibly Respiratory will come to the next meeting

These was discussion about using an on-line consultation process when Chapters are reviewed, this was agreed.

It is proposed that the new on-line South & West Formulary will be launched when Chapters 1-6 have been completed. This is hoped to be early in the New Year.

**Any other business**

PM informed the meeting that there is now a Western Locality GP that will be able to be part of the Formulary Group

**Next meeting:** Friday 8<sup>th</sup> November 2013 2pm – 4:30pm The Watermark, Ivybridge PL21 0SZ

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<b>South and West Devon Formulary Group – Action log</b>			
<b>Date</b>	<b>Action</b>	<b>Responsible</b>	<b>Completed</b>
June 2013	To bring a revised osteoporosis pathway to future meeting	GF	
Sept 2013	An update on the dressings project to be given to the meeting after the next dressings meeting	TM	
Sept 2013	Updated ToR for discussion	GF	
Oct 2013	Antibacterial – to review and include the relevant appendices into the guidance	GF/ Graham Parsons	
Oct 2013	Chapter 1 Gastrointestinal - to be brought back to the next meeting	Rebecca Prosser	On the agenda
Oct 2013	Renavit – to send the proposed formulary entry to the group	GF	Complete