BLMK BLMK Wide Joint Formularies Newsletter





Medicines Formulary Additions & Changes (highlighted in yellow)

| Drug | Beds/Luton | Milton Keynes | Indication Chronic primary pain | Notes Note added for CPP |
|--|------------------------------|--|--|---|
| Paroxetine | Amber to green | Green | | |
| Duloxetine | Restricted Green to green | Red/Amber to green | Chronic primary pain | Note added for CPP |
| Sotrovimab IV | Added, Red | Added, Red | COVID national guidance | |
| Covid Vaccines Comirnaty®, Vaxzevria®, Spikevax®) | Added, Green | Added, Green | COVID vaccination | |
| Ronapreve IV | Added, Red | Added, Red | COVID national guidance | Extension of use in non- hospitalised patients |
| Paxlovid® | Added, Red | Added, Red | COVID national guidance | |
| Molnupiravir oral | Added, Red | Added, Red | COVID national guidance | |
| Estradiol hemihydrate (Elleste Solo®) | Added, Amber SCG | Green with Amber SCG exception | Transgender SCG male to female | |
| Chloral hydrate oral | Amber to Red | Red | In line wi update - Insomnia prescript preferred paediatri | |
| Teriparatide (Terrosa®) subcu- taneous | Added, Red | Red Osteoporosis & corticosteroid-induced osteoporosis | | Biosimilar brand Terrosa added to Formulary- secondary care 1 st choice brand |
| Evolve Revive® eye drops | Added, Amber | Added, Amber 1 | Severe Dry Eye | 2nd line after hyalu- ronate product has failed |
| VisuEvo® eye drops | Added, Amber | Added, Amber 1 | Meibomian gland disease (dry eye) | |
| Paravit CF® | Added, Amber Restrict- ed | Added, Amber 1 | Vitamin supplement for Cystic fibrosis | |
| DEKAs® | Amber Restricted | Added, Amber 1 | Vitamin supplement for Cystic fibrosis | |
| Forceval [®] Soluble | Green Restricted | Added, Restricted green | Vitamin supplement | For patients with swal- lowing difficulties |
| | | Added, Amber 1 | Vitamin supplement | 1st line choice at MK |
| Pancrex V® | Green | Added, Green | Powder for patients with PEG unable to take Creon capsules | |
| Duraphat [®] toothpaste | Red | Non-Formulary | For hospital inpatient only | Not for GP prescribing |
| | | | Narcolepsy with cataplexy in adults aged 19 and old- | |
| Sodium oxybate | Added, Red | Red | er | |

• BLMK antimicrobial guidelines have been updated and associated changes made to the Formulary.

• <u>BLMK Dry eye guidance</u> has been updated and associated changes made to the Formulary.

| Latest NICE TA's (CCG commissioned): | | Bedford & Luton: | | |
|---|-------|--|--|--|
| | | Hospital only precribing | | |
| | | Suitable for GP prescribing following specialist intiation | | |
| | GREEN | Initiation in primary or secondary care within licensed/local recommendation | | |
| Cenobamate TA753 AMBER | SCG | Specialist initiation & stabilisation followed by GP continuation in line with shared care guideline | | |
| | BLACK | Product rejected locally or nationally. Do not prescribe. | | |
| Solriamfetol TA758 RED | | Milton Keynes: | | |
| | RR | Assessed and NOT approved for use by MKPAG. Do not prescribe. | | |
| Sodium zirconium cyclosilicate TA599 (update) RED | | Hospital only prescribing | | |
| | AMB 1 | Specialist recommendation followed by GP initiation and continuation | | |
| Fremanezumab TA764 (update) RED | | Specialist or GP initiation in line with local guidance after 1st line failure, folllowed by GP continuation | | |
| | AMB 3 | Specialist initiation & stabilisation followed by GP continuation | | |
| Upadacitinib TA768 RED | GREEN | Routine prescribing within licensed indication | | |
| | SCG | Specialist initiation & stabilisation followed by GP continuation in line with shared care guideline | | |

The following organisations contribute to and participate in the BLMK APC Formulary Subgroup – Bedfordshire, Luton and Milton Keynes Clinical Commissioning Group; Bedfordshire Hospitals NHS Foundation Trust; Cambridgeshire Community Services NHS Trust; Central and North West London NHS Foundation Trust; East London NHS Foundation Trust; Milton Keynes University Hospital NHS Foundation Trust.