

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	Adherence of local formulary to NICE						
,, ,	nereuse	, ,	Yes (mark 'x' if applicable)	N/A (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)		
2025-26									
Erdafitinib for treating unresectable or metastatic urothelial cancer with FGFR3 alterations after a PD-1 or PD-L1 inhibitor (TA1062)	12/05/2025	Erdafitinib — recommended, within its marketing authorisation, as an option for treating unresectable or metastatic urothelial cancer with susceptible FGFR3 genetic alterations in adults after at least 1 line of treatment for unresectable or metastatic cancer that included a PD 1 or PD L1 inhibitor. Erdafitinib is only recommended if the company provides it according to the commercial arrangement.		х	TBC	TBC	Shared for information with Urology teams (12/05/25). N/A MFT, patients are treated at the Christie Hospital. For noting at MMG meeting in Jun-25.		
Omaveloxolone for treating Friedreich's ataxia in people 16 years and over (terminated appraisal) (TA1061)	06/05/2025	Omaveloxolone – NOT RECOMMENDED for treating Friedreich's ataxia in people 16 years and over. This is because Biogen withdrew its evidence submission. NICE will review this decision if Biogen decides to make a new submission.		х	TBC	TBC	Shared for information with Adult and Paediatric Neurology teams (06/05/25). N/A MFT, not recommended by NICE. MMG to review at Jun-25 meeting.		
Osimertinib with pemetrexed and platinum- based chemotherapy for untreated EGFR mutation-positive advanced non-small-cell lung cancer (TA1060)	08/05/2025	Osimertinib with pemetrexed and platinum-based chemotherapy — recommended, within its marketing authorisation, as an option for untreated advanced non-small-cell lung cancer (NSCLC) in adults whose tumours have epidermal growth factor receptor (EGFR) exon 19 deletions or exon 21 (L858R) substitution mutations. Osimertinib with pemetrexed and platinum-based chemotherapy is only recommended if the company provides it according to the commercial arrangement.	х		TBC	TBC	Shared for information with Pulmonary Oncology team (08/05/25). Fast-track requested. Awaiting submission. MMG to review once submitted		
<b>Brentuximab vedotin</b> in combination for untreated stage 3 or 4 CD30-positive Hodgkin lymphoma ( <b>TA1059</b> )	07/05/2025	Brentuximab vedotin plus doxorubicin, dacarbazine and vinblastine — recommended, within its marketing authorisation, as an option for untreated stage 3 or 4 CD30 positive Hodgkin lymphoma in adults. It can only be used if the company provides it according to the commercial arrangement.	х		08/05/2025	1	Shared for information with Adult Haematology teams (07/05/25). Fast-track submitted. Approved at MMG (08/05/25).		
Leniolisib for treating activated phosphoinositide 3-kinase delta syndrome in people 12 years and over (HST33)	23/04/2024	Leniolisib – recommended, within its marketing authorisation, for treating activated phosphoinositide  3 kinase delta syndrome (APDS) in people 12 years and over. Leniolisib is recommended only if the company provides it according to the commercial arrangement.	ТВС	ТВС	TBC	TBC	Shared for information with Paediatric Immunology team (23/04/25). Awaiting confirmation if MFT will be a commissioned centre to offer treatment.		
Tislelizumab in combination for untreated advanced non-small-cell lung cancer (terminated appraisal) (TA1058)		<b>Tislelizumab</b> in combination— <b>NOT RECOMMENDED</b> for untreated advanced non-small-cell lung cancer in adults. This is because BeiGene did not provide an evidence submission. The company has confirmed that it does not intend to make a submission for the appraisal because the technology will not be launched in the UK for this indication.		х	08/05/2025	380	Shared for information with Pulmonary Oncology team (23/04/25). N/A MFT, not recommended by NICE. MMG deemed N/A (08/05/25).		
Relugolix—estradiol—norethisterone for treating symptoms of endometriosis (TA1057)	16/04/2025	Relugolix-estradiol-norethisterone (relugolix combination therapy [CT]) – recommended as an option for treating symptoms of endometriosis in adults of reproductive age who have had medical or surgical treatment for endometriosis.	х		TBC	TBC	Shared for information with Gynaecology team (16/04/25). Fast-track being prepared. For review at MMG once submitted.		
<b>Molnupiravir</b> for treating COVID-19 ( <b>TA1056</b> )		Molnupiravir – recommended as an option for treating mild to moderate COVID 19 in adults who have a positive SARS CoV 2 test, only if:  • they have 1 or more risk factors for progression to severe COVID 19 (as defined in section 5 of NICE's technology appraisal guidance on nirmatrelvir plus ritonavir, sotrovimab and tocilizumab for treating COVID-19) and  • both nirmatrelvir plus ritonavir and sotrovimab are contraindicated or unsuitable.	х		TBC	TBC	Shared for information with Antimicrobial team (16/04/25). Fast-track being prepared. For review at MMG once submitted.		

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	ormulary to NICE
			Yes (mark 'x' if applicable)	N/A (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (davs)	Notes (e.g. rationale, method of making available)
Rucaparib for maintenance treatment of advanced ovarian, fallopian tube and peritoneal cancer after response to first-line platinum-based chemotherapy (TA1055)		Rucaparib— recommended as an option for the maintenance treatment of advanced (International Federation of Gynecology and Obstetrics [FIGO] stages 3 and 4) high-grade epithelial ovarian, fallopian tube or primary peritoneal cancer after complete or partial response to first-line platinum-based chemotherapy in adults, only if:  it is BRCA mutation-negative and homologous recombination deficiency (HRD)-positive, or  it is BRCA mutation-negative, and HRD status is negative or unknown, and bevacizumab is not a treatment option because:  NHS England's BEV3 and BEV10 commissioning approval criteria for having it are not met, or  it is contraindicated or not tolerated, and  the company provides rucaparib according to the commercial arrangement.		х	08/05/2025	22	Shared for information with Gynaecology team (16/04/25). N/A MFT, patients are treated at the Christie Hospital. Noted at MMG (08/05/25).
Ruxolitinib for treating acute graft versus host disease that responds inadequately to corticosteroids in people 12 years and over (TA1054)		Ruxolitinib – recommended, within its marketing authorisation, as an option for treating acute graft versus host disease (GvHD) that has an inadequate response to corticosteroids in people 12 years and over. Ruxolitinib is only recommended if the company provides it according to the commercial arrangement.	х		07/05/2025	22	Shared for information with Adult and Paediatric Haematology teams (15/04/25). Fast-track submitted (28/03/25). Approved at PMMG (07/05/25) and MMG (08/05/25).
Cladribine for treating active relapsing forms of multiple sclerosis (TA1053)		Cladribine— recommended as an option for treating active relapsing forms of multiple sclerosis in adults, only:  • if they have active relapsing—remitting multiple sclerosis, and • when high-efficacy disease-modifying therapies would be offered.		х	08/05/2025	23	Shared for information with Neurology team (15/04/25). N/A MFT, patients are treated at MS centre at NCA. Noted at MMG (08/05/25).
Pegylated liposomal irinotecan in combination for untreated metastatic pancreatic cancer (terminated appraisal) (TA1052)	02/04/2025	Pegylated liposomal irinotecan plus oxaliplatin, 5-fluorouracil and leucovorin — NOT RECOMMENDED for untreated metastatic pancreatic cancer in adults. This is because Servier has confirmed that it does not intend to make an evidence submission for the appraisal. Servier considers that there is unlikely to be enough evidence that the technology is a cost-effective use of NHS resources for this population.		х	08/05/2025	36	Shared for information with Gastroenterology / HPB teams (02/04/25). N/A MFT, not recommended by NICE. MMG deemed N/A (08/05/25).
Efanesoctocog alfa for treating and preventing bleeding episodes in haemophilia A in people 2 years and over (TA1051)	0=,01,=0=0	Efanesoctocog alfa — recommended as an option for treating and preventing bleeding episodes in people 2 years and over with haemophilia A (congenital factor VIII deficiency), only if:  • they have a factor VIII activity level of less than 1% (severe haemophilia A)  • the company provides it according to the commercial arrangement.	х		02/04/2025	0	Shared for information with Paediatric HaemOnc team (02/04/25). Fast-track submitted (13/03/25). Approved at PMMG (02/04/25).
Olipudase alfa for treating acid sphingomyelinase deficiency (Niemann–Pick disease) type AB and type B (HST32)	02/01/2020	Olipudase alfa — not recommended, within its marketing authorisation, for treating acid sphingomyelinase deficiency (ASMD; Niemann–Pick disease) in people with type AB or type B.		х	07/05/2025	35	Shared for information with Paediatric Metabolic team (02/04/25). N/A MFT, not recommended by NICE. For noting at PMMG (07/05/25).
		TOTAL	6	7			
			% "Yes"	% "N/A"	-	Average implement time(days)	
Adherence statistics for 2024-25			46%	54%		65	



Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release		Adherence of local formulary to NICE						
	Nereuse	marcated by MCE	Yes (mark 'x' if applicable)	N/A (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)		
2024-25									
Fenfluramine for treating seizures associated with Lennox–Gastaut syndrome in people 2 years and over (TA1050)	23, 33, 232	Fenfluramine – recommended as an option for treating seizures associated with Lennox–Gastaut syndrome (LGS), as an add-on to other antiseizure medicines, for people 2 years and over. It is recommended only if:  • the frequency of drop seizures is checked every 6 months, and fenfluramine is stopped if the frequency is not reduced by at least 30% compared with the 6 months before starting treatment  • the company provides it according to the commercial arrangement.	х		02/04/2025	7	Shared for information with Paediatric Neurology team (26/03/25). Fast-track submitted. Approved at PMMG meeting (02/04/25).		
Blinatumomab with chemotherapy for consolidation treatment of Philadelphia-chromosome-negative CD19-positive minimal residual disease-negative B-cell precursor acute lymphoblastic leukaemia (TA1049)	24,00,2020	Blinatumomab with chemotherapy – can be used as an option to treat Philadelphia-chromosomenegative CD19-positive B-cell precursor acute lymphoblastic leukaemia (ALL) in adults, if:  • the leukaemia is minimal residual disease-negative  • it is used at the start of consolidation treatment  • the company provides it according to the commercial arrangement.	х		ТВС	ТВС	Shared for information with Adult Haematology team (26/03/25). Fast-track submitted, for approval at MMG meeting (08/05/25).		
Lisocabtagene maraleucel for treating relapsed or refractory large B-cell lymphoma after first-line chemoimmunotherapy when a stem cell transplant is suitable (TA1048)	20,00,2020	Lisocabtagene maraleucel (liso cel) — recommended as an option for treating large B cell lymphoma that is refractory to, or has relapsed within 12 months after, first-line chemoimmunotherapy in adults with:  • diffuse large B cell lymphoma • high-grade B cell lymphoma • primary mediaŝtinal large B-cell lymphoma, or • follicular lymphoma grade 3B. Liso-cel is recommended only if: • an autologous stem cell transplant would be considered suitable, and • the company provides it according to the commercial arrangement.	х		10/04/2025	15	Shared for information with Adult Haematology team (26/03/25). Approved at ATMP group in Apr-25. Noted at MMG meeting (10/04/25).		
Atezolizumab for untreated advanced or recurrent non-small-cell lung cancer when platinum-doublet chemotherapy is unsuitable (terminated appraisal) (TA1047)	12,00,2023	Atezolizumab — NOT RECOMMENDED for untreated advanced or recurrent non-small-cell lung cancer when platinum-doublet chemotherapy is unsuitable in adults. This is because Roche Products has confirmed that it does not intend to make an evidence submission for the appraisal. Roche Products considers that there is unlikely to be enough evidence that the technology is a cost-effective use of NHS resources in this population.		х	10/04/2025	29	Shared for information with Pulmonary Oncology team (12/03/25). N/A MFT, not recommended by NICE. Noted at MMG (10/04/25).		
Zolbetuximab with chemotherapy for untreated claudin-18.2-positive HER2-negative unresectable advanced gastric or gastro-oesophageal junction adenocarcinoma (TA1046)		Zolbetuximab with fluoropyrimidine- and platinum-based chemotherapy — NOT RECOMMENDED, within its marketing authorisation, for untreated, locally advanced, unresectable or metastatic, claudin-18.2-positive, HER2-negative, gastric or gastro-oesophageal junction adenocarcinoma in adults.		х	10/04/2025	29	Shared for information with Gastroenterology team (12/03/25). N/A MFT, not recommended by NICE. Noted at MMG (10/04/25).		

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	indicated by NICE	Adherence of local formulary to NICE						
			<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (davs)	Notes (e.g. rationale, method of making available)		
12 SQ-HDM SLIT for treating allergic rhinitis and allergic asthma caused by house dust mites (TA1045)	05/03/2025	Allergic rhinitis  12 standard quality house dust mite sublingual lyophilisate (SQ-HDM SLIT) — recommended, within its marketing authorisation, as an option for treating moderate to severe house dust mite allergic rhinitis in people 12 to 65 years that is:  • diagnosed by clinical history and a positive test of house dust mite sensitisation (skin prick test or specific immunoglobulin E [IgE]) and  • persistent despite use of symptom-relieving medicine.  Allergic asthma  12 SQ HDM SLIT— NOT RECOMMENDED, within its marketing authorisation, for treating house dust mite allergic asthma in adults that is:  • diagnosed by clinical history and a positive test of house dust mite sensitisation (skin prick test or specific IgE) and  • associated with mild to severe house dust mite allergic rhinitis and  • not well controlled by inhaled corticosteroids.	x		TBC	TBC	Shared for information with Adult / Paediatric Allergy Immunology teams (05/03/25). Approved at PMMG Sep-24. For review at PMMG meeting (07/05/25) and MMG (08/05/25).		
Exagamglogene autotemcel for treating severe sickle cell disease in people 12 years and over (TA1044)	26/02/2025	Exagamglogene autotemcel — recommended with managed access as an option for treating sickle cell disease (SCD) in people 12 years and over:  • who have: • orecurrent vaso-occlusive crises (VOCs) and • a βS/βS, βS/β+ or βS/β0 genotype and • when haematopoietic stem cell transplant (HSCT) is suitable, but a human leukocyte antigen-matched related haematopoietic stem cell donor is not available.  It is only recommended: • for people who have had at least 2 VOCs (as defined in section 3.4) per year during the 2 previous years and • if the conditions in the managed access agreement for exa cel are followed.	x		13/03/2025	15	Shared for information with Adult / Paediatric Haematology team (26/02/25). Approved at ATMP group. Noted at MMG meeting (13/03/25).		
Osimertinib for adjuvant treatment of EGFR mutation-positive non-small-cell lung cancer after complete tumour resection (updates & replaces TA761) (TA1043)	26/02/2025	Osimertinib — recommended, within its marketing authorisation, as an option for the adjuvant treatment of stage 1b to 3a non small cell lung cancer (NSCLC) after complete tumour resection. It is for adults whose tumours have epidermal growth factor receptor (EGFR) exon 19 deletions or EGFR exon 21 (L858R) substitution mutations. It is only recommended if:  • osimertinib is stopped at 3 years, or earlier if there is disease recurrence or unacceptable toxicity and • the company provides it according to the commercial arrangement.	х		13/03/2025	15	Shared for information with Pulmonary Oncology team (26/02/25). Approved in line with TA761 & CDF (Feb-22). Confirmation of switch to routine commissioning noted at MMG meeting (13/03/25).		
Selpercatinib for previously treated RET fusion- positive advanced non-small-cell lung cancer (updates & replaces TA760) (TA1042)	19/02/2025	Selpercatinib— recommended as an option for treating RET fusion-positive advanced non-small-cell lung cancer (NSCLC) that has not been treated with a RET inhibitor in adults, only if:  • it has been treated before and  • the company provides selpercatinib according to the commercial arrangement.	х		13/03/2025	22	Shared for information with Pulmonary Oncology team (19/02/25). Approved in line with TA760 & CDF (Feb-22). Confirmation of switch to routine commissioning noted at MMG meeting (13/03/25).		
<b>Durvalumab</b> with etoposide and either carboplatin or cisplatin for untreated extensive-stage small-cell lung cancer ( <b>TA1041</b> )	19/02/2025	Durvalumab with etoposide and either carboplatin or cisplatin – recommended as an option for untreated extensive-stage small-cell lung cancer in adults, only if:  • they have an Eastern Cooperative Oncology Group (ECOG) performance status of 0 or 1, and  • the company provides durvalumab according to the commercial arrangement.	х		09/01/2025	-41	Shared for information with Pulmonary Oncology team (19/02/25). Fast-track approved at MMG meeting (09/01/25).		
Olaparib for treating BRCA mutation-positive HER2-negative advanced breast cancer after chemotherapy (TA1040)	12/02/2025	Olaparib — recommended, within its marketing authorisation, as an option for treating HER2-negative locally advanced or metastatic breast cancer with germline BRCA1 or BRCA2 mutations in adults who have had:  • an anthracycline and a taxane as neoadjuvant or adjuvant treatment, or for metastatic disease, unless these are not suitable, and • endocrine therapy if they have hormone receptor (HR)-positive breast cancer, unless this is not suitable.  Olaparib — only recommended if the company provides it according to the commercial arrangement.		х	13/03/2025	29	Shared for information with Surgery and Breast teams (12/02/25). N/A MFT, patients referred to Christie Hospital. MMG deemed N/A (13/03/25).		
Selpercatinib for advanced thyroid cancer with RET alterations untreated with a targeted cancer drug in people 12 years and over (TA1039)	12/02/2025	Selpercatinib – recommended as an option for treating:  advanced RET fusion-positive thyroid cancer that is refractory to radioactive iodine (if radioactive iodine is appropriate)  advanced RET-mutant medullary thyroid cancer.  It is for people 12 years and over and is recommended only if:  the cancer has not been treated with a targeted cancer drug, and  the company provides it according to the commercial arrangement.		х	13/03/2025	29	Shared for information with Endocrinology and Head & Neck teams (12/02/25). N/A MFT, patients referred to Christie Hospital. MMG deemed N/A (13/03/25).		

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	tion, as Adherence of local formulary to NICE					
		, and the second	<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (davs)	Notes (e.g. rationale, method of making available)	
Selpercatinib for advanced thyroid cancer with RET alterations after treatment with a targeted cancer drug in people 12 years and over (TA1038)	12/02/2025	Selpercatinib – recommended as an option in people 12 years and over for treating:  advanced RET fusion-positive thyroid cancer that is refractory to radioactive iodine (if radioactive iodine is appropriate), only if systemic treatment is needed after sorafenib or lenvatinib  advanced RET-mutant medullary thyroid cancer, only if systemic treatment is needed after cabozantinib or vandetanib.  Selpercatinib is only recommended if the company provides it according to the commercial arrangement.		х	13/03/2025	29	Shared for information with Endocrinology and Head & Neck teams (12/02/25). N/A MFT, patients referred to Christie Hospital. MMG deemed N/A (13/03/25).	
Pembrolizumab for adjuvant treatment of resected non-small-cell lung cancer (TA1037)	05/02/2025	Pembrolizumab — recommended, within its marketing authorisation, as an option for the adjuvant treatment of non-small-cell lung cancer (NSCLC) with a high risk of recurrence after complete resection and platinum-based chemotherapy in adults. Pembrolizumab is only recommended if the company provides it according to the commercial arrangement.	х		09/01/2025	-27	Shared for information with Pulmonary Oncology team (05/02/25). Fast-track approved at MMG meeting (09/01/25).	
Elacestrant for treating oestrogen receptor- positive HER2-negative advanced breast cancer with an ESR1 mutation after endocrine treatment (TA1036)	05/02/2025	Elacestrant — recommended as an option for treating oestrogen receptor (ER)-positive HER2-negative locally advanced or metastatic breast cancer with an activating ESR1 mutation that has progressed after at least 1 line of endocrine treatment plus a cyclin-dependent kinase (CDK) 4 and 6 inhibitor in:  • women, trans men and non-binary people who have been through the menopause  • trans women and men.  Elacestrant is recommended only if:  • the cancer has progressed after at least 12 months of endocrine treatment plus a CDK 4 and 6 inhibitor, and  • the company provides it according to the commercial arrangement.		х	13/03/2025	36	Shared for information with Surgery and Breast teams (05/02/25). N/A MFT, patients referred to Christie Hospital. MMG deemed N/A (13/03/25).	
Vadadustat for treating symptomatic anaemia in adults having dialysis for chronic kidney disease (TA1035)	23/01/2025	Vadadustat – recommended, within its marketing authorisation, as an option for treating symptomatic anaemia caused by chronic kidney disease in adults having maintenance dialysis. Vadadustat is only recommended if the company provides it according to the commercial arrangement.	х		13/03/2025	49	Shared for information with Renal team (23/01/25). Fast-track approved at MMG meeting (13/03/25).	
Anhydrous sodium thiosulfate for preventing hearing loss caused by cisplatin chemotherapy in people 1 month to 17 years with localised solid tumours (TA1034)	22/01/2025	Anhydrous sodium thiosulfate — recommended for preventing hearing loss caused by cisplatin chemotherapy in people 1 month to 17 years with localised, non-metastatic solid tumours. It is only recommended if the company provides it according to the commercial arrangement.	x		05/02/2025	14	Shared for information with Paediatric HaemOnc team (16/01/25). Fast-track approved at PMMG meeting (05/02/25).	
Ganaxolone for treating seizures caused by CDKL5 deficiency disorder in people 2 years and over (TA1033)	12/02/2025	Ganaxolone — NOT RECOMMENDED, within its marketing authorisation, as an add-on treatment option for seizures caused by cyclin-dependent kinase like 5 (CDKL5) deficiency disorder (CDD) in children and young people aged 2 to 17 years and adults who turn 18 while on treatment.		х	13/03/2025	29	Shared for information with Paediatric Neurology team (12/02/25). N/A MFT, not recommended by NICE. MMG deemed N/A (13/03/25).	
Niraparib with abiraterone acetate and prednisone for untreated hormone-relapsed metastatic prostate cancer (terminated appraisal) (TA1032)	22/01/2025	Niraparib with abiraterone acetate and prednisone — NOT RECOMMENDED for untreated hormone- relapsed metastatic prostate cancer in adults. This is because Johnson & Johnson Innovative Medicine has confirmed that it does not intend to make an evidence submission for the appraisal. Johnson & Johnson Innovative Medicine considers that the technology is unlikely to be used at this point in the treatment pathway.		х	13/02/2025	22	Shared for information with Urology Oncology team (22/01/25). N/A MFT, not recommended by NICE. MMG deemed N/A (13/02/25).	
Vamorolone for treating Duchenne muscular dystrophy in people 4 years and over (TA1031)	16/01/2025	Vamorolone – recommended, within its marketing authorisation, as an option for treating Duchenne muscular dystrophy (DMD) in people 4 years and over. Vamorolone is only recommended if the company provides it according to the commercial arrangement.	х		05/02/2025	20	Shared for information with Paediatric Neurology team (16/01/25). Fast-track approved at PMMG meeting (05/02/25).	
<b>Durvalumab</b> with chemotherapy before surgery (neoadjuvant) then alone after surgery (adjuvant) for treating resectable non-small-cell lung cancer ( <b>TA1030</b> )	15/01/2025	Durvalumab – recommended, within its marketing authorisation, as neoadjuvant treatment with platinum-based chemotherapy, then continued alone as adjuvant treatment, for treating non-small-cell lung cancer (NSCLC) in adults whose cancer:  • is resectable (tumours 4 cm or over, or node positive) and  • has no epidermal growth factor receptor (EGFR) mutations or anaplastic lymphoma kinase (ALK) rearrangements.  Durvalumab is only recommended if the company provides it according to the commercial arrangement.	x		13/02/2025	29	Shared for information with Pulmonary Oncology team (15/01/25). Fast-track approved at MMG Feb-25 meeting.	
Andexanet alfa for reversing anticoagulation in people with intracranial haemorrhage (terminated appraisal) (TA1029)	15/01/2025	Andexanet alfa— NOT RECOMMENDED for reversing anticoagulation from apixaban or rivaroxaban in adults with life-threatening or uncontrolled bleeding in the skull (intracranial haemorrhage). This is because AstraZeneca has confirmed that it does not intend to make an evidence submission for the appraisal. AstraZeneca considers that currently there is not enough evidence that the technology is a cost-effective use of NHS resources in this population.		х	13/02/2025	29	Shared for information with Anticoagulant / Neurology teams (15/01/25). N/A MFT, not recommended by NICE. MMG deemed N/A (13/02/25).	
Bimekizumab for treating moderate to severe hidradenitis suppurativa (terminated appraisal) (TA1028)	15/01/2025	Bimekizumab – NOT RECOMMENDED for treating moderate to severe hidradenitis suppurativa in adults. This is because UCB Pharma withdrew from the appraisal. UCB Pharma could not agree an economically sustainable route to reimbursement for this additional indication.		х	13/02/2025	29	Shared for information with Dermatology team (15/01/25). N/A MFT, not recommended by NICE. MMG deemed N/A (13/02/25).	

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	Adherence of local formulary to NICE					
			<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (davs)	Notes (e.g. rationale, method of making available)	
<b>Tebentafusp</b> for treating advanced uveal melanoma ( <b>TA1027</b> )	09/01/2025	<b>Tebentafusp</b> — recommended, within its marketing authorisation, for treating HLA A*02:01-positive unresectable or metastatic uveal melanoma in adults. Tebentafusp is only recommended if the company provides it according to the commercial arrangement.		х	13/02/2025	35	Shared for information with Ophthalmology team (09/01/25). N/A MFT, patients referred to Liverpool. MMG deemed N/A (13/02/25).	
Tirzepatide for managing overweight and obesity (TA1026)	23/12/2024	Tirzepatide – recommended as an option for managing overweight and obesity, alongside a reduced- calorie diet and increased physical activity in adults, only if they have:  • an initial body mass index (BMI) of at least 35 kg/m2 and  • at least 1 weight-related comorbidity. Use a lower BMI threshold (usually reduced by 2.5 kg/m2) for people from South Asian, Chinese, other Asian, Middle Eastern, Black African or African-Caribbean ethnic backgrounds.		х	13/02/2025	52	Shared for information with Endocrinology team (23/12/24). Currently no commisioned wight management service at MFT. Therefore N/A, patients to be referred to NCA. MMG deemed N/A (13/02/25).	
Ublituximab for treating relapsing multiple sclerosis (TA1025)	18/12/2024	Ublituximab – recommended as an option for treating relapsing forms of multiple sclerosis, defined as active by clinical or imaging features in adults, only if:  • the multiple sclerosis is relapsing–remitting, and  • the company provides it according to the commercial arrangement.		х	09/01/2025	22	Shared for information with Neurology team (18/12/24). N/A MFT, patients are treated at NCA. MMG deemed N/A Jan-25 meeting.	
Toripalimab with chemotherapy for untreated advanced oesophageal squamous cell cancer (terminated appraisal) (TA1024)	11/12/2024	Toripalimab – NOT RECOMMENDED with chemotherapy for untreated advanced oesophageal squamous cell cancer in adults. This is because Shanghai Junshi Bioscience has requested a delay to the evidence submission.		х	09/01/2025	29	Shared for information with Gastroenterology team (11/12/24). N/A MFT, not recommended by NICE. MMG deemed N/A Jan-25 meeting.	
Elranatamab for treating relapsed and refractory multiple myeloma after 3 or more treatments (TA1023)	11/12/2024	Elranatamab – recommended with managed access as an option for treating relapsed and refractory multiple myeloma in adults, only after 3 or more lines of treatment (including an immunomodulatory drug, a proteasome inhibitor and an anti CD38 antibody) when the multiple myeloma has progressed on the last treatment. It is only recommended if the conditions in the managed access agreement for elranatamab are followed.	х		13/02/2025	64	Shared for information with Haematology team (11/12/24). Fast-track approved at MMG Feb-25 meeting.	
<b>Bevacizumab gamma</b> for treating wet agerelated macular degeneration ( <b>TA1022</b> )	04/12/2024	Bevacizumab gamma— recommended as an option for treating wet age-related macular degeneration in adults, only if:  • the eye has a best-corrected visual acuity between 6/12 and 6/96  • there is no permanent structural damage to the central fovea  • the lesion size is 12 disc areas or less in greatest linear dimension  • there are signs of recent disease progression (for example, blood vessel growth as shown by fluorescein angiography, or recent visual acuity changes)  • the company provides it according to the commercial arrangement.	х		30/12/2024	26	Shared for information with Macular team (04/12/24). Fast-track submitted. Approved MMG chair (30/12/24)Noted at MMG Jan-25 meeting.	
Crizotinib for treating ROS1-positive advanced non-small-cell lung cancer (updates & replaces TA529) (TA1021)	04/12/2024	Crizotinib – recommended as an option for treating ROS1-positive advanced non-small-cell lung cancer in adults, only if:  they have not had ROS1 inhibitors  the company provides it according to the commercial arrangement.	х		12/12/2024	8	Shared for info Pulmonary Oncology team (04/12/24). Approved Jul-18 in line with NICE TA529/CDF. Switch to routine commissioning from CDF. MMC approved at Dec-24 meeting.	
<b>Eplontersen</b> for treating hereditary transthyretin-related amyloidosis ( <b>TA1020</b> )	27/11/2024	<b>Eplontersen</b> — recommended, within its marketing authorisation, as an option for treating hereditary transthyretin-related amyloidosis in adults with stage 1 or stage 2 polyneuropathy. It is only recommended if the company provides eplontersen according to the commercial arrangement.		х	12/12/2024	15	Shared for info Cardiology, Neurology, Haematology & Renal teams (27/11/24). N/A MFT, patients referred to the National Amyloidosis Centre for treatment at Royal Free Hospital , London. MMC deemed N/A at Dec-24 meeting.	
Crovalimab for treating paroxysmal nocturnal haemoglobinuria in people 12 years and over (TA1019)	20/11/2024	Crovalimab – recommended, within its marketing authorisation, as an option for treating paroxysmal nocturnal haemoglobinuria in people 12 years and over who weigh 40 kg or more. It is recommended for people who:  • have haemolysis with clinical symptoms indicating high disease activity  • are clinically stable after having a complement component 5 inhibitor for at least the past 6 months.  Crovalimab is only recommended if the company provides it according to the commercial arrangement.		х	12/12/2024	22	Shared for info Haematology team (20/11/24). N/A MFT, patients referred to the Commissioned Treatment Centre for PNH in Leeds. MMC deemed N/A at Dec-24 meeting.	
Fedratinib for treating disease-related splenomegaly or symptoms in myelofibrosis (updates & replaces TA756) (TA1018)	20/11/2024	Fedratinib – recommended as an option for treating disease-related splenomegaly or symptoms of primary myelofibrosis, post-polycythaemia vera myelofibrosis or post-essential thrombocythaemia myelofibrosis. It is recommended for adults, only if:  • they have had ruxolitinib, and • momelotinib is unsuitable, and • the company provides fedratinib according to the commercial arrangement.	х		12/12/2024	22	Shared for info Haematology team (20/11/24). Approved Jan-22 in line with NICE TA756/CDF. Switch to routine commissioning from CDF. For review at MMC Dec-24 meeting.	

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	a, as Adherence of local formulary to NICE					
			<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (davs)	Notes (e.g. rationale, method of making available)	
Pembrolizumab with chemotherapy before surgery (neoadjuvant) then alone after surgery (adjuvant) for treating resectable non-small-cell lung cancer (TA1017)	20/11/2024	Pembrolizumab – recommended, within its marketing authorisation, as an option for neoadjuvant treatment with platinum-based chemotherapy, then continued alone as adjuvant treatment, for resectable non-small-cell lung cancer (NSCLC) with a high risk of recurrence in adults. Pembrolizumab is only recommended if the company provides it according to the commercial arrangement.	x		12/12/2024	22	Shared for info with Pulmonary Oncology team (20/11/24). Fast-track submitted. MMC approved Dec-24 meeting.	
Elafibranor for previously treated primary biliary cholangitis (TA1016)	14/11/2024	Elafibranor – recommended, within its marketing authorisation, as an option for treating primary biliary cholangitis in adults, when used:  • with ursodeoxycholic acid (UDCA), if the primary biliary cholangitis has not responded well enough to UDCA, or  • alone, if UDCA cannot be tolerated.  Elafibranor is only recommended if the company provides it according to the commercial arrangement.	x		14/11/2024	0	Shared for info with Hepatology team (14/11/24). Fast-track submitted (23/10/24). MMC approved at Nov-24 meeting.	
Teclistamab for treating relapsed and refractory multiple myeloma after 3 or more treatments (updates & replaces TA869) (TA1015)	13/11/2024	Teclistamab – recommended as an option for treating relapsed and refractory multiple myeloma in adults, only after 3 or more lines of treatment (including an immunomodulatory drug, a proteasome inhibitor and an anti-CD38 antibody) when the myeloma has progressed on the last treatment. It is only recommended if the company provides teclistamab according to the commercial arrangement.	х		08/08/2024	-97	Shared for info with haematology team (13/11/24). MMC approved CDF (08/08/24). Confirmation received of switch to routine commissioning. MMC approved and noted at Nov-24 meeting.	
Alectinib for adjuvant treatment of ALK-positive non-small-cell lung cancer (TA1014)	13/11/2024	Alectinib— recommended, within its marketing authorisation, as an option for the adjuvant treatment of stage 1B (tumours 4 cm or larger) to 3A ALK-positive non-small-cell lung cancer (NSCLC) after complete tumour resection in adults. It is only recommended if the company provides it according to the commercial arrangement.	х		14/11/2024	1	Shared for info with Pulmonary Oncology team (13/11/24). Fast-track submitted (18/10/24). MMC approved at Nov-24 meeting.	
Quizartinib for induction, consolidation and maintenance treatment of newly diagnosed FLT3-ITD-positive acute myeloid leukaemia (TA1013)	23/10/2024	Quizartinib – recommended, within its marketing authorisation, as an option for newly diagnosed FLT3 ITD positive acute myeloid leukaemia (AML) in adults, when used:  • with standard cytarabine and anthracycline chemotherapy as induction treatment, then  • with standard cytarabine chemotherapy as consolidation treatment, then  • alone as maintenance treatment.  • Quizartinib is only recommended if the company provides it according to the commercial arrangement.	x		14/11/2024	22	Shared for info with haematology team (23/10/24). Fast-track submitted. MMC approved at Nov-24 meeting.	
Avapritinib for treating advanced systemic mastocytosis (TA1012)	06/11/2024	Avapritinib – recommended, within its marketing authorisation, as an option for treating advanced systemic mastocytosis (including aggressive systemic mastocytosis, systemic mastocytosis with an associated haematological neoplasm and mast cell leukaemia) in adults. Avapritinib is only recommended if the company provides it according to the commercial arrangement.	х		14/11/2024	8	Shared for info with haematology team (06/11/24). Fast-track submitted. MMC approved at Nov-24 meeting.	
Belzutifan for treating tumours associated with von Hippel-Lindau disease (TA1011)	16/10/2024	Belzutifan – recommended with managed access as an option for treating von Hippel-Lindau (VHL) disease in adults:  • who need treatment for VHL associated renal cell carcinomas, central nervous system hemangioblastomas or pancreatic neuroendocrine tumours, and  • when localised procedures are unsuitable or undesirable.  It is only recommended if the conditions in the managed access agreement for belzutifan are followed.		х	14/11/2024	29	Shared for info with haematology, renal, hepatology & ophthalmology teams (16/10/24). N/A MFT patients referred to Commissioned centre at Christie hospital for treatment. MMC deemed N/A at Nov-24 meeting.	
Danicopan with ravulizumab or eculizumab for treating paroxysmal nocturnal haemoglobinuria (TA1010)	23/10/2024	Danicopan – recommended, as an add-on to ravulizumab or eculizumab as an option for treating paroxysmal nocturnal haemoglobinuria (PNH) in adults who have residual haemolytic anaemia, only if:  • they have clinically significant extravascular haemolysis while on treatment with a complement component 5 inhibitor (C5 inhibitor) and  • the company provides it according to the commercial arrangement.		х	14/11/2024	22	Not on Trust formulary. Shared adult haematology team for information (23/10/24). N/A MFT, not commissioned, patients referred to PNH centre in Leeds. MMC deemed N/A at Nov-24 meeting.	
Latanoprost-netarsudil for previously treated primary open-angle glaucoma or ocular hypertension (TA1009)	02/10/2024	Latanoprost-netarsudil – recommended as an option for reducing intraocular pressure (IOP) in adults with primary open-angle glaucoma or ocular hypertension when a prostaglandin analogue alone has not reduced IOP enough, only if:  • they have then tried a fixed-dose combination treatment and it has not reduced IOP enough, or  • a fixed-dose combination treatment containing beta-blockers is unsuitable.	х		10/10/2024	8	Not on Trust formulary. Shared with adult macular team for information (02/10/24). Fast-track submitted. MMC approved at Oct-24 meeting.	
<b>Trifluridine—tipiracil</b> with <b>bevacizumab</b> for treating metastatic colorectal cancer after 2 systemic treatments ( <b>TA1008</b> )	25/09/2024	Trifluridine—tipiracil with bevacizumab— recommended, within its marketing authorisation, for treating metastatic colorectal cancer in adults who have had 2 lines of treatment (including fluoropyrimidine-, oxaliplatin- and irinotecan-based chemotherapies, antivascular endothelial growth factor or antiepidermal growth factor receptor treatments). Trifluridine—tipiracil with bevacizumab is only recommended if the company provides trifluridine—tipiracil according to the commercial arrangement.		х	10/10/2024	15	Not on Trust formulary for this indication. Shared adult colorectal teams for information (25/09/24). N/A MFT, not commissioned, patients referred to Christie hospital. MMC deemed N/A at Oct-24 meeting.	

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	Adherence of local formulary to NICE						
			<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (davs)	Notes (e.g. rationale, method of making available)		
Rucaparib for maintenance treatment of relapsed platinum-sensitive ovarian, fallopian tube or peritoneal cancer (updates & replaces TA611) (TA1007)	17/09/2024	Rucaparib – recommended, within its marketing authorisation, as an option for the maintenance treatment of relapsed platinum-sensitive high-grade epithelial, ovarian, fallopian tube or primary peritoneal cancer that has completely or partially responded to platinum-based chemotherapy in adults. Rucaparib is only recommended if the company provides it according to the commercial arrangement.		x	10/10/2024	23	Not on Trust formulary for this indication. Shared adult gynaecology teams for information (17/09/24) N/A MFT, not commissioned, patients referred to Christie hospital. MMC deemed N/A at Oct-24 meeting.		
Empagliflozin for treating type 2 diabetes in people 10 to 17 years (TERMINATED APPRAISAL) (TA1006)	12/09/2024	Empagliflozin – NOT RECOMMENDED for treating type 2 diabetes in people aged 10 to 17 years. This is because Boehringer Ingelheim has confirmed that it does not intend to make an evidence submission for the appraisal. Boehringer Ingelheim's view, which it has corroborated in consultation with healthcare professionals and other relevant decision makers, is that an appraisal will not add value.		х	10/10/2024	28	Not on Trust formulary for this indication. Shared adult and paediatric endocrinology teams for information (12/09/24). N/A MFT, not recommende by NICE. MMC deemed N/A Oct-24 meeting.		
Futibatinib for previously treated advanced cholangiocarcinoma with FGFR2 fusion or rearrangement (TA1005)	11/09/2024	Futibatinib – recommended, within its marketing authorisation, as an option for treating locally advanced or metastatic cholangiocarcinoma with a fibroblast growth factor receptor 2 (FGFR2) fusion or rearrangement that has progressed after at least 1 line of systemic treatment in adults. Futibatinib is only recommended if the company provides it according to the commercial arrangement.		х	10/10/2024	29	Not on Trust formulary. Shared with adult Hepatology / 3HPB teams for information (11/09/24). N/A MFT, patients referred to the Christie hospital. MMC deemed N/A Oct-24 meeting		
Faricimab for treating visual impairment caused by macular oedema after retinal vein occlusion (TA1004)	11/09/2024	Faricimab – recommended, within its marketing authorisation, as an option for treating visual impairment caused by macular oedema after central or branch retinal vein occlusion in adults. It is only recommended if the company provides it according to the commercial arrangement.	х		10/10/2024	29	Not on Trust formulary for this indication. Shared Macular team for information (11/09/24). Fast-trac submitted (NICE 30-day). MMC approved at Oct-2 meeting.		
Exagamglogene autotemcel for treating transfusion-dependent beta-thalassaemia in people 12 years and over (TA1003)	11/09/2024	Exagamglogene autotemcel (exa cel)— recommended with managed access as an option for treating transfusion-dependent beta-thalassaemia in people 12 years and over:  • when a haematopoietic stem cell transplant (HSCT) is suitable, but a human leukocyte antigen-matched related haematopoietic stem cell donor is not available  • only if the conditions in the managed access agreement for exa cel are followed.	х		10/10/2024	29	Not on Trust formulary. Shared with adult and paediatric haematology teams for information (11/09/24). ATMP approved (Aug-24). Fast-track submitted. MMC approved at Oct-24 meeting.		
Evinacumab for treating homozygous familial hypercholesterolaemia in people 12 years and over (TA1002)	11/09/2024	Evinacumab alongside diet and other low-density lipoprotein-cholesterol (LDL C) lowering therapies—recommended, within its marketing authorisation, as an option for treating homozygous familial hypercholesterolaemia (HoFH) in people 12 years and over. It is only recommended if the company provides it according to the commercial arrangement.	х		14/11/2024	64	Not on Trust formulary. Shared with adult and paediatric endocrinology / lipid teams for information (11/09/24). Fast-track submitted, for review by MMC at Nov-24 meeting.		
Zanubrutinib for treating marginal zone lymphoma after anti-CD20-based treatment (TA1001)	04/09/2024	Zanubrutinib— recommended, within its marketing authorisation, as an option for treating marginal zone lymphoma in adults who have had at least 1 anti CD20-based treatment. It is only recommended if the company provides it according to the commercial arrangement.	х		12/09/2024	8	Not on Trust formulary for this indication. Share Haematology teams for information (04/09/24). Factrack submitted. MMC approved (12/09/24).		
Iptacopan for treating paroxysmal nocturnal haemoglobinuria (TA1000)	04/09/2024	Iptacopan – recommended, within its marketing authorisation, as an option for treating paroxysmal nocturnal haemoglobinuria (PNH) in adults with haemolytic anaemia. Iptacopan is only recommended if the company provides it according to the commercial arrangement.		х	10/10/2024	36	Not on Trust formulary. Shared with adult and paediatric haematology teams for information (04/09/24). N/A MFT, not commissioned. Patient referred to PNH centre in Leeds. MMC deemed N/at Oct-24 meeting.		
<b>Vibegron</b> for treating symptoms of overactive bladder syndrome ( <b>TA999</b> )	04/09/2024	Vibegron— recommended as an option for treating the symptoms of overactive bladder syndrome in adults. It is only recommended if antimuscarinic medicines are not suitable, do not work well enough or have unacceptable side effects.  If people with the condition and their healthcare professional consider vibegron to be 1 of a range of suitable treatments, after discussing the advantages and disadvantages of all the options, the least expensive should be used. Administration costs, dosages, price per dose and commercial arrangements should all be taken into account.	х		14/11/2024	71	Not on Trust formulary. Shared Urology and Urogynaecology teams for information (04/09/24) Fast-track submitted. MMC approved (14/11/24).		
Risankizumab for treating moderately to severely active ulcerative colitis (TA998)	14/08/2024	Risankizumab – recommended as an option for treating moderately to severely active ulcerative colitis in adults when conventional or biological treatment cannot be tolerated, or the condition has not responded well enough or has lost response to treatment, only if:  • a tumour necrosis factor (TNF)-alpha inhibitor:  • has not worked (not responded well enough or has lost response to treatment), or o cannot be tolerated or is not suitable, and  • the company provides it according to the commercial arrangement.	х		12/09/2024	29	Not on Trust formulary for this indication. Share Gastroenterology teams for information (14/08/24 Fast-track submitted. MMC approved (12/09/24).		

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	ence of local fo	ormulary to NICE
			<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (davs)	Notes (e.g. rationale, method of making available)
Pembrolizumab with platinum- and fluoropyrimidine-based chemotherapy for untreated advanced HER2-negative gastric or gastro-oesophageal junction adenocarcinoma (TA997)	29/08/2024	Pembrolizumab with platinum- and fluoropyrimidine-based chemotherapy— recommended, within its marketing authorisation, as an option for untreated locally advanced unresectable or metastatic HER2 negative gastric or gastro-oesophageal junction adenocarcinoma in adults whose tumours express PD L1 with a combined positive score (CPS) of 1 or more. Pembrolizumab is only recommended if the company provides it according to the commercial arrangement.		х	12/09/2024	14	Not on Trust formulary for this indication. Shared Gastroenterology teams for information (29/08/24). N/A, patients referred to Christie hospital. MMC deemed N/A 12/09/24.
<b>Linzagolix</b> for treating moderate to severe symptoms of uterine fibroids ( <b>TA996</b> )	14/08/2024	Linzagolix – recommended as an option for treating moderate to severe symptoms of uterine fibroids in adults of reproductive age only if:  ■ it is intended to be used for longer-term treatment (normally for more than 6 months and not for people who need short-term treatment, for example, before planned surgery)  ■ the following dosage is used:  □ with hormonal add-back therapy (ABT): 200 mg once daily  □ without hormonal ABT: 200 mg once daily for 6 months, then 100 mg once daily.	х		12/11/2024	90	Not on Trust formulary. Shared Gynaecology teams for information (14/08/24). Fast track submitted. Approved chairs action Nov-24. For noting at MMC Dec-24 meeting.
Relugolix for treating hormone-sensitive prostate cancer (TA995)	14/08/2024	Relugolix – recommended, within its marketing authorisation, as an option for treating prostate cancer in adults:  • with advanced hormone-sensitive prostate cancer • alongside radiotherapy for high-risk localised or locally advanced hormone-sensitive prostate cancer • as neoadjuvant treatment before radiotherapy for high-risk localised or locally advanced hormone-sensitive prostate cancer.		х	12/09/2024	29	Not on Trust formulary. Shared Urology teams for information (14/08/24). N/A, MFT not commissioned centre. Patients to be referred to Christie Hospital. MMC deemed N/A (12/09/24).
Enzalutamide for treating non-metastatic prostate cancer after radical prostatectomy or radiotherapy (TERMINATED APPRAISAL) (TA994)	08/08/2024	Enzalutamide – NOT RECOMMENDED for treating non-metastatic prostate cancer after radical prostatectomy or radiotherapy. This is because Astellas Pharma has confirmed that it does not intend to make an evidence submission for the appraisal. Astellas Pharma considers that there is lack of mature overall survival data to provide an evidence submission for this appraisal.		х	12/09/2024	35	Not on Trust formulary for this indication. Shared Urology teams for information (08/08/24). N/A, not recommended by NICE. MMC deemed N/A (12/09/24).
Burosumab for treating X-linked hypophosphataemia in adults (TA993)	07/08/2024	Burosumab – recommended, within its marketing authorisation, as an option for treating X linked hypophosphataemia (XLH) in adults. Burosumab is only recommended if the company provides it according to the commercial arrangement.	х		12/09/2024	36	On Trust formulary for this indication (off-label) (Feb- 20). Shared with adult Endocrinology bone team for information (07/08/24). Fast-track submitted. MMC approved (12/09/24).
Trastuzumab deruxtecan for treating HER2- low metastatic or unresectable breast cancer after chemotherapy (TA992)	29/07/2024	Trastuzumab deruxtecan – NOT RECOMMENDED, within its marketing authorisation, for treating HER2 low metastatic or unresectable breast cancer in adults after:  ■ chemotherapy in the metastatic setting or  ■ recurrence during adjuvant chemotherapy or within 6 months after finishing it.		х	12/09/2024	45	Not on Trust formulary for this indication. Shared Surgery / Breast teams for information (29/07/24). N/A, not recommended by NICE. MMC deemed N/A (12/09/24).
Abaloparatide for treating osteoporosis after menopause (TA991)	07/08/2024	Abaloparatide—recommended as an option for treating osteoporosis after menopause in women, trans men and non-binary people, only if they have a very high risk of fracture (see section 3.2). It is only recommended if the company provides it according to the commercial arrangement.	х		12/09/2024	36	Not on Trust formulary. Shared with adult Endocrinology bone team for information (07/08/24). MMC approved (12/09/24).
Tenecteplase for treating acute ischaemic stroke (TA990)	24/07/2024	Tenecteplase – recommended, within its marketing authorisation, as an option for the thrombolytic treatment of an acute ischaemic stroke in adults:  ■ within 4.5 hours of the onset of stroke symptoms, and  ■ when intracranial haemorrhage has been excluded.  Use the least expensive option of the available treatments (including tenecteplase and alteplase). Take account of administration costs, dosages, price per dose and commercial arrangements. If the least expensive option is unsuitable, people with the condition, their family or carers, and their healthcare professional should discuss the advantages and disadvantages of other treatments.		х	12/09/2024	50	Not on Trust formulary for this indication. Shared with adult Stroke / Emergency Medicine / Medicine and Anticoagulation teams for information (24/07/24). MFT not commissioned to treat acute ischaemic stroke, patients conveyed to Stockport; NCA (Salford Royal & Fairfield General hospitals). MMC deemed N/A (12/09/24).
Etranacogene dezaparvovec for treating moderately severe or severe haemophilia B (TA989)	24/07/2024	Etranacogene dezaparvovec – recommended with managed access as an option for treating moderately severe or severe haemophilia B (congenital factor IX [FIX] deficiency) in adults without anti FIX antibodies. It is only recommended if the conditions in the managed access agreement for etranacogene dezaparvovec are followed.	х		08/08/2024	15	Not on Trust formulary. Shared with adult and paediatric Haematology and ATMP teams for information (24/07/24). ATMP approved. For review and onboarding by ATMP committee. MMC approved 08/08/24.

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE		ormulary to NICE			
		,	<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (davs)	Notes (e.g. rationale, method of making available)
Ivacaftor-tezacaftor-elexacaftor, tezacaftor-ivacaftor and lumacaftor-ivacaftor for treating cystic fibrosis (TA988)	24/07/2024	Ivacaftor-tezacaftor-elexacaftor (IVA-TEZ-ELX) plus ivacaftor (IVA) alone – recommended as an option for treating cystic fibrosis in people 2 years and over who have at least 1 F508del mutation in the cystic fibrosis transmembrane conductance regulator (CFTR) gene.  Tezacaftor-ivacaftor (TEZ-IVA) plus IVA alone – recommended for treating cystic fibrosis in people 6 years and over who have:  2 copies of the CFTR gene with F508del mutations, or  a copy of the CFTR gene with an F508del mutation and a copy of the CFTR gene with 1 of the mutations listed in section 2.2.  Lumacaftor-ivacaftor (LUM-IVA) – recommended for treating cystic fibrosis in people 1 year and over who have 2 copies of the CFTR gene with F508del mutations.  IVA-TEZ-ELX, TEZ-IVA and LUM-IVA are only recommended if the company provides them according to the commercial arrangement.	×		04/09/2024	42	On Trust formulary (Dec-19). Shared with adult and paediatric respiratory / Cystic fibrosis teams for information (24/07/24). Updated Fast-track requested. Approved by MMC (12/09/24)/ PMMC (04/09/24).
Lisocabtagene maraleucel for treating relapsed or refractory aggressive B-cell non-Hodgkin lymphoma (TERMINATED APPRAISAL) (TA987)	04/07/2024	Lisocabtagene maraleucel— NOT RECOMMENDED for treating relapsed or refractory aggressive B-cell non-Hodgkin lymphoma in adults. This is because Celgene has confirmed that it does not intend to make an evidence submission for the appraisal. Celgene considers that there is unlikely to be enough evidence that the technology is a cost-effective use of NHS resources in this population.		x	08/08/2024	35	Not on Trust formulary. Shared with adult and paediatric Haematology and ATMP teams for information (04/07/24). N/A, not recommended by NICE. MMC deemed N/A (08/08/24).
Lebrikizumab for treating moderate to severe atopic dermatitis in people 12 years and over (TA986)	10/07/2024	Lebrikizumab – recommended as an option for treating moderate to severe atopic dermatitis that is suitable for systemic treatment in people 12 years and over with a body weight of 40 kg or more, only if:  • the atopic dermatitis has not responded to at least 1 systemic immunosuppressant or these treatments are not suitable, and  • dupilumab or tralokinumab would otherwise be offered, and  • the company provides it according to the commercial arrangement.	х		02/10/2024	84	Not on Trust formulary. Shared with adult and paediatric dermatology teams for information (10/07/24). Fast-track PMMC approved (02/10/24)
Selective internal radiation therapy with QuiremSpheres for treating unresectable advanced hepatocellular carcinoma (partial update TA688) (TA985)	03/07/2024	The selective internal radiation therapy (SIRT) QuiremSpheres—recommended as an option for treating unresectable advanced hepatocellular carcinoma (HCC) in adults, only if it is:  used for people with Child—Pugh grade A liver impairment when conventional transarterial therapies are inappropriate, and  the company provides it according to the commercial arrangement.		х	08/08/2024	36	Not on Trust formulary. Shared with hepatology team for information (03/07/24). N/A patients referred to Christie Hospital for treatment. MMC deemed N/A (08/08/24).
Tafamidis for treating transthyretin amyloidosis with cardiomyopathy (TA984)	19/06/2024	Tafamidis – recommended, within its marketing authorisation, as an option for treating wild-type or hereditary transthyretin amyloidosis with cardiomyopathy (ATTR CM) in adults. Tafamidis is only recommended if the company provides it according to the commercial arrangement.		х	11/07/2024	22	Not on Trust formulary. Shared with cardiology team for information (19/06/24). N/A currently, patients to be referred to the National Amyloidosis Centre at Royal Free Hospital London. MMC deemed N/A (11/07/24).
Pembrolizumab with trastuzumab and chemotherapy for untreated locally advanced unresectable or metastatic HER2-positive gastric or gastro-oesophageal junction adenocarcinoma (TA983)	12/06/2024	Pembrolizumab with trastuzumab, fluoropyrimidine- and platinum-containing chemotherapy – NOT RECOMMENDED, within its marketing authorisation, for untreated locally advanced unresectable or metastatic HER2 positive gastric or gastro-oesophageal junction (GOJ) adenocarcinoma in adults whose tumours express PD L1 with a combined positive score (CPS) of 1 or more.		х	11/07/2024	29	Not on Trust formulary for indication. Shared with Gastro team for information (12/06/24). N/A not recommended by NICE. MMC deemed N/A (11/07/24).
Baricitinib for treating juvenile idiopathic arthritis in people 2 years and over (TERMINATED APPRAISAL) (TA982)	13/06/2024	Baricitinib — NOT RECOMMENDED for treating juvenile idiopathic arthritis in people 2 years and over. This is because Eli Lilly has confirmed that it does not intend to make an evidence submission for the appraisal. Eli Lilly considers that the technology will not be launched in England and Wales for treating this indication.		х	03/07/2024	20	Not on Trust formulary for indication. Shared with Paediatric Rheumatology team for information (13/06/24). N/A not recommended by NICE. PMMC deemed N/A (03/07/24).
Voxelotor for treating haemolytic anaemia caused by sickle cell disease (TA981)	12/06/2024	Voxelotor, with or without hydroxycarbamide – recommended as an option for treating haemolytic anaemia caused by sickle cell disease in people 12 years and over. It is recommended only if:  • people are ineligible for, or intolerant of hydroxycarbamide, or  • hydroxycarbamide alone is insufficiently effective.  Voxelotor is only recommended if the company provides it according to the commercial arrangement.	х		09/05/2024	-34	On Trust formulary for indication. Shared with Haematology / Paeds HaemOnc teams (12/06/24). MMC approved 09/05/24; PMMC approved (05/06/24).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	rmulary to NICE
			<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (davs)	Notes (e.g. rationale, method of making available)
Nivolumab for adjuvant treatment of completely resected melanoma at high risk of recurrence in people 12 years and over (TERMINATED APPRAISAL) (TA980)	05/06/2024	Nivolumab — NOT RECOMMENDED for the adjuvant treatment of completely resected melanoma at high risk of recurrence in people 12 years and over. This is because Bristol-Myers Squibb (BMS) has confirmed that it does not intend to make an evidence submission for the appraisal. BMS considers that the technology will not be launched in the UK for treating this indication.		Х	13/06/2024	8	Not on Trust formulary for indication. Shared with Dermatology team for information (05/06/24). N/A not recommended by NICE. MMC deemed N/A (13/06/24).
Ivosidenib with azacitidine for untreated acute myeloid leukaemia with an IDH1 R132 mutation (TA979)	05/06/2024	Ivosidenib plus azacitidine – recommended, within its marketing authorisation, as an option for untreated acute myeloid leukaemia (AML) with an IDH1 R132 mutation in adults who cannot have standard intensive induction chemotherapy. It is only recommended if the company provides it according to the commercial arrangement.	х		13/06/2024	8	Not on Trust formulary for indication. Shared with Haematology team for information (05/06/24). Fast-track submitted. MMC approved (13/06/24).
Zanubrutinib with obinutuzumab for treating relapsed or refractory B-cell follicular lymphoma after 2 or more treatments (TERMINATED APPRAISAL) (TA978)	29/05/2024	Zanubrutinib with obinutuzumab— NOT RECOMMENDED for treating relapsed or refractory B-cell follicular lymphoma in adults after 2 or more treatments. This is because BeiGene has requested a delay to the evidence submission.		х	13/06/2024	15	Not on Trust formulary for indication. Shared with Haematology team for information (29/05/24). N/A not recommended by NICE. MMC deemed N/A (13/06/24).
<b>Dabrafenib</b> with trametinib for treating BRAF V600E mutation-positive glioma in children and young people aged 1 year and over ( <b>TA977</b> )	29/05/2024	Dabrafenib with trametinib – recommended, within its marketing authorisation, as an option for treating:  • low-grade glioma (LGG) with a BRAF V600E mutation in children and young people aged 1 year and over who need systemic treatment  • high-grade glioma (HGG) with a BRAF V600E mutation in children and young people aged 1 year and over after at least 1 radiation or chemotherapy treatment.  Dabrafenib with trametinib – only recommended if the company provides it according to the commercial arrangements.	x		05/06/2024	7	Not on Trust formulary for indication. Shared with Paediatric HaemOncology team for information (29/05/24) and Fast-track requested. Fast-track submitted. PMMC approved (05/06/24).
Trastuzumab deruxtecan for treating HER2- mutated advanced non-small-cell lung cancer after platinum-based chemotherapy (TERMINATED APPRAISAL) (TA976)	29/05/2024	Trastuzumab deruxtecan— NOT RECOMMENDED for treating HER2-mutated advanced non-small-cell lung cancer in adults who need systemic treatment after platinum-based chemotherapy with or without immunotherapy. This is because Daiichi Sankyo has confirmed that it does not intend to make an evidence submission for the appraisal. Daiichi Sankyo considers that the technology is unlikely to be a cost-effective use of NHS resources under the current NICE methods.		х	13/06/2024	15	Not on Trust formulary for indication. Shared with Pulmonary Oncology team for information (29/05/24). N/A not recommended by NICE. MMC deemed N/A (13/06/24).
Setmelanotide for treating obesity and hyperphagia in Bardet-Biedl syndrome (HST31)	22/05/2024	Setmelanotide – recommended as an option for treating obesity and hyperphagia in genetically confirmed Bardet-Biedl syndrome (BBS) in people aged 6 years and over, only if they are aged between 6 and 17 years when treatment starts. These people can carry on having setmelanotide as adults until they need to stop. Setmelanotide is only recommended if the company provides it according to the commercial arrangement.		х	13/06/2024	22	Not on Trust formulary for indication. Shared with Paediatric Endocrinology team for information (22/05/24). N/A patients to be referred to Cambridge and Birmingham. MMC deemed N/A (13/06/24). PMMC approved (03/07/24).
Tisagenlecleucel for treating relapsed or refractory B-cell acute lymphoblastic leukaemia in people 25 years and under (updates & replaces TA554) (TA975)	15/05/2024	Tisagenlecleucel – recommended as an option for people 25 years and under for treating B cell acute lymphoblastic leukaemia that is:  • relapsed after a transplant, or  • relapsed for a second or later time, or  • refractory.  It is only recommended if the company provides it according to the commercial arrangement.	х		05/06/2024	21	On Trust formulary for indication (MMC approved CDF Feb-19). Shared for information with adult & paediatric haematology teams (15/05/24). Confirmation received of switch to routine commissioning. PMMC approved (05/06/24).
Selinexor with bortezomib and dexamethasone for previously treated multiple myeloma (TA974)	15/05/2024	Selinexor plus bortezomib and dexamethasone— recommended as an option for treating multiple myeloma in adults, only if:  • they have only had 1 previous line of treatment, and their condition is refractory to both daratumumab and lenalidomide, or  • they have only had 2 previous lines of treatment and their condition is refractory to lenalidomide.  Selinexor— only recommended if the company provides it according to the commercial arrangement.	х		13/06/2024	29	On Trust formulary for indication (MMC approved CDF Mar-24). Shared with Haematology team for information (15/05/24). Switch from CDF to routine commissioning. MMC approved switch (13/06/24).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	rmulary to NICE
			Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (davs)	Notes (e.g. rationale, method of making available)
Atogepant for preventing migraine (TA973)	15/05/2024	Atogepant – recommended as an option for preventing migraine in adults who have at least 4 migraine days per month, only if at least 3 preventive medicines have failed.  Stop atogepant after 12 weeks if the frequency of migraines does not reduce by:  at least 50% in episodic migraine (defined as fewer than 15 headache days per month)  at least 30% in chronic migraine (defined as 15 or more headache days per month, with at least 8 of those having features of migraine).	х		11/07/2024	57	Not on Trust formulary for indication. Shared with Neurology teams for information (15/05/24). Fast-track requested. MMC approved (11/07/24).
Sirolimus for treating facial angiofibroma caused by tuberous sclerosis complex in people 6 years and over (TERMINATED APPRAISAL) (TA972)	22/05/2024	Sirolimus – NOT RECOMMENDED for treating facial angiofibroma caused by tuberous sclerosis complex in people 6 years and over. This is because Plusultra pharma will review and revise its evidence submission to NICE.		х	03/07/2024	42	On Trust formulary for indication. Shared with Dermatology teams for information (22/05/24). Removed from formulary for new patients (03/07/24).
Remdesivir and tixagevimab plus cilgavimab for treating COVID-19 (TA971)	08/05/2024	Remdesivir – recommended as an option for treating COVID 19 in hospitals in:  • adults, only if they have a high risk of serious illness (risk factors as defined in section 5 of NICE TA878).  • babies, children and young people, only if they:  o are aged 4 weeks to 17 years and weigh at least 3 kg, and:  • have pneumonia, and  • need supplemental oxygen, or  o weigh at least 40 kg, and have a high risk of serious illness (risk factors as defined in section 5 of NICE TA878).  Remdesivir is only recommended if the company provides it according to the commercial arrangement.  Tixagevimab plus cilgavimab – NOT RECOMMENDED for treating COVID 19 in adults who do not need supplemental oxygen and who have an increased risk of progression to severe COVID 19.	x		23/05/2024	15	On Trust formulary for indication. Shared with Antimicrobial teams for information (25/04/24). Updated fast-track submitted. MMC Chair approved (23/05/24). MMC approved (13/06/24).
Selinexor with dexamethasone for treating relapsed or refractory multiple myeloma after 4 or more treatments (TA970)	08/05/2024	Selinexor plus dexamethasone— recommended, within its marketing authorisation, for treating multiple myeloma in adults when:  • they have had 4 or more treatments, and  • the condition is refractory to at least 2 proteasome inhibitors, 2 immunomodulatory agents and an anti CD38 monoclonal antibody (penta-refractory), and  • the condition has progressed on the last treatment, and  • the company provides it according to the commercial arrangement.	х		13/06/2024	36	Not on Trust formulary for indication. Shared with Haematology teams for information (08/05/24). Fast-track submitted. MMC approved (13/06/24).
Gefapixant for treating refractory or unexplained chronic cough (TERMINATED APPRAISAL) (TA969)	30/04/2024	Gefapixant – NOT RECOMMENDED for treating refractory or unexplained chronic cough. This is because Merck Sharp & Dohme has confirmed that it does not intend to make an evidence submission for the appraisal. Merck Sharp & Dohme considers that there is not enough evidence to provide an evidence submission for this appraisal. This is because of a lack of evidence on healthcare resource use during diagnosis and treatment of refractory or unexplained chronic cough.		х	09/05/2024	9	Not on Trust formulary. Shared with Respiratory teams for information (25/04/24). N/A, not recommended by NICE. MMC deemed N/A (09/05/24).
Melphalan flufenamide with dexamethasone for treating relapsed or refractory multiple myeloma (TERMINATED APPRAISAL) (TA968)	25/04/2024	Melphalan flufenamide with dexamethasone— NOT RECOMMENDED for treating relapsed or refractory multiple myeloma in adults. This is because Oncopeptides has confirmed that it does not intend to make an evidence submission for the appraisal. Oncopeptides considers that it has not yet been able to develop a cost-effectiveness model or complete the required literature reviews or indirect comparisons. So, it is uncertain whether it can make a high-quality submission at this time.		х	09/05/2024	14	Not on Trust formulary. Shared with Haem team for information (25/04/24). N/A, not recommended by NICE. MMC deemed N/A (09/05/24).
Pembrolizumab for treating relapsed or refractory classical Hodgkin lymphoma in people 3 years and over (TA967)	01/05/2024	Pembrolizumab – recommended as an option for treating relapsed or refractory classical Hodgkin lymphoma in people 3 years and over who have had at least 2 previous treatments and cannot have an autologous stem cell transplant (ASCT). It is recommended only if:  • they have already had brentuximab vedotin and • pembrolizumab is stopped after 2 years of treatment or earlier if the person has a stem cell transplant or the disease progresses and • the company provides it according to the commercial arrangement.	х		09/05/2024	8	On MFT formulary in line with TA540 (CDF). Shared with Haem team. Adults to confirm CDF switch to routine commissioning. Paeds team to submit fast-track. MMC approved CDF switch to routine commissioning (09/05/24).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	Adherence of local formulary to NICE					
			Yes (mark 'x' if applicable)	N/A (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (davs)	Notes (e.g. rationale, method of making available)	
Pembrolizumab with gemcitabine and cisplatin for untreated advanced biliary tract cancer (TERMINATED APPRAISAL) (TA966)		Pembrolizumab with gemcitabine and cisplatin – NOT RECOMMENDED for untreated advanced biliary tract cancer in adults. This is because Merck Sharp & Dohme has confirmed that it does not intend to make an evidence submission for the appraisal. Merck Sharp & Dohme considers that the technology will not be launched in the UK for treating this indication.		х	09/05/2024	15	Not on Trust formulary. Shared with Hepatology / HPB teams (28/03/24). N/A, not recommended by NICE. MMC deemed N/A (09/05/24).	
Cabozantinib with nivolumab for untreated advanced renal cell carcinoma (TA964)	20,0.,202.	Cabozantinib with nivolumab – recommended as an option for untreated advanced renal cell carcinoma in adults, only if:  • their disease is intermediate or poor risk as defined in the International Metastatic Renal Cell Carcinoma Database Consortium criteria, and  • nivolumab with ipilimumab or lenvatinib with pembrolizumab would otherwise be offered, and  • the companies provide cabozantinib and nivolumab according to their commercial arrangements.		х	09/05/2024	29	Not on Trust formulary. Shared with Renal team for information (10/04/24). RCC treated at Christie Hospital. MMC deemed N/A (09/05/24).	
Dostarlimab with platinum-based chemotherapy for treating advanced or recurrent endometrial cancer with high microsatellite instability or mismatch repair deficiency (TA963)	00/01/2021	Dostarlimab with platinum-based chemotherapy – recommended with managed access as an option for treating primary advanced or recurrent endometrial cancer with high microsatellite instability or mismatch repair deficiency in adults who are candidates for systemic therapy. It is only recommended if the conditions in the managed access agreement for dostarlimab are followed.		х	11/04/2024	8	On Trust formulary (not stocked). Shared with Gynaecology teams (03/04/24). N/A MFT, patients referred to the Christie Hospital. MMC deemed N/A (11/04/24).	
		TOTAL	45	43				
			% "Yes"	% "N/A"	-	Average implement time(days)		
Adherence statistics for 2024-25			51%	49%		24		



Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	ence of local fo	ormulary to NICE
0	nereuse	maldated 2) mez	Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
2023-24							
Human alpha1-proteinase inhibitor for treating emphysema (TERMINATED APPRAISAL) (TA965)	28/03/2024	Human alpa1 proteinase inhibitor— NOT RECOMMENDED for treating emphysema in the NHS. CSL Behring UK has confirmed that it does not intend to launch the product in England and Wales. The reasons for this decision are primarily related to the company's inability to offer the product at a price to meet the current threshold of cost effectiveness. The context for this decision is important, and related to the unique, complex and high-cost nature of plasma-derived therapy production. If the company wishes to make a submission to NICE in the future for this topic it will be rescheduled back into the work programme.		x	11/04/2024	14	Not on Trust formulary. Shared with Respiratory team (28/03/24). N/A, not recommended by NICE. MMC deemed N/A (11/04/24).
Olaparib for maintenance treatment of BRCA mutation-positive advanced ovarian, fallopian tube or peritoneal cancer after response to first-line platinum-based chemotherapy (updates & replaces TA598) (TA962)	25,05,202	Olaparib – recommended, within its marketing authorisation, as an option for maintenance treatment of BRCA mutation-positive, advanced (FIGO stages 3 and 4), high-grade epithelial ovarian, fallopian tube or primary peritoneal cancer that has responded to first-line platinum-based chemotherapy in adults. It is only recommended if the company provides it according to the commercial arrangement.		х	11/04/2024	14	Not on Trust formulary for this indication. Shared for information with Gynaecology team (28/03/24). MMC deemed N/A (11/04/24).
Sebelipase alfa for treating lysosomal acid lipase deficiency that is not Wolman disease (TERMINATED APPRAISAL) (TA961)	20,00,202	Sebelipase alfa – NOT RECOMMENDED for treating lysosomal lipase deficiency that is not Wolman disease. The Wolman disease population was evaluated separately in NICE highly specialised technology guidance on sebelipase alfa (HST30). The cost effectiveness of the remaining non-Wolman population has not been demonstrated at this stage.		х	11/04/2024	14	Not on Trust formulary for this indication. Shared with Metabolic LSD team (20/03/24). N/A, not recommended by NICE. MMC deemed N/A (11/04/24).
Satralizumab for preventing relapses in neuromyelitis optica spectrum disorders (TERMINATED APPRAISAL) (TA960)	27,00,202	Satralizumab – NOT RECOMMENDED for preventing relapses in neuromyelitis optica spectrum disorders. This is because Roche Products has confirmed that it does not intend to make an evidence submission for the appraisal. Roche Products considers that there is unlikely to be enough evidence that the technology is a cost-effective use of NHS resources for this population.		х	11/04/2024	15	Not on Trust formulary for this indication. Shared with Metabolic LSD team (20/03/24). N/A, not recoomended by NICE. MMC deemed N/A (11/04/24).
<b>Daratumumab</b> in combination for treating newly diagnosed systemic amyloid light-chain amyloidosis ( <b>TA959</b> )	, , , , ,	Daratumumab plus bortezomib, cyclophosphamide and dexamethasone— recommended as an option for treating newly diagnosed systemic amyloid light-chain (AL) amyloidosis in adults. It is recommended only if:  daratumumab is stopped after 24 cycles of treatment, or earlier if the condition progresses, and the company provides daratumumab according to the commercial arrangement.	х		14/03/2024	-13	Not on Trust formulary for this indication. Shared with Haematology team (20/03/24). Fast-track submitted (21/02/24). MMC approved (14/03/24).
<b>Ritlecitinib</b> for treating severe alopecia areata in people 12 years and over ( <b>TA958</b> )		Ritlecitinib – recommended, within its marketing authorisation, as an option for treating severe alopecia areata in people 12 years and over. Ritlecitinib is only recommended if the company provides it according to the commercial arrangement.		х	09/05/2024	43	Not on Trust formulary. Shared with Dermatology team (27/03/24). PMMC approved at May-24 meeting (09/05/24). MMC approved Nov-24.
<b>Momelotinib</b> for treating myelofibrosis-related splenomegaly or symptoms ( <b>TA957</b> )	20,00,202	Momelotinib – recommended as an option for treating myelofibrosis-related splenomegaly or symptoms in adults with moderate to severe anaemia who have not had a JAK inhibitor or have had ruxolitinib, only if:  • they have intermediate 2 or high-risk myelofibrosis, and • the company provides momelotinib according to the commercial arrangement.	х		14/03/2024	-6	Not on Trust formulary. Shared for info with Haematology team (20/03/24). Fast-track submitted (21/02/24). MMC approved (14/03/24).
Etrasimod for treating moderately to severely active ulcerative colitis in people aged 16 and over (TA956)	,00,-00	Etrasimod – recommended, within its marketing authorisation, as an option for moderately to severely active ulcerative colitis in people aged 16 years and over when:  • conventional or biological treatments cannot be tolerated or  • the condition has not responded well enough, or lost response to treatment.  Etrasimod is only recommended if the company provides it according to the commercial arrangement.	х		14/03/2024	3	Not on Trust formulary. Shared with IBD team (11/03/24). Fast-track submitted. MMC approved (14/03/24).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	ence of local fo	ormulary to NICE
		, and the second	<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (davs)	Notes (e.g. rationale, method of making available)
<b>Dupilumab</b> for treating moderate to severe prurigo nodularis ( <b>TA955</b> )	13/03/2024	<b>Dupilumab – NOT RECOMMENDED</b> , within its marketing authorisation, for treating moderate to severe prurigo nodularis in adults when systemic treatment is suitable.		x	11/04/2024	29	Not on Trust formulary. Shared for info with Dermatology team (13/03/24). N/A, not recommended by NICE. MMC deemed N/A, (11/04/24).
<b>Epcoritamab</b> for treating relapsed or refractory diffuse large B-cell lymphoma after 2 or more systemic treatments ( <b>TA954</b> )	06/03/2024	Epcoritamab – recommended as an option for treating relapsed or refractory diffuse large B-cell lymphoma (DLBCL) in adults after 2 or more systemic treatments, only if:  • they have had polatuzumab vedotin, or if polatuzumab vedotin is contraindicated or not tolerated, and • the company provides epcoritamab according to the commercial arrangement.	х		14/03/2024	8	Not on Trust formulary. Shared for info with Haematology team (13/03/24). Fast-track submitted. MMC approved and added to formualry (14/03/24).
Fluocinolone acetonide intravitreal implant for treating chronic diabetic macular oedema (updates & replaces TA301 & TA613) (TA953)	13/03/2024	Fluocinolone acetonide intravitreal implant is recommended, within its marketing authorisation, as an option for treating visual impairment caused by chronic diabetic macular oedema that has not responded well enough to available treatments in adults. It is recommended only if the company provides it according to the commercial arrangement.	х		11/04/2024	29	Not on Trust formulary for this indiction. Shared with DMO Ophthalmology team (13/03/24). Fast-track requested. MMC approved Apr-24 (11/04/24).
<b>Talazoparib</b> for treating HER2-negative advanced breast cancer with germline BRCA mutations ( <b>TA952</b> )	21/02/2024	Talazoparib – recommended, within its marketing authorisation, for treating HER2-negative, locally advanced or metastatic breast cancer with germline BRCA1 or BRCA2 mutations in adults who have had:  an anthracycline or a taxane, or both, unless these treatments are not suitable, and  endocrine therapy if they have hormone receptor (HR)-positive breast cancer, unless this is not suitable.  Talazoparib is only recommended if the company provides it according to the commercial arrangement.		х	14/03/2024	22	Not on Trust formulary. Shared with Breast team (21/02/24). N/A Christie hospital. MMC deemed N/A (14/03/24).
Olaparib with abiraterone for untreated hormone-relapsed metastatic prostate cancer (TA951)	07/02/2024	Olaparib with abiraterone and prednisone or prednisolone — recommended, within its marketing authorisation, as an option for untreated hormone-relapsed metastatic prostate cancer in adults who cannot have or do not want chemotherapy. It is only recommended if the company provides it according to the commercial arrangements.		x	14/03/2024	36	Not on Trust formulary for this indication. Shared with Urology Oncology team (07/02/24). N/A patients referred to commissioned service at NCA. MMC deemed N/A (14/03/24).
Nivolumab–relatlimab for untreated unresectable or metastatic melanoma in people 12 years and over (TA950)	07/02/2024	Nivolumab-relatlimab – recommended as an option for untreated advanced (unresectable or metastatic) melanoma in people 12 years and over, only if:  • nivolumab-relatlimab is stopped after 2 years of treatment, or earlier if the cancer progresses, and  • the company provides it according to the commercial arrangement.		х	14/03/2024	36	Not on Trust formulary. Shared with Dermatology team (07/02/24). N/A Christie hospital. MMC deemed N/A (14/03/24).
Belumosudil for treating chronic graft-versus- host disease after 2 or more systemic treatments in people 12 years and over (TA949)	07/02/2024	Belumosudil – recommended, within its marketing authorisation, for treating chronic graft-versus-host disease in people 12 years and over after 2 or more systemic treatments. It is recommended only if the company provides it according to the commercial arrangement.	х		08/02/2024	1	Not on Trust formulary. Shared for information with Haematology team (31/01/24). Fast-track submitted 27/01/24. MMC approved (08/02/24).
Ivosidenib for treating advanced cholangiocarcinoma with an IDH1 R132 mutation after 1 or more systemic treatments (TA948)	31/01/2024	Ivosidenib – recommended, within its marketing authorisation, as an option for treating locally advanced or metastatic cholangiocarcinoma with an IDH1 R132 mutation in adults after 1 or more systemic treatments. It is only recommended if the company provides it according to the commercial arrangement.		х	08/02/2024	8	Not on Trust formulary. Shared with Hepatology team (31/01/24). N/A Christie hospital. MMC deemed N/A (08/02/24).
Loncastuximab tesirine for treating relapsed or refractory diffuse large B-cell lymphoma and high-grade B-cell lymphoma after 2 or more systemic treatments (TA947)	31/01/2024	Loncastuximab tesirine – recommended as an option for treating relapsed or refractory diffuse large B-cell lymphoma (DLBCL) and high-grade B-cell lymphoma (HGBL) after 2 or more systemic treatments in adults, only if:  • they have previously had polatuzumab vedotin, or if polatuzumab vedotin is contraindicated or not tolerated, and  • the company provides it according to the commercial arrangement.	х		08/02/2024	8	Not on Trust formulary. Shared for information with Haematology team (31/01/24). Fast-track submitted 27/01/24. MMC approved (08/02/24).
Olaparib with bevacizumab for maintenance treatment of advanced high-grade epithelial ovarian, fallopian tube or primary peritoneal cancer (updates & replaces TA693) (TA946)	17/01/2024	Olaparib with bevacizumab – recommended, within its marketing authorisation, for maintenance treatment of high-grade epithelial ovarian, fallopian tube or primary peritoneal cancer in adults whose cancer:  • has completely or partially responded after first-line platinum-based chemotherapy with bevacizumab • is advanced (International Federation of Gynecology and Obstetrics [FIGO] stages 3 and 4) and • is homologous recombination deficiency (HRD) positive (defined as having either a BRCA1 or BRCA2 mutation, or genomic instability).		x	08/02/2024	22	Not on Trust formulary for this indication. Shared with Gynaecology teams (17/01/24). N/A Christie hospital. Deemed N/A by MMC (08/02/24).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	on, as Adherence of local formulary to NICE					
			<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (davs)	Notes (e.g. rationale, method of making available)	
Treosulfan with fludarabine before allogeneic stem cell transplant for people aged 1 month to 17 years with non-malignant diseases (TERMINATED APPRAISAL) (TA945)	30/01/2024	Treosulfan with fludarabine — NOT RECOMMENDED before allogeneic stem cell transplant for babies, children and young people aged 1 month to 17 years with non-malignant diseases. This is because Medac Pharma has confirmed that it does not intend to make an evidence submission for the appraisal. Medac Pharma considers that because of the low price and small patient population, it cannot find an economically viable route to submission.		х	08/02/2024	9	Not on Trust formulary for this indication. Shared for information with Paediatric HaemOnc team (30/01/24). N/A not recommended by NICE. MMC deemed N/A (08/02/24).	
<b>Durvalumab</b> with gemcitabine and cisplatin for treating unresectable or advanced biliary tract cancer (TA944)	10/01/2024	<b>Durvalumab</b> plus gemcitabine and cisplatin – recommended, within its marketing authorisation, as an option for treating locally advanced, unresectable, or metastatic biliary tract cancer in adults. It is only recommended if the company provides durvalumab according to the commercial arrangement.		х	08/02/2024	29	Not on Trust formulary for this indication. Shared with Hepatology / HPB teams (10/01/24). N/A Christie hospital. MMC deemed N/A (08/02/24).	
Sebelipase alfa for treating Wolman disease (HST30)	10/01/2024	Sebelipase alfa – recommended as an option for long-term enzyme replacement therapy in Wolman disease (rapidly progressive lysosomal acid lipase deficiency [LAL-D]), only if people are 2 years or under when treatment starts. It is recommended only if the company provides sebelipase alfa according to the commercial arrangement.	x		28/12/2023	-13	On trust formulary for this indication (PMMC approved 28/12/23). Shared for information with metabolic team. Chairs approval 28/012/23; PMMC approved (10/01/24)	
Hybrid closed loop (HCL) systems for managing blood glucose levels in type 1 diabetes (TA943)	19/12/2023	Hybrid closed loop (HCL) systems— recommended as an option for managing blood glucose levels in type 1 diabetes for adults who have an HbA1c of 58 mmol/mol (7.5%) or more, or have disabling hypoglycaemia, despite best possible management with at least 1 of the following:  • continuous subcutaneous insulin infusion (CSII)  • real-time continuous glucose monitoring  • intermittently scanned continuous glucose monitoring.  HCL systems— only recommended if they are procured at a cost-effective price agreed by the companies and NHS England, and implemented following NHS England's and NHS Wales' implementation plans.	х		08/02/2024	51	Not on Trust formulary. Shared with Endocrinology / diabetes and medicine teams (20/12/23). Approved MMC (08/02/24).	
Empagliflozin for treating chronic kidney disease (TA942)	20/12/2023	Empagliflozin – recommended as an option for treating chronic kidney disease (CKD) in adults, only if:  • it is an add-on to optimised standard care including the highest tolerated licensed dose of angiotensin-converting enzyme (ACE) inhibitors or angiotensin-receptor blockers (ARBs), unless these are contraindicated, and  • people have an estimated glomerular filtration rate of:  ○ 20 mL/min/1.73m² to less than 45 mL/min/1.73m² or  ○ 45 mL/min/1.73m² to 90 mL/min/1.73m² and either:  ■ a urine albumin-to-creatinine ratio of 22.6 mg/mmol or more, or  ■ type 2 diabetes.	x		14/03/2024	85	Not on Trust formulary for this indication. Shared with Renal teams (20/12/23). Fast-track submitted. MMC approved and added to formulary (14/03/24).	
Ravulizumab for treating AQP4 antibody- positive neuromyelitis optica spectrum disorder (TERMINATED APPRAISAL) (TA941)	20/12/2023	Ravulizumab – NOT RECOMMENDED for treating aquaporin-4 (AQP4) antibody-positive neuromyelitis optica spectrum disorder. This is because Alexion Pharma UK withdrew its evidence submission for the appraisal. Alexion Pharma UK considers that the technology is unlikely to be a cost-effective use of NHS resources.		х	11/01/2024	22	Not on Trust formulary for this indication. Shared with Neurology and Ophthalmology teams (20/12/23). MMC deemed N/A, not recommended by NICE (11/01/24).	
Ravulizumab for treating generalised myasthenia gravis (TERMINATED APPRAISAL) (TA940)	20/12/2023	Ravulizumab – NOT RECOMMENDED for treating generalised myasthenia gravis. This is because Alexion Pharma UK withdrew its evidence submission for the appraisal. Alexion Pharma UK considers that the technology is unlikely to be a cost-effective use of NHS resources.		х	11/01/2024	22	Not on Trust formulary for this indication. Shared with Neurology and Ophthalmology teams (20/12/23). MMC deemed N/A, not recommended by NICE (11/01/24).	
Pembrolizumab plus chemotherapy with or without bevacizumab for persistent, recurrent or metastatic cervical cancer (updates & replaces TA885) (TA939)	13/12/2023	Pembrolizumab plus chemotherapy with or without bevacizumab – recommended as an option for treating persistent, recurrent or metastatic cervical cancer in adults whose tumours express PD L1 with a combined positive score of at least 1. It is recommended only if:  • pembrolizumab is stopped at 2 years of uninterrupted treatment, or earlier if the cancer progresses, and • the company provides it according to the commercial arrangements.		х	11/01/2024	29	Not on Trust formulary for this indication. Shared with Gynaecology team (13/12/23). N/A MFT, patients referred to the Christie. MMC deemed N/A, not recommended by NICE (11/01/24).	
Velmanase alfa for treating alpha- mannosidosis (HST29)	13/12/2023	Velmanase alfa is recommended as an option for treating the non-neurological signs and symptoms of mild to moderate alpha mannosidosis, only if:  • treatment is started in people under 18 years (it can be continued in people who turn 18 while on treatment)  • the company provides it according to the commercial arrangement.	х		06/03/2024	84	Not on Trust formulary. Shared with paediatric metabolic team (13/12/23). Fast-track requested. PMMC approved (06/03/24).	

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	Adherence of local formulary to NICE					
ï -			Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (davs)	Notes (e.g. rationale, method of making available)	
Dupilumab for treating eosinophilic oesophagitis in people 12 years and over (TERMINATED APPRAISAL) (TA938)	07/12/2023	Dupilumab – NOT RECOMMENDED for treating eosinophilic oesophagitis in people 12 years and over. This is because Sanofi has confirmed that it does not intend to make an evidence submission for the appraisal. Sanofi considers that there is currently unlikely to be enough evidence that the technology is a cost-effective use of NHS resources for this population.		х	14/12/2023	7	Not on Trust formulary for this indication. Shared with Gastroenterology team (07/12/23). Not recommended by NICE. MMC deemed N/A (14/12/23).	
Targeted-release budesonide for treating primary IgA nephropathy (TA937)	20/12/2023	Targeted-release budesonide— recommended as an option for treating primary immunoglobulin A nephropathy (IgAN) when there is a risk of rapid disease progression in adults with a urine protein-to-creatinine ratio of 1.5 g/g or more. Targeted-release budesonide is recommended only if:  • it is an add-on to optimised standard care including the highest tolerated licensed dose of angiotensin-converting enzyme (ACE) inhibitors or  • angiotensin-receptor blockers (ARBs), unless these are contraindicated  • the company provides it according to the commercial arrangement.	х		14/03/2024	85	Not on Trust formulary. Shared with Renal and medicine teams (20/12/23). Fast-track submitted. MMC approved and added to formulary (14/03/24).	
Idecabtagene vicleucel for treating relapsed and refractory multiple myeloma after 3 or more treatments (TERMINATED APPRAISAL) (TA936)	30/11/2023	Idecabtagene vicleucel (Abecma) – NOT RECOMMENDED for treating relapsed and refractory multiple myeloma after 3 or more treatments in adults. This is because BMS did not provide an evidence submission. We will review this decision if the company decides to make a submission.		х	14/12/2023	14	Not on Trust formulary. Shared for information with Haematology / ATMP teams (30/11/23). Not recommended by NICE. MMC deemed N/A (14/12/23).	
Secukinumab for treating moderate to severe hidradenitis suppurativa (TA935)	06/12/2023	Secukinumab – recommended as an option for treating active moderate to severe hidradenitis suppurativa (acne inversa) in adults when it has not responded well enough to conventional systemic treatment, only if:  adalimumab is not suitable, did not work or has stopped working the company provides secukinumab according to the commercial arrangements.		х	11/01/2024	36	Not on Trust formulary for this indication. Shared with Dermatology team (06/12/23). Currently N/A, no new dermatology patients being treated with biologics. MMC deemed N/A (11/01/24).	
Foslevodopa–foscarbidopa for treating advanced Parkinson's with motor symptoms (TA934)	29/11/2023	Foslevodopa-foscarbidopa – recommended as an option for treating advanced levodopa-responsive Parkinson's in adults whose symptoms include severe motor fluctuations and hyperkinesia or dyskinesia, when available medicines are not working well enough, only if:  • they cannot have apomorphine or deep brain stimulation, or these treatments no longer control symptoms, and  • the company provides foslevodopa-foscarbidopa according to the commercial arrangement.	х		08/02/2024	71	Not on Trust formulary. Shared with Parkinsons / Movement disorder team (29/11/23). Fast-track submitted. MMC approved (08/02/24).	
Tisagenlecleucel for treating relapsed or refractory diffuse large B-cell lymphoma after 2 or more systemic therapies (TERMINATED APPRAISAL) (TA933)	29/11/2023	Tisagenlecleucel— NOT RECOMMENDED for treating relapsed or refractory diffuse large B-cell lymphoma in adults after 2 or more systemic therapies. This is because Novartis has confirmed that it does not intend to make an evidence submission for the appraisal. Novartis has agreed with NICE and NHS England that a guidance update would not be a productive use of resources. Novartis considers that changes to treatment and reimbursement mean that the submission would not be viable within what NICE considers a cost-effective use of NHS resources.		х	14/12/2023	15	Not on Trust formulary for this indication. Shared for information with Haematology / ATMP teams (29/11/23). MMC deemed N/A (14/12/23).	
Decitabine–cedazuridine for untreated acute myeloid leukaemia when intensive chemotherapy is unsuitable (TERMINATED APPRAISAL) (TA932)	23/11/2023	Decitabine—cedazuridine— NOT RECOMMENDED for untreated acute myeloid leukaemia when intensive chemotherapy is unsuitable. This is because Otsuka Pharmaceuticals (UK) has confirmed that it does not intend to make an evidence submission for the appraisal. Otsuka Pharmaceuticals (UK) considers that there is not enough evidence to provide an evidence submission for this appraisal.		х	14/12/2023	21	Not on Trust formulary. Shared for information with Haematology teams (23/11/23). MMC to review at Dec-23 meeting (14/12/23).	
Zanubrutinib for treating chronic lymphocytic leukaemia (TA931)	22/11/2023	Zanubrutinib— recommended as an option for treating chronic lymphocytic leukaemia (CLL) in adults. It is only recommended if the CLL is:  untreated and  there is a 17p deletion or tumour protein 53 (TP53) mutation or  o there is no 17p deletion or TP53 mutation, and fludarabine plus cyclophosphamide and rituximab (FCR), or bendamustine plus rituximab (BR) is unsuitable, or  relapsed or refractory.  Zanubrutinib is recommended only if the company provides it according to the commercial arrangement.	х		14/12/2023	22	Not on Trust formulary for this indication. Shared with haematology team (22/11/23). Fast-track application submitted. MMC approved (14/12/23).	
Lutetium-177 vipivotide tetraxetan for treating PSMA-positive hormone-relapsed metastatic prostate cancer after 2 or more treatments (TA930)	15/11/2023	Lutetium 177 vipivotide tetraxetan – NOT RECOMMENDED, within its marketing authorisation, for treating prostate-specific membrane antigen (PSMA)-positive hormone-relapsed metastatic prostate cancer in adults:  • after taxane-based chemotherapy and an anti-androgen or • when taxanes are 'medically unsuitable'.		х	14/12/2023	29	Not on Trust formulary. Shared for information with Urology oncology team (15/11/23). MMC deemed N/A (14/12/23).	

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	ence of local fo	rmulary to NICE
		, and the second	<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (davs)	Notes (e.g. rationale, method of making available)
Empagliflozin for treating chronic heart failure with preserved or mildly reduced ejection fraction (TA929)	01/11/2023	Empagliflozin – recommended, within its marketing authorisation, as an option for treating symptomatic chronic heart failure with preserved or mildly reduced ejection fraction in adults.	х		14/12/2023	43	Not on Trust formulary for this indication. Shared with cardiology team (01/11/23). Fast-track application submitted. MMC approved (14/12/23).
Cabozantinib for previously treated advanced differentiated thyroid cancer unsuitable for or refractory to radioactive iodine (TA928)	01/11/2023	Cabozantinib – NOT RECOMMENDED, within its marketing authorisation, for treating locally advanced or metastatic differentiated thyroid cancer (DTC) that is unsuitable for or refractory to radioactive iodine, and that has progressed after systemic treatment, in adults.		х	14/12/2023	43	Not on Trust formulary for this indication. Shared for information with Head & Neck team (01/11/23). MMC deemed N/A (14/12/23).
Glofitamab for treating relapsed or refractory diffuse large B-cell lymphoma after 2 or more systemic treatments (TA927)	17/10/2023	Glofitamab – recommended, within its marketing authorisation, as an option for treating relapsed or refractory diffuse large B cell lymphoma in adults after 2 or more systemic treatments.  Glofitamab is only recommended if the company provides it according to the commercial arrangement.	х		09/11/2023	23	On Trust formulary (EAMS - 10/08/23). Shared with Haematology teams (17/10/23). Updated fast-track Submitted. MMC approved (09/11/23).
Baricitinib for treating severe alopecia areata (TA926)	25/10/2023	Baricitinib – NOT RECOMMENDED, within its marketing authorisation, for treating severe alopecia areata in adults.		х	09/11/2023	15	Not on Trust formulary. Shared for information with Dermatology teams (25/10/23). MMC noted and deemed N/A (09/11/23).
Mirikizumab for treating moderately to severely active ulcerative colitis (TA925)	25/10/2023	Mirikizumab – recommended as an option for treating moderately to severely active ulcerative colitis in adults when conventional or biological treatment cannot be tolerated, or the condition has not responded well enough or lost response to treatment, only if:  • a tumour necrosis factor (TNF) alpha inhibitor has not worked (that is the condition has not responded well enough or has lost response to treatment) or  • a TNF-alpha inhibitor cannot be tolerated or is not suitable and  • the company provides it according to the commercial arrangement.	х		14/12/2023	50	Not on Trust formulary. Shared with IBD / Gastro teams (25/10/23). Fast-track submitted. MMC approved (14/12/23).
Tirzepatide for treating type 2 diabetes (TA924)	25/10/2023	Tirzepatide – recommended for treating type 2 diabetes alongside diet and exercise in adults when it is insufficiently controlled only if:  • triple therapy with metformin and 2 other oral antidiabetic drugs is ineffective, not tolerated or contraindicated, and  • they have a body mass index (BMI) of 35 kg/m² or more, and specific psychological or other medical problems associated with obesity, or  • they have a BMI of less than 35 kg/m², and:  o insulin therapy would have significant occupational implications, or  o weight loss would benefit other significant obesity-related complications.  Use lower BMI thresholds (usually reduced by 2.5 kg/m²) for people from South Asian, Chinese, other Asian, Middle Eastern, Black African or African-Caribbean family backgrounds.	х		11/01/2024	78	Not on Trust formulary. Shared with Diabetes, Endocrinology ant Medicine teams (25/10/23). Fast-track submitted. MMC approved (11/01/24).
Tabelecleucel for treating post-transplant lymphoproliferative disorder caused by the Epstein-Barr virus (TERMINATED APPRAISAL) (TA923)	19/10/2023	Tabelecleucel – NOT RECOMMENDED for treating post transplant lymphoproliferative disorder caused by the Epstein Barr virus. This is because Pierre Fabre Ltd has confirmed that it does not intend to make an evidence submission for the appraisal at this time and will review this at a later date.		х	09/11/2023	21	Not on Trust formulary. Shared for information with Haematology and ATMP teams (23/10/23). N/A not recommended by NICE. MMC noted, deemed N/A (09/11/23).
Daridorexant for treating long-term insomnia (TA922)	18/10/2023	Daridorexant – recommended for treating insomnia in adults with symptoms lasting for 3 nights or more per week for at least 3 months, and whose daytime functioning is considerably affected, only if:  • cognitive behavioural therapy for insomnia (CBTi) has been tried but not worked, or  • CBTi is not available or is unsuitable.  1.2 The length of treatment should be as short as possible. Treatment with daridorexant should be assessed within 3 months of starting and should be stopped in people whose long-term insomnia has not responded adequately. If treatment is continued, assess whether it is still working at regular intervals.	х		14/12/2023	57	Not on Trust formulary for this indication. Shared with Sleep team (18/10/23). Fast-track application submitted. MMC deferred review at Nov-23 meeting (09/11/23). MMC approved for patients initiated in Primary Care (14/12/23).
Ruxolitinib for treating polycythaemia vera (updates & replaces TA356) (TA921)	18/10/2023	Ruxolitinib – recommended, within its marketing authorisation, for treating polycythaemia vera in adults who cannot tolerate hydroxycarbamide (also called hydroxyurea) or when the condition is resistant to it. It is only recommended if the company provides it according to the commercial arrangement.	х		12/10/2023	-6	On Trust formulary for this indication. MMC approved (12/10/23). Shared for information with Haematology team (18/10/23).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	ence of local fo	ormulary to NICE
			Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (davs)	Notes (e.g. rationale, method of making available)
<b>Tofacitinib</b> for treating active ankylosing spondylitis ( <b>TA920</b> )	18/10/2023	Tofacitinib – recommended as an option for treating active ankylosing spondylitis that is not controlled well enough with conventional therapy in adults, only if:  • tumour necrosis factor (TNF)-alpha inhibitors are not suitable or do not control the condition well enough and  • the company provides tofacitinib according to the commercial arrangement.	х		09/11/2023	22	Not on Trust formulary for this indication. Shared with Rheumatology teams (18/10/23). Fast-track application submitted. MMC approved (09/11/23).
Rimegepant for treating migraine (TA919)	18/10/2023	Rimegepant – recommended as an option for the acute treatment of migraine with or without aura in adults, only if for previous migraines:  • at least 2 triptans were tried and they did not work well enough or  • triptans were contraindicated or not tolerated, and nonsteroidal anti-inflammatory drugs (NSAIDs) and paracetamol were tried but did not work well enough.	х		11/01/2024	85	Not on Trust formulary for this indication. Shared with Neurology teams (18/10/23). Fast-track submitted. MMC to review at Jan-24 meeting (11/01/24).
<b>Bimekizumab</b> for treating axial spondyloarthritis ( <b>TA918</b> )	11/10/2023	Bimekizumab – recommended as an option in adults for treating active ankylosing spondylitis (AS) when conventional therapy has not worked well enough or is not tolerated, or active non radiographic axial spondyloarthritis (nr axSpA) with objective signs of inflammation (shown by elevated C reactive protein or MRI) when non-steroidal anti inflammatory drugs (NSAIDs), have not worked well enough or are not tolerated. It is recommended only if:  • tumour necrosis factor (TNF)-alpha inhibitors are not suitable or do not control the condition well enough, and  • the company provides it according to the commercial arrangement.	х		09/11/2023	29	Not on Trust formulary for this indication. Shared with Rheumatology teams (04/10/23). Fast-track application submitted. MMC approved (09/11/23).
<b>Daratumumab</b> with lenalidomide and dexamethasone for untreated multiple myeloma when a stem cell transplant is unsuitable ( <b>TA917</b> )	25/10/2023	Daratumumab with lenalidomide and dexamethasone – recommended, within its marketing authorisation, as an option for untreated multiple myeloma in adults, when an autologous stem cell transplant is unsuitable. It is only recommended if the company provides it according to the commercial arrangement.	х		09/11/2023	15	On Trust formulary, MMC approved CDF (Feb-18). Change from CDF to routine commissioning. MMC approved (09/11/23).
Bimekizumab for treating active psoriatic arthritis (TA916)	04/10/2023	Bimekizumab alone or with methotrexate— recommended as an option for treating active psoriatic arthritis (defined as peripheral arthritis with 3 or more tender joints and 3 or more swollen joints) in adults whose condition has not responded well enough to disease-modifying antirheumatic drugs (DMARDs) or who cannot tolerate them. It is recommended only if they have had 2 conventional DMARDs and:  at least 1 biological DMARD or tumour necrosis factor (TNF)-alpha inhibitors are contraindicated but would otherwise be considered (as described in NICE's technology appraisal guidance on etanercept, infliximab and adalimumab for the treatment of psoriatic arthritis).  Bimekizumab— recommended only if the company provides it according to the commercial arrangement.	х		09/11/2023	36	Not on Trust formulary for this indication. Shared with Rheumatology teams (04/10/23). Fast-track application submitted. MMC approved (09/11/23).
Pegunigalsidase alfa for treating Fabry disease (TA915)	04/10/2023	Pegunigalsidase alfa— recommended, within its marketing authorisation, as an option for treating Fabry disease (also known as alpha-galactosidase deficiency) in adults. It is recommended only if the company provides it according to the commercial arrangement.		x	12/10/2023	8	Not on Trust formulary. Shared with Inherited Metabolic Disease teams (04/10/23). N/A adults, patients are treated at NCA. Paeds team preparing fast-track application. PMMC to review once submitted.
Birch bark extract for treating epidermolysis bullosa (HST28)	20/09/2023	Birch bark extract – recommended, within its marketing authorisation, as an option for treating partial thickness wounds associated with dystrophic and junctional epidermolysis bullosa in people aged 6 months and over. It is only recommended if the company provides it according to the commercial arrangement.		х	04/10/2023	14	Not on Trust formulary. Shared with Dermatology Metabolic Disease teams (20/09/23). N/A, patients are treated at one of 4 EB centres:  1)Birmingham Women's & Children's Hospital 2)Solihull Hospital 3)Great Ormond Street Hospital 4)Guy's & St Thomas' Hospital PMMC deemed N/A (04/10/23).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	rmulary to NICE
			Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (davs)	<b>Notes</b> (e.g. rationale, method of making available)
Pembrolizumab for previously treated endometrial, biliary, colorectal, gastric or small intestine cancer with high microsatellite instability or mismatch repair deficiency (TA914)	20/09/2023	Pembrolizumab – recommended as an option for treating tumours with high microsatellite instability (MSI) or mismatch repair (MMR) deficiency in adults with:  • advanced or recurrent endometrial cancer that has progressed during or after a platinum-based therapy, who cannot have curative surgery or radiotherapy  • unresectable or metastatic gastric, small intestine or biliary cancer that has progressed during or after 1 therapy  • colorectal cancer after fluoropyrimidine combination therapy, only if they cannot have nivolumab with ipilimumab.  It is only recommended if:  • pembrolizumab is stopped at 2 years of uninterrupted treatment, or earlier if the cancer progresses, and  • the company provides it according to the commercial arrangement.		х	12/10/2023	22	Not on Trust formulary for this indication. Shared for gastro, GI, colorectal and gynaecology teams (20/09/23). N/A patients treated at Christie Hospital. MMC deemed N/A (12/10/23).
Mavacamten for treating symptomatic obstructive hypertrophic cardiomyopathy (TA913)	06/09/2023	Mavacamten – recommended as an option for treating symptomatic obstructive hypertrophic cardiomyopathy in adults who have a New York Heart Association class of 2 to 3. It is recommended only if:  • it is an add on to individually optimised standard care that includes beta blockers, non-dihydropyridine calcium-channel blockers or disopyramide, unless these are contraindicated, and  • the company provides it according to the commercial arrangement.	х		09/11/2023	64	Not on Trust formulary. Shared with adult & paediatric cardiology teams (06/09/23). Adult fast-track submitted. MMC approved (09/11/23).
Cipaglucosidase alfa with miglustat for treating late-onset Pompe disease in adults (TA912)	15/08/2023	Cipaglucosidase alfa (CIPA) plus miglustat – recommended, within its marketing authorisation, as an option for treating late-onset Pompe disease in adults. It is recommended only if the company provides it according to the commercial arrangement.	х		12/10/2023	58	Not on Trust formulary. Shared with Inherited Metabolic Disorder team (15/08/23). N/A adults, treated at NCA. Paeds preparing fast-track under NHSE M4C. PMMC to review once submitted (Oct-23).
Afamelanotide for treating erythropoietic protoporphyria (HST27)	26/07/2023	Afamelanotide – NOT RECOMMENDED, within its marketing authorisation, for preventing phototoxicity in adults with erythropoietic protoporphyria (EPP).		х	10/08/2023	15	Not on Trust formulary. Shared for information with Inherited Metabolic Disorder / Dermatology teams (26/07/23). Patients with cutaneous porphyrias would be treated at Photobiology / Dermatology Centre at NCA. N/A, not recommended by NICE. MMC deemed N/A (10/08/23).
Selpercatinib for untreated RET fusion-positive advanced non-small-cell lung cancer (TA911)	26/07/2023	Selpercatinib— recommended with managed access as an option for treating RET fusion-positive advanced non-small-cell lung cancer (NSCLC) in adults, only if:  • it is untreated  • the conditions in the managed access agreement for selpercatinib are followed.	х		14/09/2023	50	Not on Trust formulary for this indication. Shared with Pulmonary Oncology team (26/07/23). Fast-track submitted. MMC approved (14/09/23).
Semaglutide for managing overweight and obesity in young people aged 12 to 17 years (TERMINATED APPRAISAL) (TA910)	13/07/2023	Semaglutide – NOT RECOMMENDED for managing overweight and obesity in young people aged 12 to 17 years. This is because Novo Nordisk has confirmed that it does not intend to make an evidence submission for the appraisal.		х	02/08/2023	20	Not on Trust formulary for this indication. Shared with Paediatric Endocrinology team (13/07/23). N/A not recommended by NICE. PMMC deemed N/A (02/08/23).
<b>Lorlatinib</b> for untreated ALK-positive advanced non-small-cell lung cancer ( <b>TA909</b> )	12/07/2023	Lorlatinib— NOT RECOMMENDED, within its marketing authorisation, for treating anaplastic lymphoma kinase (ALK)-positive advanced non-small-cell lung cancer (NSCLC) in adults who have not had an ALK inhibitor.		х	10/08/2023	29	Not on Trust formulary for this indication. Shared with Pulmonary Oncology team (12/07/23). N/A not recommended by NICE. MMC deemed N/A (10/08/23).
Olaparib for maintenance treatment of relapsed, platinum-sensitive ovarian, fallopian tube or peritoneal cancer after 2 or more courses of platinum-based chemotherapy (updates & replaces TA620) (TA908)	05/07/2023	Olaparib – recommended as an option for the maintenance treatment of relapsed, platinum-sensitive, high-grade epithelial ovarian, fallopian tube, or primary peritoneal cancer in adults whose cancer has responded to platinum-based chemotherapy, only if:  • they have a BRCA1 or BRCA2 mutation  • they have had 2 or more courses of platinum-based chemotherapy  • the company provides olaparib according to the commercial arrangement.		х	13/07/2023	8	Not on Trust formulary for this indication. Shared with Gynaecology team (05/07/23). N/A MFT, patients treated at the Christie Hospital. MMC deemed N/A (13/07/23).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	ence of local fo	ormulary to NICE
		, and the second	Yes (mark 'x' if applicable)	N/A (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (davs)	Notes (e.g. rationale, method of making available)
<b>Deucravacitinib</b> for treating moderate to severe plaque psoriasis ( <b>TA907</b> )	28/06/2023	Deucravacitinib – recommended as an option for treating moderate to severe plaque psoriasis in adults, only if:  • the Psoriasis Area and Severity Index (PASI) score is 10 or more and the Dermatology Life Quality Index (DLQI) score is more than 10  • the condition has not responded to other systemic treatments, including ciclosporin, methotrexate and phototherapy, or these options are contraindicated or not tolerated  • the company provides deucravacitinib according to the commercial arrangement.		х	13/07/2023	15	Not on Trust formulary. Shared with Dermatology and Rheumatology teams (28/06/23). N/A MFT, patients treated at NCA. MMC deemed N/A (13/07/23).
Rimegepant for preventing migraine (TA906)	05/07/2023	Rimegepant – recommended as an option for preventing episodic migraine in adults who have at least 4 and fewer than 15 migraine attacks per month, only if at least 3 preventative treatments have not worked.		х	14/09/2023	71	Not on Trust formulary. Shared with Neurology team (05/07/23). N/A adult patients treated at Headache Service at NCA. MMC deemed N/A (14/09/23).
<b>Upadacitinib</b> for previously treated moderately to severely active Crohn's disease ( <b>TA905</b> )	21/06/2023	Upadacitinib – recommended as an option for treating moderately to severely active Crohn's disease in adults, only if:  • the disease has not responded well enough or lost response to a previous biological treatment or  • a previous biological treatment was not tolerated or  • tumour necrosis factor (TNF)-alpha inhibitors are contraindicated.  Upadacitinib is only recommended if the company provides it according to the commercial arrangement.	х		13/07/2023	22	Not on Trust formulary for this indication. Shared with Gastroenterology team (21/06/23). Fast-track submmitted. MMC approved (13/07/23).
Pembrolizumab with lenvatinib for previously treated advanced or recurrent endometrial cancer (TA904)	21/06/2023	Pembrolizumab plus lenvatinib – recommended, within its marketing authorisation, for treating advanced or recurrent endometrial cancer in adults:  • whose cancer has progressed on or after platinum-based chemotherapy and  • who cannot have curative surgery or radiotherapy.  Pembrolizumab plus lenvatinib is recommended only if the companies provide them according to the commercial arrangements.		х	13/07/2023	22	Not on Trust formulary for this indication. Shared with Gynaecology team (21/06/23). N/A MFT, patients treated at the Christie Hospital. For review by MMC (13/07/23).
<b>Darolutamide</b> with androgen deprivation therapy and docetaxel for treating hormonesensitive metastatic prostate cancer ( <b>TA903</b> )	21/06/2023	Darolutamide with docetaxel— recommended, within its marketing authorisation, as an option for treating hormone-sensitive metastatic prostate cancer in adults. Darolutamide is only recommended if the company provides it according to the commercial arrangement.		х	13/07/2023	22	Not on Trust formulary. Shared with Urology team (21/06/23). N/A MFT, patients treated at NCA / Christie Hospital. MMC deemed N/A (13/07/23).
Dapagliflozin for treating chronic heart failure with preserved or mildly reduced ejection fraction (TA902)	21/06/2023	Dapagliflozin – recommended, within its marketing authorisation, as an option for treating symptomatic chronic heart failure with preserved or mildly reduced ejection fraction in adults.	х		14/09/2023	85	Not on Trust formulary for this indication. Shared with Cardiology team (21/06/23). Fast-track submitted. MMC approved (14/09/23).
Cemiplimab for treating recurrent or metastatic cervical cancer (TERMINATED APPRAISAL) (TA901)	20/06/2023	Cemiplimab – NOT RECOMMENDED for treating recurrent or metastatic cervical cancer in adults. This is because Sanofi has confirmed that it does not intend to make an evidence submission for the appraisal. Currently, Sanofi considers that the technology will not be launched in the UK for treating this indication.		х	13/07/2023	23	Not on Trust formulary for this indication. Shared with Gynaecology team (20/06/23). N/A MFT, not recommended by NICE. MMC deemed N/A (13/07/23).
Tixagevimab plus cilgavimab for preventing COVID-19 (TA900)	14/06/2023	Tixagevimab plus cilgavimab – NOT RECOMMENDED for the pre exposure prophylaxis of COVID 19 in adults who are not currently infected with SARS CoV 2 and who have not had a known recent exposure to someone infected with SARS CoV 2, and:  • who are unlikely to have an adequate immune response to COVID 19 vaccination, or  • for whom COVID 19 vaccination is not recommended.		х	13/07/2023	29	Not on Trust formulary. Shared with Antimicrobial team for info (14/06/23). N/A not recommended by NICE. MMC deemed N/A (13/07/23).
Esketamine for treating major depressive disorder in adults at imminent risk of suicide (TERMINATED APPRAISAL) (TA899)	06/06/2023	Esketamine— NOT RECOMMENDED for treating major depressive disorder in adults at imminent risk of suicide. This is because Janssen has confirmed that it does not intend to make an evidence submission for the appraisal at this time. Janssen considers that there is unlikely to be enough evidence that the technology is a cost-effective use of NHS resources for this population.		х	13/07/2023	37	Not on Trust formulary. Shared with Emergency Medicine, Medicine and Mental Health teams for info (12/06/23). N/A not recommended by NICE. MMC deemed N/A (13/07/23).
<b>Dabrafenib</b> plus trametinib for treating BRAF V600 mutation-positive advanced non-small- cell lung cancer ( <b>TA898</b> )	14/06/2023	Dabrafenib plus trametinib— recommended as an option for treating BRAF V600 mutation-positive advanced non-small-cell lung cancer (NSCLC) in adults, only if:  • it is used as first-line treatment of advanced stage cancer, and  • the company provides it according to the commercial arrangement.	х		13/07/2023	29	On Trust formulary for this indication (interim covid treatment 11/02/21). Shared with Pulmonary Oncology team (14/06/23). Fast track submitted. MMC approved (13/07/23).
<b>Daratumumab</b> with bortezomib and dexamethasone for previously treated multiple myeloma (updates & replaces TA573) ( <b>TA897</b> )	06/06/2023	Daratumumab with bortezomib and dexamethasone— recommended as an option for treating multiple myeloma in adults, only if they have had just 1 previous line of treatment and:  • it included lenalidomide or  • lenalidomide is unsuitable as a second-line treatment and  • the company provides it according to the commercial arrangement.	х		13/07/2023	37	On Trust formulary for this indication (TA573 - 11/04/19). Shared with Haematology team (12/06/23). Confirmation use will continue in line with guidance. MMC approved (13/07/23).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	ermulary to NICE
		, , , ,	<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (davs)	Notes (e.g. rationale, method of making available)
Bulevirtide for treating chronic hepatitis D (TA896)	07/06/2023	Bulevirtide – recommended as an option for treating chronic hepatitis D in adults with compensated liver disease only if:  • there is evidence of significant fibrosis (METAVIR stage F2 or above or Ishak stage 3 or above) and  • their hepatitis has not responded to peginterferon alfa 2a (PEG IFN) or they cannot have interferon-based therapy.  Bulevirtide is only recommended if the company provides it according to the commercial arrangement.	х		13/07/2023	36	Not on Trust formulary. Shared with Hepatology team (12/06/23). Fast-track submitted. MMC approved (13/07/23).
Axicabtagene ciloleucel for treating relapsed or refractory diffuse large B-cell lymphoma after first-line chemoimmunotherapy (TA895)	07/06/2023	Axicabtagene ciloleucel – recommended for use within the CDF as an option for treating diffuse large B cell lymphoma in adults when an autologous stem cell transplant is suitable if it:  • has relapsed within 12 months after first-line chemoimmunotherapy or  • is refractory to first-line chemoimmunotherapy.  It is recommended only if the conditions in the managed access agreement for axicabtagene ciloleucel are followed.	х		13/07/2023	36	Not on Trust formulary for this indication. Shared with Haematology team (12/06/23). ATMP committee approved. Noted at MMC (13/07/23).
Axicabtagene ciloleucel for treating relapsed or refractory follicular lymphoma (TA894)	07/06/2023	Axicabtagene ciloleucel – NOT RECOMMENDED, within its marketing authorisation, for treating relapsed or refractory follicular lymphoma after 3 or more systemic treatments in adults.		х	13/07/2023	36	Not on Trust formulary for this indication. Shared with Haematology team (12/06/23). N/A, not recommended by NICE. N/A, noted by MMC (13/07/23).
Brexucabtagene autoleucel for treating relapsed or refractory B-cell acute lymphoblastic leukaemia in people 26 years and over (TAB93)	07/06/2023	Brexucabtagene autoleucel – recommended for use within the CDF as an option for treating relapsed or refractory B cell acute lymphoblastic leukaemia in people 26 years and over. It is recommended only if the conditions in the managed access agreement for brexucabtagene autoleucel are followed.	х		13/07/2023	36	Not on Trust formulary for this indication. Shared with Haematology team (12/06/23). ATMP committee approved. Noted at MMC (13/07/23).
Mosunetuzumab for treating relapsed or refractory follicular lymphoma (TA892)	31/05/2023	Mosunetuzumab – NOT RECOMMENDED for treating relapsed or refractory follicular lymphoma in adults who have had 2 or more systemic therapies.		х	08/06/2023	8	Not on Trust formulary. Shared with Haematology team (31/05/23). N/A, not recommended by NICE . MMC deemed N/A (08/06/23).
Ibrutinib with venetoclax for untreated chronic lymphocytic leukaemia (TA891)	31/05/2023	Ibrutinib plus venetoclax— recommended as an option for untreated chronic lymphocytic leukaemia (CLL) in adults. This is only if the companies provide both drugs according to the commercial arrangements.	х		13/07/2023	29	Not on Trust formulary for this indication. Shared with Haematology team (31/05/23). Fast-track submitted. MMC approved (13/07/23).
Difelikefalin for treating pruritus in people having haemodialysis (TA890)	17/05/2023	Difelikefalin – recommended for treating moderate to severe pruritus in adults with chronic kidney disease (CKD) having in-centre haemodialysis. Difelikefalin is only recommended if the company provides it according to the commercial arrangement.	х		10/08/2023	85	Not on Trust formulary. Shared with Renal team (17/05/23). Fast-track submitted. MMC approved (10/08/23)
Ciltacabtagene autoleucel for treating relapsed or refractory multiple myeloma (TERMINATED APPRAISAL) (TA889)	17/05/2023	Ciltacabtagene autoleucel – NOT RECOMMENDED for treating relapsed or refractory multiple myeloma in adults. This is because Janssen withdrew its evidence submission for the appraisal. Janssen considers that the technology will not, at this time, be launched in the UK for treating this indication.		х	08/06/2023	29	Not on Trust formulary. Shared for information with Haematology team (17/05/23). MMC deemed N/A (08/06/23).
Risankizumab for previously treated moderately to severely active Crohn's disease (TA888)	17/05/2023	Risankizumab – recommended as an option for treating moderately to severely active Crohn's disease in people 16 years and over, only if:  • the disease has not responded well enough or lost response to a previous biological treatment, or • a previous biological treatment was not tolerated, or • tumour necrosis factor (TNF)-alpha inhibitors are not suitable.  Risankizumab – only recommended if the company provides it according to the commercial arrangement.	х		08/06/2023	22	Not on Trust formulary for this indication. Shared with Gastroenterology IBD team (17/05/23). Fast-track submitted. MMC approved (08/06/23).
Olaparib for previously treated BRCA mutation- positive hormone-relapsed metastatic prostate cancer (TA887)	10/05/2023	Olaparib – recommended as an option for treating hormone-relapsed metastatic prostate cancer with BRCA1 or BRCA2 mutations that has progressed after a newer hormonal treatment (such as abiraterone or enzalutamide) in adults. Olaparib is only recommended if the company provides it according to the commercial arrangement.		х	08/06/2023	29	Not on Trust formulary for this indication. Shared with Urology team (10/05/23). N/A, patients treated at the Christie Hospital. MMC deemed N/A (08/06/23).
Olaparib for adjuvant treatment of BRCA mutation-positive HER2-negative high-risk early breast cancer after chemotherapy (TA886)	10/05/2023	Olaparib (alone or with endocrine therapy)— recommended as an option for the adjuvant treatment of HER2 negative high-risk early breast cancer that has been treated with neoadjuvant or adjuvant chemotherapy in adults with germline BRCA1 or 2 mutations. It is only recommended if the company provides it according to the commercial arrangement.		х	08/06/2023	29	Not on Trust formulary for this indication. Shared with Surgery and Breast teams (10/05/23). N/A, patients treated at the Christie Hospital . MMC deemed N/A (08/06/23).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	ence of local fo	ermulary to NICE
			Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (davs)	Notes (e.g. rationale, method of making available)
Pembrolizumab plus chemotherapy with or without bevacizumab for persistent, recurrent or metastatic cervical cancer (TA885)	03/05/2023	Pembrolizumab plus chemotherapy with or without bevacizumab – recommended for use within the CDF as an option for treating persistent, recurrent or metastatic cervical cancer in adults whose tumours express PD L1 with a combined positive score (CPS) of at least 1. It is recommended only if:  • pembrolizumab is stopped at 2 years of uninterrupted treatment, or earlier if disease progresses, and  • the conditions in the managed access agreement for pembrolizumab are followed.		x	11/05/2023	8	Not on Trust formulary for this indication. Shared with Gynaecology team (11/05/23). N/A, patients treated at the Christie Hospital. MMC deemed N/A (11/05/23).
Capmatinib for treating advanced non-small- cell lung cancer with MET exon 14 skipping (TERMINATED APPRAISAL) (TA884)	03/05/2023	Capmatinib— NOT RECOMMENDED for treating advanced non-small-cell lung cancer with MET exon 14 skipping in adults. This is because Novartis Pharmaceuticals has confirmed that it does not intend to make an evidence submission for the appraisal at this time. Novartis Pharmaceuticals considers that the technology is unlikely to be used at this point in the treatment pathway.		х	11/05/2023	8	Not on Trust formulary. Shared for info with Pulmonary Oncology team (03/05/23). Not recommended by NICE. MMC deemed N/A (11/05/23).
<b>Tafasitamab</b> with lenalidomide for treating relapsed or refractory diffuse large B-cell lymphoma ( <b>TA883</b> )	03/05/2023	Tafasitamab with lenalidomide— NOT RECOMMENDED for treating relapsed or refractory diffuse large B cell lymphoma in adults who cannot have an autologous stem cell transplant.  -		х	11/05/2023	8	Not on Trust formulary. Shared with Haematology teams (03/05/23). Not recommended by NICE. MMC deemed N/A (11/05/23).
Voclosporin with mycophenolate mofetil for treating lupus nephritis (TA882)	03/05/2023	Voclosporin with mycophenolate mofetil – recommended as an option for treating active class 3 to 5 (including mixed class 3 and 5, and 4 and 5) lupus nephritis in adults. It is only recommended if the company provides voclosporin according to the commercial arrangement.	х		13/07/2023	71	Not on Trust formulary. Shared with Renal and Rheumatology teams (03/05/23). MMC approved (13/07/23).
<b>Ripretinib</b> for treating advanced gastrointestinal stromal tumour after 3 or more treatments ( <b>TA881</b> )	03/05/2023	Ripretinib – NOT RECOMMENDED for treating advanced gastrointestinal stromal tumour (GIST) in adults after 3 or more kinase inhibitors, including imatinib.		х	11/05/2023	8	Not on Trust formulary. Shared with Gastroenterology teams (03/05/23). Not recommended by NICE. MMC deemed N/A (11/05/23).
Tezepelumab for treating severe asthma (TA880)	20/04/2023	Tezepelumab – recommended as an add-on maintenance treatment option for severe asthma in people 12 years and over, when treatment with high-dose inhaled corticosteroids plus another maintenance treatment has not worked well enough. It is recommended only if people:  • have had 3 or more exacerbations in the previous year, or  • are having maintenance oral corticosteroids.  Tezepelumab is recommended only if the company provides it according to the commercial arrangement.	х		05/07/2023	76	Not on Trust formulary. Shared with Respiratory teams (20/04/23). Fast-track submitted. PMMC approved (05/07/23); MMC approved (13/07/23).
Trastuzumab deruxtecan for treating HER2- positive unresectable or metastatic gastric or gastro-oesophageal junction cancer after anti- HER2 treatment (TERMINATED APPRAISAL) (TA879)	06/04/2023	Trastuzumab deruxtecan — NOT RECOMMENDED for treating HER2 positive unresectable or metastatic gastric or gastro-oesophageal junction cancer after a previous anti HER2 based regimen in adults. This is because Dailchi Sankyo UK has confirmed that it does not intend to make an evidence submission for the appraisal at this time. Dailchi Sankyo UK considers that collecting further evidence from the DESTINY-Gastric clinical trials will allow them to provide a more comprehensive evidence submission for this appraisal.		x	20/04/2023	14	Not on Trust formulary. Shared with Gastroenterology teams (06/04/23). Not recommended by NICE. MMC deemed N/A (20/04/23).
		TOTAL	40	49			
			% "Yes"	% "N/A"	-	Average implement time(days)	
Adherence statistics for 2023-24			45%	55%		30	



Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA	Availability of medicine for NHS patients with this medical condition, as			Adhere	ence of local fo	rmulary to NICE
Titles are hyperlinks to full guidance	Release	indicated by NICE	Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
2022-23							
Casirivimab plus imdevimab, nirmatrelvir plus ritonavir, sotrovimab and tocilizumab for treating COVID-19 (TA878)	29/03/2023	Nirmatrelvir plus ritonavir – recommended as an option for treating COVID 19 in adults, only if they:  do not need supplemental oxygen for COVID 19 and have an increased risk for progression to severe COVID 19, as defined in the independent advisory group report commissioned by the DHSC. Sotrovimab – recommended as an option for treating COVID 19 in adults and young people aged 12 years and over and weighing at least 40 kg, only if: they do not need supplemental oxygen for COVID 19 and they have an increased risk for progression to severe COVID 19, as defined in the independent advisory group report commissioned by the DHSC and nirmatrelvir plus ritonavir is contraindicated or unsuitable. Sotrovimab is only recommended if the company provides it according to the commercial arrangement. Tocilizumab – recommended as an option for treating COVID 19 in adults who: are having systemic corticosteroids and need supplemental oxygen or mechanical ventilation. Tocilizumab plus imdevimab – NOT RECOMMENDED for treating acute COVID 19 in adults.	x		08/06/2023	71	On Trust formulary for this indication in line with NHSE interim CCP, Ronapreve not approved. Updated fast track requested (29/03/23). MMC approved (08/06/23)
Finerenone for treating chronic kidney disease in type 2 diabetes (TA877)	23/03/2023	Finerenone — recommended as an option for treating stage 3 and 4 chronic kidney disease (with albuminuria) associated with type 2 diabetes in adults. It is recommended only if:  • it is an add-on to optimised standard care; this should include, unless they are unsuitable, the highest tolerated licensed doses of:  o ACE inhibitors or ARBs and o SGLT2 inhibitors and  • the person has an eGFR of 25 mL/min/1.73 m² or more.	х		08/06/2023	77	Not on Trust formulary. Shared with Renal and Diabetes teams (23/03/23). Fast track requested. Awaiting submission.
<b>Nivolumab</b> with chemotherapy for neoadjuvant treatment of resectable non-small-cell lung cancer ( <b>TA876</b> )	22/03/2023	Nivolumab with chemotherapy — recommended as an option for the neoadjuvant treatment of resectable (tumours at least 4 cm or node positive) non-small-cell lung cancer (NSCLC) in adults. It is only recommended if the company provides it according to the commercial arrangement.	х		09/03/2023	-13	Not on Trust formulary for this indication. Pulmonary Oncology team submitted fast track (24/02/23). MMC approved (09/02/23), fully ratified (22/03/23).
Semaglutide for managing overweight and obesity (TA875)	08/03/2023	Semaglutide — recommended as an option for weight management, including weight loss and weight maintenance, alongside a reduced-calorie diet and increased physical activity in adults, only if:  ■ it is used for a maximum of 2 years, and within a specialist weight management service providing multidisciplinary management of overweight or obesity (including but not limited to tiers 3 and 4), and  ■ they have at least 1 weight-related comorbidity and:  □ a body mass index (BMI) of at least 35.0 kg/m², or  □ a BMI of 30.0 kg/m² to 34.9 kg/m² and meet the criteria for referral to specialist weight management services in NICE's guideline on obesity.  Use lower BMI thresholds (usually reduced by 2.5 kg/m²) for people from South Asian, Chinese, other Asian, Middle Eastern, Black African or African-Caribbean family backgrounds.		×	20/04/2023	43	Not on Trust formulary for this indication. Shared with Diabetes & Medicine teams (20/04/23). No commissioned Tier 3 weight management service. Patients to be referred to NCA. MMC deemed N/A (20/04/23).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	, as Adherence of local formulary to NICE					
			Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)	
Polatuzumab vedotin in combination for untreated diffuse large B-cell lymphoma (TA874)	01/03/2023	Polatuzumab vedotin with rituximab, cyclophosphamide, doxorubicin & prednisolone (R CHP) — recommended for untreated diffuse large B-cell lymphoma (DLBCL) in adults, only if  they have an International Prognostic Index (IPI) score of 2 to 5  the company provides it according to the commercial arrangement.	x		20/04/2023	50	Not on Trust formulary for this indication. Shared with Haematology teams (01/03/23). Fast-track submitted (10/03/23). MMC approved (20/04/23).	
Cannabidiol for treating seizures caused by tuberous sclerosis complex (TA873)	01/03/2023	Cannabidiol — recommended as an add-on treatment option for seizures caused by tuberous sclerosis complex in people aged 2 years and over, only if:  • their seizures are not controlled well enough by 2 or more antiseizure medications (either used alone or in combination) or these treatments were not tolerated  • seizure frequency is checked every 6 months, and cannabidiol is stopped if the frequency has not fallen by at least 30% compared with the 6 months before starting treatment  • the company provides cannabidiol according to the commercial arrangement.	х		05/04/2023	35	Not on Trust formulary for this indication. Contacted Neurology teams (01/03/23). Fast-track submitted (01/03/23). PMMC approved (05/04/23).	
Axicabtagene ciloleucel for treating diffuse large B-cell lymphoma and primary mediastinal large B-cell lymphoma after 2 or more systemic therapies (updates & replaces TA559)(TA872)	28/02/2023	Axicabtagene ciloleucel — recommended as an option for treating relapsed or refractory diffuse large B-cell lymphoma or primary mediastinal large B-cell lymphoma in adults after 2 or more systemic therapies. It is recommended only if the company provides axicabtagene ciloleucel according to the commercial arrangement.	х		09/03/2023	9	On Trust formulary in line with TA559 (Feb-19). Shared with Haematology teams (28/02/23). Confirmation of switch from CDF to routine commissioning. Noted at MMC (09/03/23).	
Eptinezumab for preventing migraine (TA871)	01/03/2023	Eptinezumab – recommended as an option for preventing migraine in adults, only if:  • they have 4 or more migraine days a month  • at least 3 preventive drug treatments have failed and  • the company provides it according to the commercial arrangement		х	09/03/2023	8	Not on Trust formulary. Shared with Neurology teams (01/03/23). Adults - N/A, patients treated at NCA. Paeds - not required. MMC deemed N/A (09/03/23).	
Ixazomib with lenalidomide and dexamethasone for treating relapsed or refractory multiple myeloma (updates & replaces TA505) (TA870)	22/02/2023	Ixazomib, with lenalidomide and dexamethasone— recommended as an option for treating multiple myeloma in adults, only if:  • they have had 2 or 3 lines of therapy and  • the company provides ixazomib according to the commercial arrangement.	х		09/03/2023	15	On Trust formulary in line with TA505 (Feb-18). Shared with Haematology teams (20/02/23). Confirmation of switch from CDF to routine commissioning. Noted at MMC (09/03/23).	
Teclistamab for treating relapsed or refractory multiple myeloma after 3 or more therapies (TERMINATED APPRAISAL) (TA869)	15/02/2023	Teclistamab – NOT RECOMMENDED for treating relapsed or refractory multiple myeloma in adults after 3 or more therapies. This is because Janssen has confirmed that it does not intend to make an evidence submission for the appraisal. Janssen considers that there is unlikely to be enough evidence that the technology is a cost-effective use of NHS resources for this population.		х	09/03/2023	22	Not on Trust formulary. Shared with Haematology teams (20/02/23). Not recommended by NICE. MMC deemed N/A (09/03/23).	
<b>Vutrisiran</b> for treating hereditary transthyretin- related amyloidosis ( <b>TA868</b> )	16/02/2023	Vutrisiran – recommended as an option for treating hereditary transthyretin-related amyloidosis in adults with stage 1 or stage 2 polyneuropathy. It is only recommended if the company provides vutrisiran according to the commercial arrangement.		х	09/03/2023	21	Not on Trust formulary. Shared with Haematology & Cardiology teams (20/02/23). Patients are referred for treatment to the National Amyloidosis Centre at Royal Free Hospital (UCL). MMC deemed N/A (09/03/23).	
Mitapivat for treating pyruvate kinase deficiency (TERMINATED APPRAISAL) (TA867)	16/02/2023	Mitapivat – NOT RECOMMENDED for treating pyruvate kinase deficiency in adults. Agios has confirmed that it does not intend to make an evidence submission for the appraisal. This is because the technology will not be launched in the UK at this time for treating this indication.		х	09/03/2023	21	Not on Trust formulary. Shared with Haematology teams (20/02/23). Not recommended by NICE. MMC deemed N/A (09/03/23).	
Regorafenib for previously treated metastatic colorectal cancer (TA866)	08/02/2023	Regorafenib – recommended as an option for metastatic colorectal cancer in adults who have had previous treatment (including fluoropyrimidine-based chemotherapy, anti VEGF therapy and anti EGFR therapy) or when these treatments are unsuitable. Regorafenib is only recommended if the company provides it according to the commercial arrangement).		х	09/03/2023	29	Not on Trust formulary for this indication. Contacted Gastro / Colorectal teams (08/02/23). MFT, patients referred to the Christie for this indication. MMC deemed N/A (09/03/23)	
Nivolumab with fluoropyrimidine- and platinum-based chemotherapy for untreated unresectable advanced, recurrent, or metastatic oesophageal squamous cell carcinoma (TA865)	08/02/2023	Nivolumab with fluoropyrimidine-based and platinum-based combination chemotherapy— recommended as an option for untreated unresectable advanced, recurrent, or metastatic oesophageal squamous cell carcinoma in adults whose tumours express PD L1 at a level of 1% or more. It is recommended only if:  • pembrolizumab plus chemotherapy is not suitable  • the company provides nivolumab according to the commercial arrangement.		х	09/03/2023	29	Not on Trust formulary for this indication. Contacted Upper GI team (08/02/23). MFT, patients referred to the Christie for this indication. For MMC deemed N/A (09/03/23).	

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	ence of local fo	rmulary to NICE
		, ,	Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Nintedanib for treating idiopathic pulmonary fibrosis when forced vital capacity is above 80% predicted (partially replaces TA379) (TA864)	01/02/2023	Nintedanib – recommended as an option for treating idiopathic pulmonary fibrosis in adults, only if:  • they have a forced vital capacity of above 80% predicted  • the company provides it according to the commercial arrangement.	х		09/03/2023	36	Not on Trust formulary for this indication. Contacted ILD teams (02/02/23). Fast-track submitted (13/02/23). MMC approved (09/03/23).
Somatrogon for treating growth disturbance in people 3 years and over (TA863)	01/02/2023	Somatrogon – recommended as an option for treating growth disturbance caused by growth hormone deficiency in children and young people aged 3 years and over.	х		05/04/2023	63	Not on Trust formulary. Shared with Endocrinology teams (02/02/23). Fast track submitted (10/03/23). PMMC approved (Apr-23).
Trastuzumab deruxtecan for treating HER2- positive unresectable or metastatic breast cancer after 1 or more anti-HER2 treatments (TA862)	01/02/2023	Trastuzumab deruxtecan – recommended with managed access as an option for treating HER2 positive unresectable or metastatic breast cancer after 1 or more anti-HER2 treatments in adults. It is only recommended if the conditions in the managed access agreement for trastuzumab deruxtecan are followed.		х	09/02/2023	8	Not on Trust formulary for this indication. Contacted Surgery & Breast teams (02/02/23). MFT, patients referred to the Christie for this indication. MMC deemed N/A (09/02/23).
Upadacitinib for treating active non-radiographic axial spondyloarthritis (TA861)	01/02/2023	Upadacitinib – recommended as an option for treating active non-radiographic axial spondyloarthritis with objective signs of inflammation (shown by elevated C-reactive protein or MRI) that is not controlled well enough with non-steroidal anti-inflammatory drugs (NSAIDs) in adults. It is recommended only if:  * tumour necrosis factor (TNF)-alpha inhibitors are not suitable or do not control the condition well enough and  * the company provides upadacitinib according to the commercial arrangement.	х		09/03/2023	36	Not on Trust formulary. Shared with Rheumatology teams (02/02/23). Fast track submitted (16/02/23). MMC approved (09/03/23).
Maribavir for treating refractory cytomegalovirus infection after transplant (TA860)	18/01/2023	Maribavir – recommended as an option for treating cytomegalovirus (CMV) infection that is refractory to treatment including cidofovir, foscarnet, ganciclovir or valganciclovir in adults who have had a haematopoietic stem cell transplant or solid organ transplant. It is recommended only if the company provides it according to the commercial arrangement.	х		09/02/2023	22	Not on Trust formulary. Shared with Haematology and Transplant teams (18/01/23). Fast track submitted (25/01/23). MMC approved (09/02/23).
Angiotensin II for treating vasosuppressor- resistant hypotension caused by septic or distributive shock (TERMINATED APPRAISAL) (TA859)	16/01/2023	Angiotensin II— NOT RECOMMENDED for treating vasosuppressor-resistant hypotension caused by septic or distributive shock. This is because Paion AG has confirmed that it does not intend to make an evidence submission for the appraisal. Paion AG considers that there are likely low numbers of people who would be eligible for treatment because of the likely positioning in the treatment pathway for this condition.		х	09/02/2023	24	Not on Trust formulary. Shared with Intensive Care, Cardiology and Medicine Teams (01/12/22). Not recommended by NICE. MMC deemed N/A (09/02/23).
Lenvatinib with pembrolizumab for untreated advanced renal cell carcinoma (TA858)	11/01/2023	Lenvatinib with pembrolizumab – recommended as an option for untreated advanced renal cell carcinoma in adults, only if:  • their disease is intermediate or poor risk as defined in the International Metastatic Renal Cell Carcinoma Database Consortium criteria and  • nivolumab with ipilimumab would otherwise be offered and  • the companies provide lenvatinib and pembrolizumab according to the commercial arrangements.		х	09/02/2023	29	Not on Trust formulary for this indication. Contacted Renal team (11/01/23). MFT, patients referred to the Christie for this indication. MMC deemed N/A (09/02/23).
<b>Nivolumab</b> with platinum- and fluoropyrimidine-based chemotherapy for untreated HER2-negative advanced gastric, gastro-oesophageal junction or oesophageal adenocarcinoma ( <b>TA857</b> )	11/01/2023	Nivolumab with platinum- and fluoropyrimidine-based chemotherapy— recommended as an option for untreated HER2 negative, advanced or metastatic gastric, gastro-oesophageal junction or oesophageal adenocarcinoma in adults whose tumours express PD L1 with a combined positive score (CPS) of 5 or more. Nivolumab is only recommended if the company provides it according to the commercial arrangement.		х	09/02/2023	29	Not on Trust formulary for this indication. Contacted gastro team (11/01/23). N/A MFT, patients referred to the Christie for this indication. MMC deemed N/A (09/02/23).
<b>Upadacitinib</b> for treating moderately to severely active ulcerative colitis ( <b>TA856</b> )	04/01/2023	Upadacitinib – recommended as an option for treating moderately to severely active ulcerative colitis in adults:  • when conventional or biological treatment cannot be tolerated, or  • if the condition has not responded well enough or has stopped responding to these treatments, and  • if the company provides upadacitinib according to the commercial arrangement.	х		09/02/2023	36	Not on Trust formulary for this indication. Contacted Gastro team (04/01/23). Fast track submitted 06/01/22. MMC approved (09/02/23).
Mobocertinib for treating EGFR exon 20 insertion mutation-positive advanced non-small-cell lung cancer after platinum-based chemotherapy (TA855)	04/01/2023	Mobocertinib— recommended as an option for treating locally advanced or metastatic non-small-cell lung cancer (NSCLC) after platinum-based chemotherapy in adults whose tumours have epidermal growth factor receptor (EGFR) exon 20 insertion mutations. It is recommended only if the company provides it according to the commercial arrangement.	х		09/02/2023	36	On Trust formulary for this indication (National Orbis Drug Access arrangements) (11/08/22). Updated fast track requested (04/01/23). MMC approved (09/02/23).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	Adherence of local formulary to NICE						
			Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)		
Esketamine nasal spray for treatment-resistant depression (TA854)	14/12/2022	Esketamine nasal spray with a selective serotonin reuptake inhibitor (SSRI) or a serotonin-norepinephrine reuptake inhibitor (SNRI)— NOT RECOMMENDED for treatment-resistant depression that has not responded to at least 2 different antidepressants in the current moderate to severe depressive episode in adults.		х	12/01/2023	29	Not on Trust formulary for this indication. Shared for info with Emergency and CAMHS teams for info (01/12/22). Not recommended by NICE. MMC deemed N/A (12/01/23).		
Avatrombopag for treating primary chronic immune thrombocytopenia (TA853)	15/12/2022	Avatrombopag – recommended as an option for treating primary chronic immune thrombocytopenia (ITP) refractory to other treatments (for example, corticosteroids, immunoglobulins) in adults. It is only recommended if the company provides it according to the commercial arrangement.	х		04/01/2023	20	Not on Trust formulary for this indication. Contacted Haematology team (15/12/22). Fast track submitted (04/01/23). Approved MMC Chairs action (04/01/23). MMC approved (12/01/23).		
<b>Trifluridine–tipiracil</b> for treating metastatic gastric cancer or gastro-oesophageal junction adenocarcinoma after 2 or more treatments (replacing TA669) ( <b>TA852</b> )	14/12/2022	Trifluridine-tipiracil – recommended as an option for treating metastatic gastric cancer or gastro- oesophageal junction adenocarcinoma in adults who have had 2 or more treatment regimens. It is only recommended if the company provides trifluridine-tipiracil according to the commercial arrangement.		х	12/01/2023	29	Not on Trust formulary for this indication. Contacted Gastro team (14/12/22). N/A MFT, patients referred to the christie Hospital. MMC deemed N/A (12/01/23).		
Pembrolizumab for neoadjuvant and adjuvant treatment of triple-negative early or locally advanced breast cancer (TA851)	14/12/2022	Pembrolizumab – recommended as an option with chemotherapy for neoadjuvant treatment and then continued alone as adjuvant treatment after surgery for adults with triple-negative:  • early breast cancer at high risk of recurrence or  • locally advanced breast cancer.  It is recommended only if the company provides pembrolizumab according to the commercial arrangement.		х	12/01/2023	29	Not on Trust formulary for this indication. Contacted Breast team (14/12/22). N/A MFT, patients referred to the Christie. MMC deemed N/A (12/01/23).		
Amivantamab for treating EGFR exon 20 insertion mutation-positive advanced non-small-cell lung cancer after platinum-based chemotherapy (TA850)	14/12/2022	Amivantamab – NOT RECOMMENDED for treating locally advanced or metastatic non-small-cell lung cancer (NSCLC) after platinum-based chemotherapy in adults whose tumours have epidermal growth factor receptor (EGFR) exon 20 insertion mutations.		х	12/01/2023	29	Not on Trust formulary for this indication. Shared with Pulmonary Oncology team (14/12/22). Not recommended by NICE. MMC deemed N/A (12/01/23).		
Cabozantinib for previously treated advanced hepatocellular carcinoma (TA849)	14/12/2022	Cabozantinib— recommended as an option for treating advanced hepatocellular carcinoma (HCC) in adults who have had sorafenib, only if:  • they have Child—Pugh grade A liver impairment and an Eastern Cooperative Oncology Group (ECOG) performance status of 0 or 1, and  • the company provides it according to the commercial arrangement.		х	12/01/2023	29	Not on Trust formulary for this indication. Shared with Hepatology team (14/12/22). N/A MFT, patients referred to the Christie Hospital. MMC deemed N/A (12/01/23).		
Cemiplimab for untreated PD-L1-positive advanced or metastatic non-small-cell lung cancer (TERMINATED APPRAISAL) (TA848)	01/12/2022	Cemiplimab – NOT RECOMMENDED for untreated PD L1 positive advanced or metastatic non small cell lung cancer (NSCLC) in adults. Sanofi has confirmed that it does not intend to make a submission for the appraisal. This is because the technology will not be launched in the UK for treating this indication.		х	08/12/2022	7	Not on Trust formulary for this indication. Shared with Pulmonary Oncology Team (01/12/22). Not recommended by NICE. MMC deemed N/A (08/12/22).		
Mepolizumab for treating severe chronic rhinosinusitis with nasal polyps (TERMINATED APPRAISAL) (TA847)	29/11/2022	Mepolizumab – NOT RECOMMENDED for treating severe chronic rhinosinusitis with nasal polyps in adults. GSK has confirmed that it does not intend to make an evidence submission for this appraisal. This is because the technology will not be launched in the UK for treating this indication.		х	08/12/2022	9	Not on Trust formulary for this indication. Shared with ENT Teams (29/11/22). Not recommended by NICE. MMC deemed N/A (08/12/22).		
Mepolizumab for treating severe hypereosinophilic syndrome (TERMINATED APPRAISAL) (TA846)	29/11/2022	Mepolizumab – NOT RECOMMENDED for treating hypereosinophilic syndrome in adults. This is because GSK has confirmed that it does not intend to make an evidence submission for the appraisal. GSK considers that there is unlikely to be enough evidence that the technology is a cost-effective use of NHS resources in this rare disease population.		х	08/12/2022	9	Not on Trust formulary for this indication. Shared with Immunology team (29/11/22). Not recommended by NICE. MMC deemed N/A (08/12/22).		
Mepolizumab for treating eosinophilic granulomatosis with polyangiitis (TERMINATED APPRAISAL) (TA845)	29/11/2022	Mepolizumab – NOT RECOMMENDED for treating eosinophilic granulomatosis with polyangiitis in people 6 years and over. This is because GSK has confirmed that it does not intend to make an evidence submission for the appraisal. GSK considers that there is unlikely to be enough evidence that the technology is a cost-effective use of NHS resources in this rare disease population.		х	08/12/2022	9	Not on Trust formulary for this indication. Shared with Rheumatology and Immunology teams (29/11/22). Not recommended by NICE. MMC deemed N/A (08/12/22).		
Luspatercept for treating anaemia caused by myelodysplastic syndromes (TERMINATED APPRAISAL) (TA844)	24/11/2022	Luspatercept— NOT RECOMMENDED for treating anaemia caused by myelodysplastic syndromes. This is because BMS has confirmed that it does not intend to make an evidence submission for the appraisal. BMS considers that there is not enough evidence to provide a submission for this appraisal.		х	08/12/2022	14	Not on Trust formulary for this indication. Shared with Haematology team (24/11/22). Not recommended by NICE. MMC deemed N/A (08/12/22).		
Luspatercept for treating anaemia caused by beta-thalassaemia (TERMINATED APPRAISAL) (TA843)	24/11/2022	Luspatercept— NOT RECOMMENDED for treating anaemia caused by beta-thalassaemia in adults. This is because BMS has confirmed that it does not intend to make an evidence submission for the appraisal. BMS considers that there is not enough evidence to provide a submission for this appraisal.		х	08/12/2022	14	Not on Trust formulary for this indication. Shared with Haematology team (24/11/22). Not recommended by NICE. MMC deemed N/A (08/12/22).		

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	lition, as Adherence of local formulary to NICE					
			<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)				
Tisagenlecleucel for treating follicular lymphoma after 2 or more therapies (TERMINATED APPRAISAL) (TA842)	22/11/2022	Tisagenlecleucel— NOT RECOMMENDED for treating relapsed or refractory follicular lymphoma in adults after 2 or more therapies. This is because Novartis has confirmed that it does not intend to make an evidence submission for the appraisal. Novartis considers that the technology is unlikely to be a cost-effective use of NHS resources		х	08/12/2022	16	Not on Trust formulary for this indication. Shared with Haematology team (22/11/22). Not recommended by NICE. MMC deemed N/A (08/12/22).				
Carfilzomib with daratumumab and dexamethasone for treating relapsed or refractory multiple myeloma (TERMINATED APPRAISAL) (TA841)	22/11/2022	Carfilzomib with daratumumab and dexamethasone— NOT RECOMMENDED for treating relapsed or refractory multiple myeloma in adults. This is because Amgen has confirmed that it does not intend to make an evidence submission for the appraisal. Amgen considers that there is unlikely to be enough evidence that the technology is a cost-effective use of NHS resources for this population.		х	08/12/2022	16	Not on Trust formulary for this indication. Shared with Haematology team (22/11/22). Not recommended by NICE. MMC deemed N/A (08/12/22).				
Ruxolitinib for treating chronic graft versus host disease refractory to corticosteroids (TERMINATED APPRAISAL) (TA840)	16/11/2022	Ruxolitinib – NOT RECOMMENDED for treating chronic graft versus host disease refractory to corticosteroids in people aged 12 and over. This is because Novartis has confirmed that it does not intend to make an evidence submission for the appraisal. Novartis considers that the technology is unlikely to be a cost-effective use of NHS resources based on the current price in existing indications.		х	08/12/2022	22	Not on Trust formulary for this indication. Shared with Haematology team (16/11/22). Not recommended by NICE. MMC deemed N/A (08/12/22).				
Ruxolitinib for treating acute graft versus host disease refractory to corticosteroids (TERMINATED APPRAISAL) (TA839)	16/11/2022	Ruxolitinib – NOT RECOMMENDED for treating acute graft versus host disease refractory to corticosteroids in people aged 12 and over. This is because Novartis has confirmed that it does not intend to make an evidence submission for the appraisal. Novartis considers that the technology is unlikely to be a cost-effective use of NHS resources based on the current price in existing indications.		х	08/12/2022	22	Not on Trust formulary for this indication. Shared with Haematology team (16/11/22). Not recommended by NICE. MMC deemed N/A (08/12/22).				
Slow-release potassium bicarbonate-potassium citrate for treating distal renal tubular acidosis (TERMINATED APPRAISAL) (TA838)	02/11/2022	Slow-release potassium bicarbonate—potassium citrate— NOT RECOMMENDED for treating distal renal tubular acidosis. This is because Advicenne considers that, at this time, there is not enough evidence to provide a submission for this appraisal.		х	10/11/2022	8	Not on Trust formulary for this indication. Shared with Renal team (02/11/22). Not recommended by NICE. MMC deemed N/A (10/11/22).				
Pembrolizumab for adjuvant treatment of resected stage 2B or 2C melanoma (TA837)	26/10/2022	Pembrolizumab – recommended as an option for the adjuvant treatment of completely resected stage 2B or 2C melanoma in people 12 years and over. It is recommended only if the company provides pembrolizumab according to the commercial arrangement.		х	10/11/2022	15	Not on Trust formulary for this indication. Contacted Dermatology team (26/10/22). N/A MFT, patients referred to the Christie. MMC deemed N/A (10/11/22).				
Palbociclib with fulvestrant for treating hormone receptor-positive, HER2-negative advanced breast cancer after endocrine therapy (TA836)	26/10/2022	Palbociclib plus fulvestrant— recommended as an option for treating hormone receptor positive, HER2 negative locally advanced or metastatic breast cancer in adults who have had endocrine therapy only if:  • exemestane plus everolimus is the most appropriate alternative to a cyclin-dependent kinase 4 and 6 (CDK4/6) inhibitor and  • the company provides it according to the commercial arrangement.		х	10/11/2022	15	Not on Trust formulary for this indication. Contacted Breast team (26/10/22). N/A MFT, patients referred to the Christie. MMC deemed N/A (10/11/22).				
Fostamatinib for treating refractory chronic immune thrombocytopenia (updates & replaces TA759) (TA835)	19/10/2022	Fostamatinib – recommended as an option for treating refractory chronic immune thrombocytopenia (ITP) in adults, only if:  • they have previously had a thrombopoietin receptor agonist (TPO RA), or a TPO RA is unsuitable  • the company provides fostamatinib according to the commercial arrangement.	х		08/12/2022	50	Not on Trust formulary. Contacted Haematology team (26/10/22). Fast-track submitted. MMC approved (08/12/22).				
SQ HDM SLIT for treating allergic rhinitis and allergic asthma caused by house dust mites (TERMINATED APPRAISAL) (TA834)	12/10/2022	SQ HDM SLIT – NOT RECOMMENDED for treating allergic rhinitis and allergic asthma caused by house dust mites. This is because ALK-Abello has confirmed that it does not intend to provide an evidence submission. ALK-Abello considers that it is essential to collect more clinical evidence to make a comprehensive and robust submission.		х	10/11/2022	29	Not on Trust formulary. Shared with immunology team, ENT and respiratory teams (12/10/22). Not recommended by NICE. MMC deemed N/A (10/11/22).				
Zanubrutinib for treating Waldenstrom's macroglobulinaemia (TA833)	19/10/2022	Zanubrutinib – recommended as an option for treating Waldenstrom's macroglobulinaemia in adults who have had at least 1 treatment, only if:  bendamustine plus rituximab is also suitable and  the company provides it according to the commercial arrangement.	х		08/09/2022	-41	On Trust formulary for this indication in line with NHSE commissioning (Sep-22). Shared with Haematology Teams (19/10/22). MMC approved (08/09/22).				
Relugolix—estradiol—norethisterone acetate for treating moderate to severe symptoms of uterine fibroids (TA832)	19/10/2022	Relugolix—estradiol—norethisterone acetate— recommended as an option for treating moderate to severe symptoms of uterine fibroids in adults of reproductive age.	х		08/12/2022	50	Not on Trust formulary. Shared with Gynaecology team (19/10/22). Fast track submitted (21/11/22). MMC approved (08/12/22).				

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	ence of local fo	ormulary to NICE
·			Yes (mark 'x' if applicable)	N/A (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Olaparib for previously treated BRCA mutation- positive hormone-relapsed metastatic prostate cancer (TA831)	05/10/2022	Olaparib – NOT RECOMMENDED for treating hormone-relapsed metastatic prostate cancer with BRCA1 or BRCA2 mutations that has progressed after a newer hormonal treatment (such as abiraterone or enzalutamide).		х	10/11/2022	36	Not on Trust formulary for this indication. Shared for info with Urology team (10/11/22). Not recommended by NICE. MMC deemed N/A (10/11/22).
Pembrolizumab for adjuvant treatment of renal cell carcinoma (TA830)	19/10/2022	Pembrolizumab – recommended as an option for the adjuvant treatment of renal cell carcinoma at increased risk of recurrence after nephrectomy, with or without metastatic lesion resection, in adults. It is recommended only if the company provides it according to the commercial arrangement.		х	10/11/2022	22	Not on Trust formulary for this indication. Contacted Renal team (19/10/22). N/A MFT, patients referred to the Christie hospital. MMC deemed N/A (10/11/22).
<b>Upadacitinib</b> for treating active ankylosing spondylitis ( <b>TA829</b> )	30/09/2022	Upadacitinib – recommended as an option for treating active ankylosing spondylitis that is not controlled well enough with conventional therapy in adults, only if:  • tumour necrosis factor (TNF)-alpha inhibitors are not suitable or do not control the condition well enough and  • the company provides upadacitinib according to the commercial arrangement.	х		10/11/2022	41	Not on Trust formulary for this indication. Contacted Rheumatology team (30/09/22). Fast track submitted (10/10/22). MMC approved (10/11/22).
Ozanimod for treating moderately to severely active ulcerative colitis (TA828)	05/10/2022	Ozanimod – recommended as an option for treating moderately to severely active ulcerative collitis in adults, only if:  • conventional treatment cannot be tolerated or is not working well enough and infliximab is not suitable, or  • biological treatment cannot be tolerated or is not working well enough, and  • the company provides it according to the commercial arrangement.	х		08/12/2022	64	Not on Trust formulary. Contacted Gastro team (05/10/22). Fast track submitted (15/11/22). MMC approved (08/12/22).
Oral azacitidine for maintenance treatment of acute myeloid leukaemia after induction therapy (TA827)	05/10/2022	Oral azacitidine – recommended as an option for maintenance treatment for acute myeloid leukaemia (AML) in adults who:  • are in complete remission, or complete remission with incomplete blood count recovery, after induction therapy with or without consolidation treatment, and  • cannot have or do not want a haematopoietic stem cell transplant.  It is recommended only if the company provides oral azacitidine according to the commercial arrangement.	х		13/10/2022	8	Not on Trust formulary for this indication. Contacted Haematology team (05/10/22). Fast track submitted (06/10/22). MMC approved (13/10/22).
Vedolizumab for treating chronic refractory pouchitis after surgery for ulcerative colitis (TERMINATED APPRAISAL) (TA826)	21/09/2022	Vedolizumab – NOT RECOMMENDED for treating chronic refractory pouchitis after surgery for ulcerative colitis. This is because Takeda did not provide an evidence submission. Takeda has confirmed that the technology will not be launched in the UK for this indication.		х	13/10/2022	22	Not on Trust formulary for this indication. Shared for info with Gastro team (21/09/22). Not recommended by NICE. MMC deemed N/A (13/10/22).
Avacopan for treating severe active granulomatosis with polyangiitis or microscopic polyangiitis (TA825)	21/09/2022	Avacopan with a cyclophosphamide or rituximab regimen – recommended as an option for treating severe active granulomatosis with polyangiitis or microscopic polyangiitis in adults. It is recommended only if the company provides it according to the commercial arrangement.	х		13/10/2022	22	Not on Trust formulary for this indication. Contacted Rheumatology and Renal teams (21/09/22). Fast track submitted (10/10/22). MMC approved (13/10/22).
<b>Dexamethasone</b> intravitreal implant for treating diabetic macular oedema (replacing TA349) (TA824)	14/09/2022	<b>Dexamethasone</b> intravitreal implant – recommended as an option for treating visual impairment caused by diabetic macular oedema in adults only if their condition has not responded well enough to, or if they cannot have non-corticosteroid therapy.	х		08/12/2022	85	On Trust formulary for this indication. Contacted Macular team (14/09/22). Updated Fast track submitted (24/11/22). MMC approved (08/12/22).
Atezolizumab for adjuvant treatment of resected non-small-cell lung cancer (TA823)	28/09/2022	Atezolizumab – recommended for use within the CDF as an option for adjuvant treatment after complete tumour resection in adults with stage 2 to 3a NSCLC) whose:  • tumours have the programmed cell death ligand 1 (PD L1) biomarker expression on 50% or more of their tumour cells and  • whose disease has not progressed after platinum-based adjuvant chemotherapy.  It is recommended only if the company provides atezolizumab according to the managed access agreement.	х		08/12/2022	71	Not on Trust formulary for this indication. Contacted Pulmonary Oncology team (28/09/22). Fast track submitted (25/11/22) MMC approved (08/12/22).
Melphalan for haematological diseases before allogeneic haematopoietic stem cell transplant (TERMINATED APPRAISAL) (TA822)	14/09/2022	Melphalan – NOT RECOMMENDED for treating haematological diseases before allogeneic haematopoietic stem cell transplant. This is because ADIENNE has confirmed that it does not intend to make an evidence submission for the appraisal because it does not represent a commercially viable option for them to pursue.		х	13/10/2022	29	Not on Trust formulary for this indication. Shared for info with Haematology team (14/09/22). Not recommended by NICE. MMC deemed N/A (13/10/22).
Avalglucosidase alfa for treating Pompe disease (TA821)	24/08/2022	Avalglucosidase alfa (AVAL) – recommended as an option for treating Pompe disease in babies, children, young people and adults, only if the company provides AVAL according to the commercial arrangement.	х		02/11/2022	70	On Trust formulary for this indication (EAMS). Shared for info with Haematology team (24/08/22). Updated Fast track submitted (24/10/22). MMC approved (02/11/22).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	ion, as Adherence of local formulary to NICE					
			<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)	
Brolucizumab for treating diabetic macular oedema (TA820)	31/08/2022	Brolucizumab – recommended as an option for treating visual impairment due to diabetic macular oedema in adults, only if:  the eye has a central retinal thickness of 400 micrometres or more at the start of treatment  the company provides brolucizumab according to the commercial arrangement.	х		08/12/2022	99	Not on Trust formulary for this indication. Contacted Macular team (31/08/22). Fast track submitted (24/11/22) MMC approved (08/12/22).	
Sacituzumab govitecan for treating unresectable triple-negative advanced breast cancer after 2 or more therapies (TA819)	17/08/2022	Sacituzumab govitecan – recommended as an option for treating unresectable triple-negative locally advanced or metastatic breast cancer in adults after 2 or more systemic therapies, at least 1 of which was for advanced disease.		х	08/09/2022	22	Not on Trust formulary for this indication. Contacted Breast team (17/08/22). N/A MFT eligible patients are referred to the Christie Hospital (23/08/22). MMC deemed N/A (08/09/22).	
Nivolumab with ipilimumab for untreated unresectable malignant pleural mesothelioma (TA818)	17/08/2022	Nivolumab plus ipilimumab – recommended as an option for untreated unresectable malignant pleural mesothelioma in adults, only if:  • they have an Eastern Cooperative Oncology Group (ECOG) performance status of 0 or 1  • the company provides it according to the commercial arrangement.	x		11/08/2022	-6	On Trust formulary (NHSE SSC2407) for this indication (11/08/22). MMC approved (11/08/22)	
Nivolumab for adjuvant treatment of invasive urothelial cancer at high risk of recurrence (TA817)	10/08/2022	Nivolumab — recommended as an option for the adjuvant treatment of muscle-invasive urothelial cancer that is at high risk of recurrence after radical resection in adults whose tumours express PD-L1 at a level of 1% or more. It is recommended only if:  adjuvant treatment with platinum based chemotherapy is unsuitable, and  the company provides nivolumab according to the commercial arrangement.		х	08/09/2022	29	Not on Trust formulary for this indication. Contacted Urology team (10/08/22). N/A MFT eligible patients are referred to the Christie Hospital (11/08/22). MMC deemed N/A (08/09/22).	
Alpelisib with fulvestrant for treating hormone receptor-positive, HER2-negative, PIK3CA-mutated advanced breast cancer (TA816)	10/08/2022	Alpelisib plus fulvestrant — recommended as an option for treating hormone receptor-positive, HER2-negative, PIK3CA-mutated, locally advanced or metastatic breast cancer in adults, only if:  • their cancer has progressed after a CDK4/6 inhibitor plus an aromatase inhibitor and  • the company provides alpelisib according to the commercial arrangement).		х	08/09/2022	29	Not on Trust formulary. Contacted Breast team (10/08/22). N/A MFT eligible patients are referred to the Christie Hospital (10/08/22). MMC deemed N/A (08/09/22).	
<b>Guselkumab</b> for treating active psoriatic arthritis after inadequate response to DMARDs (replacing TA711) ( <b>TA815</b> )	10/08/2022	Guselkumab, alone or with methotrexate — recommended as an option for treating active psoriatic arthritis in adults whose disease has not responded well enough to DMARDs or who cannot tolerate them. It is recommended only if they have had 2 conventional DMARDs and:  • have had at least 1 biological DMARD, or  • TNF-alpha inhibitors are contraindicated but would otherwise be considered (as described in NICE TA199).  Guselkumab is recommended only if the company provides it according to the commercial arrangement. Active psoriatic arthritis is defined as peripheral arthritis with 3 or more tender joints and 3 or more swollen joints.	x		08/09/2022	29	Not on Trust formulary for this indication. Contacted Rheumatology team (10/08/22). Fast track submitted (24/08/22). MMC approved (08/09/22).	
Abrocitinib, tralokinumab or upadacitinib for treating moderate to severe atopic dermatitis (TA814)	03/08/2022	Abrocitinib and upadacitinib — recommended as options for treating moderate to severe atopic dermatitis that is suitable for systemic treatment in adults and young people 12 years and over, only if:  • the disease has not responded to at least 1 systemic immunosuppressant, or these are not suitable  • the companies provide abrocitinib and upadacitinib according to the commercial arrangement.  Tralokinumab — recommended as an option for treating moderate to severe atopic dermatitis that is suitable for systemic treatment in adults, only if:  • the disease has not responded to at least 1 systemic immunosuppressant, or these are not suitable  • the company provides tralokinumab according to the commercial arrangement.		x	05/10/2022	63	Not on Trust formulary for this indication. Contacted Dermatology team (03/08/22). Fast track submitted (14/09/22). PMMC approved (05/10/22).	
Asciminib for treating chronic myeloid leukaemia after 2 or more tyrosine kinase inhibitors (TA813)	03/08/2022	Asciminib — recommended as an option for treating chronic-phase Philadelphia chromosome-positive chronic myeloid leukaemia without a T315I mutation after 2 or more tyrosine kinase inhibitors in adults. It is recommended only if the company provides asciminib according to the commercial arrangement.	х		11/08/2022	8	On Trust formulary (EAMS) (10/03/22). Shared with Haematology team (03/08/22). Fast track submitted. MMC approved (11/08/22)	
Pralsetinib for treating RET fusion-positive advanced non-small-cell lung cancer (TA812)	03/08/2022	Pralsetinib — NOT RECOMMENDED for treating RET fusion-positive advanced non-small-cell lung cancer (NSCLC) in adults who have not had a RET inhibitor before.		х	11/08/2022	8	Not on trust formulary. Shared for information with Pulmonary Oncology team (03/08/22). MMC deemed N/A (11/08/22).	

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	ence of local fo	ormulary to NICE
			<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
<b>Duvelisib</b> for treating relapsed or refractory chronic lymphocytic leukaemia after 2 or more treatments (TERMINATED APPRAISAL) (TA811)	27/07/2022	Duvelisib – NOT RECOMMENDED for treating relapsed or refractory chronic lymphocytic leukaemia after 2 or more treatments. Secura Bio has confirmed that it is withdrawing the evidence submission for the appraisal because the technology will not be launched in the UK for treating this indication.		х	11/08/2022	15	Not on trust formulary. Shared for information with Haematology team (27/07/22). MMC deemed N/A (11/08/22).
Abemaciclib with endocrine therapy for adjuvant treatment of hormone receptor-positive, HER2-negative, node-positive early breast cancer at high risk of recurrence (TA810)	20/07/2022	Abemaciclib with endocrine therapy— recommended as an option for adjuvant treatment of hormone receptor-positive, HER2-negative, node positive early breast cancer in adults whose disease is at high risk of recurrence, defined by the following clinical and pathological features:  • at least 4 positive axillary lymph nodes, or  • 1 to 3 positive axillary lymph nodes, and at least one of the following criteria:  • grade 3 disease (defined as at least 8 points on the modified Bloom—Richardson grading system or equivalent), or  • primary tumour size of at least 5 cm.  It is recommended only if the company provides it according to the commercial arrangement.		x	11/08/2022	22	Not on trust formulary for this indication. Shared with Breast team (20/07/22). N/A patients are referred to the Christie hospital for treatment (26/07/22). MMC deemed N/A (11/08/22).
Imlifidase for desensitisation treatment before kidney transplant in people with chronic kidney disease (TA809)	20/07/2022	Imlifidase – recommended as a desensitisation treatment option for adults who:  • are waiting for a kidney transplant from a deceased donor  • are highly sensitised to human leukocyte antigens (HLA)  • have a positive crossmatch with the donor and are unlikely to have a transplant under the available kidney allocation system (including prioritisation programmes for highly sensitised people). It is recommended only if:  • a maximum of 1 dose is given  • it is given in a specialist centre with experience of treating high sensitisation to HLA  • the company provides imlifidase according to the commercial arrangement.	х		13/10/2022	85	Not on trust formulary for this indication. Shared with Renal team (20/07/22). Fast track submitted (26/09/22). MMC approved (13/10/22).
Fenfluramine for treating seizures associated with Dravet syndrome (TA808)	08/07/2022	Fenfluramine – recommended as an add on to other antiseizure medicines for treating seizures associated with Dravet syndrome in people aged 2 years and older, only if:  • seizures have not been controlled after trying 2 or more antiseizure medicines  • the frequency of convulsive seizures is checked every 6 months, and fenfluramine is stopped if it has not fallen by at least 30% compared with the 6 months before starting treatment  • the company provides fenfluramine according to the commercial arrangement.	х		03/08/2022	26	Not on trust formulary for this indication. Shared with Neurology team (08/07/22). Fast track submitted (20/07/22). PMMC approved (03/08/22).
Roxadustat for treating symptomatic anaemia in chronic kidney disease (TA807)	13/07/2022	Roxadustat — recommended as an option for treating symptomatic anaemia associated with chronic kidney disease (CKD) in adults only if:  • they have stage 3 to 5 CKD with no iron deficiency and  • they are not on dialysis at the start of treatment and  • the company provides roxadustat according to the commercial arrangement.	х		14/07/2022	1	Not on trust formulary for this indication. Contacted Renal team (13/07/22). Fast track submitted in advance (04/07/22). MMC approved (14/07/22).
Belimumab for treating lupus nephritis (TERMINATED APPRAISAL) (TA806)	13/07/2022	Belimumab — NOT RECOMMENDED for treating lupus nephritis. This is because GlaxoSmithKline has confirmed that it does not intend to provide an evidence submission. GlaxoSmithKline considers that there is unlikely to be enough evidence that the technology is a cost-effective use of NHS resources in this population.		х	11/08/2022	29	Not on trust formulary for this indication. Shared with Renal team (13/07/22). Fast track submitted in advance (04/07/22). MMC approved (14/07/22).
Icosapent ethyl with statin therapy for reducing the risk of cardiovascular events in people with raised triglycerides (TA805)	13/07/2022	Icosapent ethyl — recommended as an option for reducing the risk of cardiovascular events in adults. It is recommended if they have a high risk of cardiovascular events and raised fasting triglycerides (1.7 mmol/litre or above) and are taking statins, but only if they have:  • established cardiovascular disease (secondary prevention), defined as a history of any of the following:  • acute coronary syndrome (such as myocardial infarction or unstable angina needing hospitalisation)  • coronary or other arterial revascularisation procedures  • coronary heart disease  • ischaemic stroke  • peripheral arterial disease, and  • low-density lipoprotein cholesterol (LDL C) levels above 1.04 mmol/litre and below or equal to 2.60 mmol/litre.	×		11/08/2022	29	Not on trust formulary. Contacted Cardiology team (13/07/22). Fast track submitted (02/08/22). MMC approved (11/08/22).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE		ormulary to NICE			
			Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Teduglutide for treating short bowel syndrome (TA804)	30/06/2022	<b>Teduglutide</b> — recommended as an option for treating short bowel syndrome (SBS) in people 1 year and above. People's condition should be stable following a period of intestinal adaptation after surgery before having teduglutide. Teduglutide is recommended only if the company provides it according to the commercial arrangement.	x <sup>b</sup>	x <sup>a</sup>	14/07/2022	14	Not on trust formulary. Contacted Gastro teams (30/06/22). Adults N/A patients treated at SRFT. MMC deemed N/A (11/08/22). Paeds Fast track submitted (21/10/22). PMMC approved (02/11/22).
<b>Risankizumab</b> for treating active psoriatic arthritis after inadequate response to DMARDs (TA803)	13/07/2022	Risankizumab, alone or with methotrexate — recommended as an option for treating active psoriatic arthritis in adults whose disease has not responded well enough to disease-modifying antirheumatic drugs (DMARDs) or who cannot tolerate them. It is recommended only if they have:  • peripheral arthritis with 3 or more tender joints and 3 or more swollen joints  • moderate to severe psoriasis (a body surface area of at least 3% affected by plaque psoriasis and a Psoriasis Area and Severity Index [PASI] score greater than 10)  • had 2 conventional DMARDs and at least 1 biological DMARD.  Risankizumab is recommended only if the company provides it according to the commercial arrangement.	х		11/08/2022	29	Not on trust formulary for this indication. Contacted Rhematology team (13/07/22). Fast track submitted (22/07/22). MMC approved (11/08/22).
Cemiplimab for treating advanced cutaneous squamous cell carcinoma (updates & replaces TA592) (TA802)	29/06/2022	Cemiplimab — recommended as an option for treating metastatic or locally advanced cutaneous squamous cell carcinoma in adults when curative surgery or curative radiotherapy is not suitable, only if:  • it is stopped at 24 months or earlier if disease progresses, and  • the company provides cemiplimab according to the commercial arrangement.		х	14/07/2022	15	Not on trust formulary for this indication. Shared with Breast team (20/07/22). N/A patients are referred to the Christie hospital for treatment (26/07/22). MMC deemed N/A (11/08/22).
Pembrolizumab plus chemotherapy for untreated, triple-negative, locally recurrent unresectable or metastatic breast cancer (TA801)	29/06/2022	Pembrolizumab plus paclitaxel or nab paclitaxel – recommended as an option for treating triple negative, locally recurrent unresectable or metastatic breast cancer in adults who have not had chemotherapy for metastatic disease. It is recommended only if:  • the fumours express PD L1 with a combined positive score (CPS) of 10 or more and an immune cell staining (IC) of less than 1%, and  • the company provides pembrolizumab according to the commercial arrangement.		х	14/07/2022	15	Not on trust formulary for this indication. Shared with Dermatology team (29/06/22). N/A patients are referred to the Christie hospital for treatment (29/06/22). MMC deemed N/A (14/07/22).
Faricimab for treating wet age-related macular degeneration (TA800)	29/06/2022	Faricimab — recommended as an option for treating wet age-related macular degeneration in adults, only if:  • the eye has a best-corrected visual acuity between 6/12 and 6/96  • there is no permanent structural damage to the central fovea  • the lesion size is 12 disc areas or less in greatest linear dimension  • there are signs of recent disease progression (for example, blood vessel growth as shown by fluorescein angiography, or recent visual acuity changes)  • the company provides faricimab according to the commercial arrangement.	х		11/08/2022	43	Not on trust formulary this indication. Contacted Macular team (29/06/22). Fast track submitted (31/07/22). MMC approved (11/08/22).
Faricimab for treating diabetic macular oedema (TA799)	29/06/2022	Faricimab – recommended as an option for treating visual impairment due to diabetic macular oedema in adults, only if:  • the eye has a central retinal thickness of 400 micrometres or more at the start of treatment  • the company provides faricimab according to the commercial arrangement.	х		08/12/2022	162	Not on trust formulary this indication. Contacted Macular team (29/06/22). Fast track submitted (24/11/22). MMC approved (08/12/22).
<b>Durvalumab</b> for maintenance treatment of unresectable non-small-cell lung cancer after platinum-based chemoradiation (replacing TA578) ( <b>TA798</b> )	15/06/2022	Durvalumab — recommended as an option for treating locally advanced unresectable non-small-cell lung cancer (NSCLC) in adults whose tumours express programmed cell death ligand 1 (PD L1) on 1% or more of cells and whose disease has not progressed after platinum-based chemoradiation, only if:  • they have had concurrent platinum-based chemoradiation  • the company provides durvalumab according to the commercial arrangement.		х	14/07/2022	29	On trust formulary for this indication. Contacted Pulmonary Oncology team (15/06/22). N/A eligible patients are referred to the Christie Hospital. (29/06/22). MMC deemed N/A (14/07/22).
Enfortumab vedotin for previously treated locally advanced or metastatic urothelial cancer (TERMINATED APPRAISAL) (TA797)	15/06/2022	Enfortumab vedotin — NOT RECOMMENDED for treating locally advanced or metastatic urothelial cancer after platinum-containing chemotherapy and a PD 1 or PD L1 inhibitor. This is because Astellas did not provide an evidence submission. Astellas has confirmed that there is unlikely to be enough evidence that the technology is a cost-effective use of NHS resources in this population.		х	14/07/2022	29	Not on trust formulary. Contacted Pulmonary Oncology team (15/06/22). N/A eligible patients are referred to the Christie Hospital. (29/06/22). MMC deemed N/A (14/07/22).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			ormulary to NICE		
			<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Venetoclax for treating chronic lymphocytic leukaemia (replacing TA487) (TA796)	15/06/2022	Venetoclax monotherapy— recommended for treating chronic lymphocytic leukaemia (CLL) in adults:  • with a 17p deletion or TP53 mutation and when a B cell receptor pathway inhibitor is unsuitable, or whose disease has progressed after a B cell receptor pathway inhibitor or  • without a 17p deletion or TP53 mutation, and whose disease has progressed after both chemo immunotherapy and a B cell receptor pathway inhibitor.  It is recommended only if the company provides venetoclax according to the commercial arrangement.	х		08/09/2022	85	On trust formulary for this indication. Contacted Haematology team (15/06/22). Updated fast track submitted (29/08/22). MMC approved (08/09/22).
Ibrutinib for treating Waldenstrom's macroglobulinaemia (replacing TA491) (TA795)	08/06/2022	Ibrutinib – NOT RECOMMENDED for treating Waldenstrom's macroglobulinaemia in adults who have had at least 1 previous therapy.		х	09/06/2022	1	On formulary for this indication. Contacted Haematology team (08/06/22). MMC removed from formulary for indication (09/06/22).
<b>Diroximel fumarate</b> for treating relapsing–remitting multiple sclerosis ( <b>TA794</b> )	08/06/2022	Diroximel fumarate – recommended as an option for treating active relapsing – remitting multiple sclerosis (normally defined as 2 clinically significant relapses in the previous 2 years) in adults, only if:  • they do not have highly active or rapidly evolving severe relapsing – remitting multiple sclerosis and  • the company provides diroximel fumarate according to the commercial arrangement.		х	14/07/2022	36	Not on trust formulary. Contacted Neurology team (08/06/22). N/A eligible patients are referred to the SRFT. (09/06/22). MMC deemed N/A (14/07/22).
Anifrolumab for treating active autoantibody- positive systemic lupus erythematosus (TERMINATED APPRAISAL) (TA793)	08/06/2022	Anifrolumab – NOT RECOMMENDED for treating active autoantibody-positive systemic lupus erythematosus. This is because AstraZeneca has confirmed that it does not intend to make an evidence submission for the appraisal. AstraZeneca considers that there is unlikely to be enough evidence that the technology is a cost-effective use of NHS resources for this population.		x	09/06/2022	1	Not on trust formulary. Shared with Rheumatology team (08/06/22). N/A not recommended by NICE. MMC deemed N/A (09/06/22).
Filgotinib for treating moderately to severely active ulcerative colitis (TA792)	01/06/2022	Filgotinib – recommended as an option for treating moderately to severely active ulcerative colitis in adults:  • when conventional or biological treatment cannot be tolerated, or  • if the disease has not responded well enough or has stopped responding to these treatments, and  • if the company provides filgotinib according to the commercial arrangement.	х		14/07/2022	43	Not on trust formulary for this indication. Contacted Gastro team (08/06/22). Fast track submitted (01/07/22). MMC approved (14/07/22).
Romosozumab for treating severe osteoporosis (TA791)	25/05/2022	Romosozumab — recommended as an option for treating severe osteoporosis in people after menopause who are at high risk of fracture, only if:  • they have had a major osteoporotic fracture (spine, hip, forearm or humerus fracture) within 24 months (so are at imminent risk of another fracture) and  • the company provides romosozumab according to the commercial arrangement.	х		08/12/2022	197	Not on Trust formulary. Contacted Metabolic bone disorder and Endocrinology teams (30/05/22). Fast track submitted (16/11/22). MMC approved (08/12/22).
TYRX Absorbable Antibacterial Envelope for preventing infection from cardiac implantable electronic devices (TERMINATED APPRAISAL) (TA790)	25/05/2022	TYRX Absorbable Antibacterial Envelope — NOT RECOMMENDED for preventing infection from cardiac implantable electronic devices because Medtronic withdrew its evidence submission for the appraisal. Decision to be reviewed if the company decides to make a submission.		х	09/06/2022	15	Not on Trust formulary. Shared with Cardiology team (30/05/22). N/A not recommended by NICE. MMC deemed N/A (09/06/22).
<b>Tepotinib</b> for treating advanced non-small-cell lung cancer with MET gene alterations ( <b>TA789</b> )	18/05/2022	Tepotinib – recommended as an option for treating advanced non-small-cell lung cancer (NSCLC) with METex14 skipping alterations in adults, only if the company provides tepotinib according to the commercial arrangement.	х		09/06/2022	22	On Trust formulary for this indication (EAMS) (13/01/22). Contacted Pulmonary Oncology team (18/05/22). Updated fast track submitted (18/05/22). MMC approved (09/06/22).
Avelumab for maintenance treatment of locally advanced or metastatic urothelial cancer after platinum-based chemotherapy (TA788)	11/05/2022	Avelumab — recommended as an option for maintenance treatment of locally advanced or metastatic urothelial cancer that has not progressed after platinum-based chemotherapy in adults, only if:  • avelumab is stopped at 5 years of uninterrupted treatment or earlier if the disease progresses and  • the company provides avelumab according to the commercial arrangement.		х	09/06/2022	29	Not on Trust formulary. Contacted Urology team (11/05/22). N/A eligible patients are referred to the Christie Hospital. MMC deemed N/A (09/06/22).
Venetoclax with low dose cytarabine for untreated acute myeloid leukaemia when intensive chemotherapy is unsuitable (TA787)	27/04/2022	Venetoclax with low dose cytarabine — recommended as an option for untreated acute myeloid leukaemia in adults when intensive chemotherapy is unsuitable, only if:  • they have over 30% bone marrow blasts  • the company provides venetoclax according to the commercial arrangement.	х		12/05/2022	15	On Trust formulary for this indication in line with NHSE commissioning (May-20). Shared with Haematology Teams (27/04/22). Updated fast track submitted. MMC approved (12/05/22).
<b>Tucatinib</b> with trastuzumab and capecitabine for treating HER2-positive advanced breast cancer after 2 or more anti-HER2 therapies (TA786)	27/04/2022	Tucatinib with trastuzumab and capecitabine – recommended as an option for treating HER2 positive locally advanced or metastatic breast cancer in adults after 2 or more anti HER2 treatment therapies, only if the company provides tucatinib according to the commercial arrangement.		х	12/05/2022	15	Not on Trust formulary. Contacted Breast team (27/04/22). N/A MFT, patients referred to the Christie. MMC deemed N/A (12/05/22).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			rmulary to NICE		
		·	Yes (mark 'x' if applicable)	N/A (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Nivolumab with cabozantinib for untreated advanced renal cell carcinoma (TERMINATED APPRAISAL) (TA785)		Nivolumab with cabozantinib — NOT RECOMMENDED for untreated advanced or metastatic renal cell carcinoma. This is because Bristol Myers Squibb withdrew the evidence submission. We will review this decision if the company decides to make a submission.		×	12/05/2022	22	Not on Trust formulary for this indication. Shared with Renal Teams (20/04/22). Not recommended by NICE. MMC deemed N/A (12/05/22).
<b>Niraparib</b> for maintenance treatment of relapsed, platinum-sensitive ovarian, fallopian tube and peritoneal cancer ( <b>TA784</b> )		Niraparib — recommended as an option for treating relapsed, platinum-sensitive high-grade serous epithelial ovarian, fallopian tube or primary peritoneal cancer that has responded to the most recent course of platinum-based chemotherapy in adults. It is recommended only if:  • they have a BRCA mutation and have had 2 courses of platinum-based chemotherapy, or  • they do not have a BRCA mutation and have had 2 or more courses of platinum-based chemotherapy, and  • the company provides it according to the commercial arrangement.		х	12/05/2022	22	Not on Trust formulary for this indication. Shared with ObGyn & Haematology Teams (20/04/22). N/A response adults, patients are referred to the Christie Hospital for treatment. MMC reviewed and deemed N/A (12/05/22).
Daratumumab monotherapy for treating relapsed and refractory multiple myeloma (updates and replaces TA510) (TA783)		Daratumumab monotherapy — recommended as an option for treating relapsed and refractory multiple myeloma in adults who have had a proteasome inhibitor and an immunomodulator, and whose disease progressed on the last treatment, only if:  • they have daratumumab after 3 treatments and  • the company provides according to the commercial arrangement.	х		12/05/2022	29	On Trust formulary in line with CDF & TA510 (Feb- 18). Shared with Haematology Teams (13/04/22). Updated fast-track submitted. MMC approved (12/05/22).
			41	54			
			% "Yes"	% "N/A"	-	Average implement time(days)	
Adherence statistics for 2022-23			43%	57%		31	



Technology appraisal (TA)	Date of TA	Availability of medicine for NHS patients with this medical condition, as			Δdhere	nce of local fo	ormulary to NICE		
Titles are hyperlinks to full guidance	Release	indicated by NICE	, , , , , , , , , , , , , , , , , , , ,						
		, , ,	Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)		
2021-22									
Tagraxofusp for treating blastic plasmacytoid dendritic cell neoplasm (TERMINATED APPRAISAL) (TA782)	30/03/2022	Tagraxofusp — NOT RECOMMENDED for treating blastic plasmacytoid dendritic cell neoplasm. This is because Stemline Therapeutics has confirmed that it does not intend to make an evidence submission for the appraisal. The company considers that there is not enough evidence to provide a submission for this appraisal.		х	13/04/2022	14	Not on Trust formulary for this indication. Not recommended by NICE. Shared with Haematology Teams (30/03/22). MMC deemed N/A (13/04/22).		
Sotorasib for previously treated KRAS G12C mutation-positive advanced non-small-cell lung cancer (TA781)	30/03/2022	Sotorasib — recommended for use within the CDF as an option for treating KRAS G12C mutation-positive locally advanced or metastatic non-small-cell lung cancer in adults whose disease has progressed on, or who cannot tolerate, platinum-based chemotherapy or anti-PD-1/PD-11 immunotherapy. It is recommended only if the conditions in the managed access agreement for sotorasib are followed.	х		13/04/2022	14	Not on Trust formulary. Fast track submitted by Pulmonary Oncology team (09/03/22).MMC approved and added to the formulary (13/04/22).		
<b>Nivolumab</b> with <b>ipilimumab</b> for untreated advanced renal cell carcinoma (updates & replaces TA581) ( <b>TA780</b> )	24/03/2022	Nivolumab with ipilimumab — recommended as an option for untreated advanced renal cell carcinoma in adults:  • whose disease is intermediate or poor risk as defined in the International Metastatic Renal Cell Carcinoma Database Consortium criteria and  • only if the company provides nivolumab with ipilimumab according to the commercial arrangement.		х	13/04/2022	20	Not on Trust formulary for this indication. Contacted Renal Teams (24/03/22). N/A patients referred to the Christie Hospital for treatment. MMC deemed N/A (13/04/22).		
<b>Dostarlimab</b> for previously treated advanced or recurrent endometrial cancer with high microsatellite instability or mismatch repair deficiency ( <b>TA779</b> )	16/03/2022	Dostarlimab — recommended for use within the CDF as an option for treating advanced or recurrent endometrial cancer with high microsatellite instability or mismatch repair deficiency in adults who have had platinum-based chemotherapy. It is recommended only if the conditions in the managed access agreement are followed.		х	13/04/2022	28	Not on Trust formulary. Shared with ObGyn & Haematology Teams (09/03/22). N/A response adults, patients are referred to the Christie Hospital for treatment. MMC deemed N/A (13/04/22).		
Pegcetacoplan for treating paroxysmal nocturnal haemoglobinuria (TA778)	09/03/2022	Pegcetacoplan — recommended as an option for treating paroxysmal nocturnal haemoglobinuria (PNH) in adults who have anaemia after at least 3 months of treatment with a C5 inhibitor. It is recommended only if the company provides pegcetacoplan according to the commercial arrangement.		х	13/04/2022	35	Not on Trust formulary. Shared with Haematology Teams (09/03/22). N/A response adults, patients are referred to PNH treatment centres in Leeds and London. MMC deemed N/A (13/04/22).		
Solriamfetol for treating excessive daytime sleepiness caused by obstructive sleep apnoea (TA777)	09/03/2022	Solriamfetol – NOT RECOMMENDED to improve wakefulness and reduce excessive daytime sleepiness in adults with obstructive sleep apnoea whose sleepiness has not been satisfactorily treated by primary obstructive sleep apnoea therapy, such as continuous positive airway pressure (CPAP).		х	13/04/2022	35	Not on Trust formulary for this indication. Shared with Sleep Team (09/03/22). Not recommended by NICE. MMC deemed N/A (13/04/22).		
Pitolisant hydrochloride for treating excessive daytime sleepiness caused by obstructive sleep apnoea (TA776)	09/03/2022	Pitolisant hydrochloride — NOT RECOMMENDED to improve wakefulness and reduce excessive daytime sleepiness in adults with obstructive sleep apnoea whose sleepiness has not been satisfactorily treated by primary obstructive sleep apnoea therapy such as continuous positive airway pressure (CPAP), or who cannot tolerate it.	_	х	13/04/2022	35	Not on Trust formulary. Shared with Sleep Team (09/03/22). Not recommended by NICE. MMC deemed N/A (13/04/22).		
Dapagliflozin for treating chronic kidney disease (TA775)	09/03/2022	Dapagliflozin — recommended as an option for treating CKD in adults only if:  • it is an add-on to optimised standard care including the highest tolerated licensed dose of ACE inhibitors or ARBs, unless these are contraindicated, and  • people have an eGFR of 25.0 to 75.0 mL/min/1.73m² at the start of treatment and:  • have type 2 diabetes or  • have a urine albumin-to-creatinine ratio (uACR) of 22.6 mg/mmol or more.	х		13/04/2022	35	Not on Trust formulary for this indication. Contacted Renal Teams (09/03/22). Fast track application submitted. MMC approved and added to the formulary for this indication (13/04/22).		

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE		ormulary to NICE			
			<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Lenalidomide for relapsed or refractory mantle cell lymphoma (TERMINATED APPRAISAL) (TA774)	09/03/2022	Lenalidomide — NOT RECOMMENDED for treating relapsed or refractory mantle cell lymphoma. This is because Celgene has confirmed that it does not intend to make an evidence submission for the appraisal. Celgene considers that the technology is unlikely to be used at this point in the treatment pathway.		х	13/04/2022	35	Not on Trust formulary for this indication. Not recommended by NICE. Shared with Haematology team (09/03/22). MMC deemed N/A (13/04/22).
Empagliflozin for treating chronic heart failure with reduced ejection fraction (TA773)	09/03/2022	Empagliflozin – recommended as an option for treating symptomatic chronic heart failure with reduced ejection fraction in adults, only if it is used as an add-on to optimised standard care with:  • an angiotensin-converting enzyme (ACE) inhibitor or angiotensin 2 receptor blocker (ARB), with a beta blocker and, if tolerated, a mineralocorticoid receptor antagonist (MRA), or  • sacubitril valsartan with a beta blocker and, if tolerated, an MRA.	х		13/04/2022	35	Not on Trust formulary for this indication. Contacted Cardiology Teams (09/03/22). MMC approved and added to the formulary for this indication (13/04/22)
Pembrolizumab for treating relapsed or refractory classical Hodgkin lymphoma after stem cell transplant or at least 2 previous therapies (TA772)	23/02/2022	Pembrolizumab – recommended as an option for treating relapsed or refractory classical Hodgkin lymphoma in people aged 3 and older. It is recommended if they have had an autologous stem cell transplant that has not worked or they have had at least 2 previous therapies and an autologous stem cell transplant is not an option, and only if:  • they have not had brentuximab vedotin and • the company provides pembrolizumab according to the commercial arrangement.	х		11/11/2021	-104	On formulary in line with NHSE SSC2291 (11/11/21). MMC noted (10/03/22).
Daratumumab with bortezomib, melphalan and prednisone for untreated multiple myeloma (TERMINATED APPRAISAL) (TA771)	09/02/2022	Daratumumab with bortezomib, melphalan & prednisone — NOT RECOMMENDED for untreated multiple myeloma when stem cell transplant is unsuitable. This is because Janssen has confirmed that it does not intend to make an evidence submission for the appraisal. Janssen considers that the technology is unlikely to be a cost-effective use of NHS resources.		х	10/03/2022	29	Not on Trust formulary for this indication. Not recommended by NICE. Shared with Haematology team (09/02/22). MMC deemed N/A (10/03/22).
Pembrolizumab with carboplatin and paclitaxel for untreated metastatic squamous non-small-cell lung cancer (TA770)	09/02/2022	Pembrolizumab with carboplatin & paclitaxel – recommended as an option for untreated metastatic squamous non-small-cell lung cancer (NSCLC) in adults, only if  • their tumours express PD L1 with a tumour proportion score of 0% to 49%  • their tumours express PD L1 with a tumour proportion score of 50% or more and they need urgent clinical intervention  • it is stopped at 2 years of uninterrupted treatment or earlier if their disease progresses and  • the company provides pembrolizumab according to the commercial arrangement.	х		10/02/2022	1	On formulary in line with NICE TA600 (this is CDF review). Updated fast track submitted in line with NICE TA770 and NHSE SSC2324. MMC approved and added to formulary for this indication (10/02/22).
Palforzia for treating peanut allergy in children and young people (TA769)	02/02/2022	Palforzia – recommended as an option for treating peanut allergy in children aged 4 to 17. It can be continued in people who turn 18 while on treatment. Palforzia should be used with a peanut-avoidant diet.	х		10/03/2022	36	Not on Trust formulary. Contacted Immunology teams (02/02/22). Fast track being prepared. MMC to review (10/03/22).
Upadacitinib for treating active psoriatic arthritis after inadequate response to DMARDs (TA768)	02/02/2022	Upadacitinib, alone or with methotrexate — recommended as an option for treating active psoriatic arthritis in adults whose disease has not responded well enough to DMARDs or who cannot tolerate them. It is recommended only if they have peripheral arthritis with 3 or more tender joints and 3 or more swollen joints and:  • they have had 2 conventional DMARDs and at least 1 biological DMARD or  • TNF-alpha inhibitors are contraindicated but would otherwise be considered (as described in NICE TAS on etanercept, infliximab & adalimumab for the treatment of psoriatic arthritis).  • Upadacitinib is recommended only if the company provides it according to the commercial arrangement.	х		10/03/2022	36	Not on Trust formulary for this indication. Contacted Rheumatology team (02/02/22). Fast track submitted. MMC approved and added to formulary for this indication (10/03/22).
Ponesimod for treating relapsing–remitting multiple sclerosis (TA767)	02/02/2022	Ponesimod – recommended for treating relapsing–remitting multiple sclerosis with active disease defined by clinical or imaging features in adults, only if the company provides ponesimod according to the commercial arrangement.		х	10/02/2022	8	Not on Trust formulary. Contacted Adult and Paediatric Neurology teams (02/02/22). Adult N/A patients treated at SRFT. MMC deemed N/A (10/03/22).
Pembrolizumab for adjuvant treatment of completely resected stage 3 melanoma (TA766)	02/02/2022	Pembrolizumab – recommended as an option for the adjuvant treatment of completely resected stage 3 melanoma with lymph node involvement in adults. It is recommended only if the company provides pembrolizumab according to the commercial arrangement.		х	10/02/2022	8	Not on Trust formulary for this indication. Contacted Neurology team (02/02/22). N/A, prescribing will be from SRFT. MMC deemed N/A (10/02/22).
Venetoclax with azacitidine for untreated acute myeloid leukaemia when intensive chemotherapy is unsuitable (TA765)	02/02/2022	Venetoclax with azacitidine — recommended as an option for untreated acute myeloid leukaemia (AML) in adults when intensive chemotherapy is unsuitable. It is recommended only if the company provides venetoclax according to the commercial arrangement.	х		10/02/2022	8	On formulary for this indication NHSE covid-19 AML treatment (14/05/20). New fast track submitted. MMC approved (10/02/22).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	a, as Adherence of local formulary to NICE				
		, , ,	<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Fremanezumab for preventing migraine (TA764)	02/02/2022	Fremanezumab is recommended as an option for preventing migraine in adults, only if:  they have 4 or more migraine days a month  at least 3 preventive drug treatments have failed and  the company provides it according to the commercial arrangement.		х	10/02/2022	8	Not on Trust formulary. Contacted Neurology team (02/02/22). N/A, prescribing will be from SRFT. MMC deemed N/A (10/02/22).
Daratumumab in combination for untreated multiple myeloma when a stem cell transplant is suitable (TA763)	02/02/2022	Daratumumab plus bortezomib, thalidomide & dexamethasone — recommended as induction and consolidation treatment for untreated multiple myeloma in adults, when an autologous stem cell transplant is suitable. It is recommended only if the company provides daratumumab according to the commercial arrangement.	х		10/02/2022	8	Not on Trust formulary for this indication. Shared with Haematology team (09/02/22). Fast track for use in line with NICE TA763 and NHSE SSC2323 submitted. MMC approved and added to the formulary (10/02/22).
Olaparib for treating BRCA mutation-positive HER2-negative metastatic breast cancer after chemotherapy (TERMINATED APPRAISAL) (TA762)	02/02/2022	Olaparib – NOT RECOMMENDED for treating BRCA mutation-positive HER2-negative metastatic breast cancer after chemotherapy. This is because AstraZeneca has confirmed that it does not intend to make a submission for the appraisal. AstraZeneca considers that there is unlikely to be enough evidence that the technology is a cost-effective use of NHS resources for this population.		х	10/02/2022	8	Not on Trust formulary for this indication. Not recommended by NICE. MMC deemed N/A (10/02/22).
Osimertinib for adjuvant treatment of EGFR mutation-positive non-small-cell lung cancer after complete tumour resection (TA761)	19/01/2022	Osimertinib – recommended for use within the CDF as adjuvant treatment after complete tumour resection in adults with stage 1b to 3a non small cell lung cancer (NSCLC) whose tumours have epidermal growth factor receptor (EGFR) exon 19 deletions or exon 21 (L858R) substitution mutations. It is recommended only if:  osimertinib is stopped at 3yrs, or earlier if there is disease recurrence or unacceptable toxicity and the company provides osimertinib according to the managed access agreement.	x		10/02/2022	22	Not on Trust formulary for this indication. Fast track for use in line with NICE TA763 and NHSE SSC2323 submitted by Pulmonary Oncology team (10/01/22). MMC approved and added to the formulary (10/02/22).
Selpercatinib for previously treated RET fusion- positive advanced non-small-cell lung cancer (TA760)	12/01/2022	Selpercatinib – recommended for use within the CDF as an option for treating RET fusion-positive advanced non-small-cell lung cancer (NSCLC) in adults who need systemic therapy after immunotherapy, platinum-based chemotherapy or both. It is recommended only if the conditions in the managed access agreement are followed.	х		10/02/2022	29	Not on Trust formulary. Contacted Pulmonary Oncology team (12/01/22). Fast track submitted. MMC approved and added to formulary (10/02/22).
Fostamatinib for treating refractory chronic immune thrombocytopenia (TA759)	07/01/2022	Fostamatinib – NOT RECOMMENDED within its marketing authorisation, for treating refractory chronic immune thrombocytopenia in adults.	х		10/02/2022	34	Not on Trust formulary. Contacted Haematology team (12/01/22). N/A response. MMC deemed N/A (10/02/22).
Solriamfetol for treating excessive daytime sleepiness caused by narcolepsy (TA758)	05/01/2022	Solriamfetol – recommended as an option for treating excessive daytime sleepiness in adults with narcolepsy with or without cataplexy. This is only if modafinil and either dexamfetamine or methylphenidate have not worked well enough or are not suitable.	х		10/03/2022	64	Not on Trust formulary. Contacted Sleep team (12/01/22). Fast track submitted. MMC approved and added to the formulary (10/03/22).
Cabotegravir with rilpivirine for treating HIV-1 in adults (TA757)	05/01/2022	Cabotegravir with rilpivirine — recommended as an option for treating HIV 1 infection in adults:  • with virological suppression (HIV 1 RNA fewer than 50 copies/ml) on a stable antiretroviral regimen and  • without any evidence of viral resistance to, and no previous virological failure with, any non-nucleoside reverse transcriptase inhibitors or integrase inhibitors.  • It is recommended only if the company provides it according to the commercial arrangement.	х		10/03/2022	64	Not on Trust formulary. Contacted HIV team (05/01/22). Fast track submitted. MMC approved and added to the formulary (10/03/22).
Fedratinib for treating disease-related splenomegaly or symptoms in myelofibrosis (TA756)	16/12/2021	Fedratinib — recommended for use within the CDF as an option for treating disease-related splenomegaly or symptoms of primary myelofibrosis, post-polycythaemia vera myelofibrosis or post-essential thrombocythaemia myelofibrosis in adults. It is recommended only if:  • they have previously had ruxolitinib and  • the conditions in the managed access agreement for fedratinib are followed.	х		13/01/2022	28	Not on Trust formulary. Contacted Haematology team (16/12/21). Fast track submitted. MMC approved and added to formulary (13/01/22).
Risdiplam for treating spinal muscular atrophy (TA755)	16/12/2021	Risdiplam – recommended as an option for treating 5q spinal muscular atrophy (SMA) in people 2 months and older with a clinical diagnosis of SMA types 1, 2 or 3 or with pre-symptomatic SMA and 1 to 4 SMN2 copies. It is recommended only if the conditions of the managed access agreement are followed.	Х		08/12/2021	-8	On Trust formulary (PMMC approved 08/12/21). Shared with Paediatric Neurology team (16/12/21). MMC approved and added to Formulary.

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			ormulary to NICE		
		, and the second	<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Mogamulizumab for previously treated mycosis fungoides and Sézary syndrome (TA754)	15/12/2021	Mogamulizumab — recommended as an option for treating:  Sézary syndrome in adults who have had at least 1 systemic treatment. It is recommended only if the company provides mogamulizumab according to the commercial arrangement.  mycosis fungoides in adults, only if:  their condition is stage 2B or above and  they have had at least 2 systemic treatments and  the company provides mogamulizumab according to the commercial arrangement.		х	13/01/2022	29	Not on Trust formulary. Contacted Haematology team (15/12/21). N/A Christie. MMC deemed N/A (13/01/22).
Cenobamate for treating focal onset seizures in epilepsy (TA753)	15/12/2021	Cenobamate – recommended as an option for treating focal onset seizures with or without secondary generalised seizures in adults with drug-resistant epilepsy that has not been adequately controlled with at least 2 antiseizure medicines. It is recommended only if:  • it is used as an add-on treatment, after at least 1 other add-on treatment has not controlled seizures, and  • treatment is started in a tertiary epilepsy service.	х		13/01/2022	29	Not on Trust formulary. Contacted Adult and Paediatric Neurology teams (15/12/21). MMC approved and added to the formulary (13/01/22).
<b>Belimumab</b> for treating active autoantibody- positive systemic lupus erythematosus (updates and replaces TA397) ( <b>TA752</b> )	15/12/2021	Belimumab – recommended as an option as add-on treatment for active autoantibody-positive systemic lupus erythematosus in people with high disease activity despite standard treatment, only if:  • high disease activity is defined as at least 1 serological biomarker (positive anti-double-stranded DNA or low complement) and a SELENA SLEDAI score of greater than or equal to 10  • treatment is continued beyond 24 weeks only if the SELENA SLEDAI score has improved by 4 points or more.  • the company provides belimumab according to the commercial arrangement.	х		13/01/2022	29	On Trust formulary (TA397) for this indication (Jul- 16). Contacted Rheumatology (15/12/21), updated fast track submitted. MMC approved (13/01/22)
<b>Dupilumab</b> for treating severe asthma with type 2 inflammation ( <b>TA751</b> )	08/12/2021	Dupilumab (as add-on maintenance therapy) – recommended as an option for treating severe asthma with type 2 inflammation that is inadequately controlled in people 12 years and over, despite maintenance therapy with high-dose inhaled corticosteroids and another maintenance treatment, only if:  • the dosage used is 400 mg initially and then 200 mg subcutaneously every other week  • the person has agreed to and follows an optimised standard treatment plan  • the person has a blood eosinophil count of 150 cells per microlitre or more and fractional exhaled nitric oxide of 25 parts per billion or more, and has had at least 4 or more exacerbations in the previous 12 months  • the person is not eligible for mepolizumab, reslizumab or benralizumab, or has asthma that has not responded adequately to these biological therapies  • the company provides dupilumab according to the commercial arrangement.	x		10/02/2022	64	On Trust formulary (FOC scheme) for this indication. Contacted respiratory team (08/12/21). Updated fast track submitted. MMC approved (10/02/22).
Olaparib for maintenance treatment of BRCA mutation-positive metastatic pancreatic cancer after platinum-based chemotherapy (TERMINATED APPRAISAL) (TA750)	08/12/2021	Olaparib – NOT RECOMMENDED for for maintenance treatment of BRCA mutation-positive metastatic pancreatic cancer in adults after platinum-based chemotherapy. This is because AstraZeneca has confirmed that it does not intend to make a submission for the appraisal. AstraZeneca considers that there is unlikely to be enough evidence that the technology is a cost-effective use of NHS resources for this population.		х	13/01/2022	36	Not on Trust formulary for this indication. Not recommended by NICE. Shared with HPB team for information (08/12/21). MMC deemed N/A (13/01/22).
Liraglutide for managing obesity in people aged 12 to 17 years (TERMINATED APPRAISAL) (TA749)	01/12/2021	<b>Liraglutide</b> — <b>NOT RECOMMENDED</b> for managing obesity in people aged 12 to 17 years. This is because Novo Nordisk does not intend to provide an evidence submission for the appraisal. Novo Nordisk considers that there is not enough evidence to provide an evidence submission for this appraisal.		х	09/12/2021	8	Not on Trust formulary for this indication. Not recommended by NICE. Shared with adult & paediatric diabetes teams (01/12/21). MMC deemed N/A (09/12/21).
Mexiletine for treating the symptoms of myotonia in non-dystrophic myotonic disorders (TA748)	01/12/2021	Mexiletine (Namuscla)— recommended as an option for treating the symptoms of myotonia in adults with non-dystrophic myotonic disorders. It is recommended only if the company provides mexiletine (Namuscla) according to the commercial arrangement.	x		13/01/2022	43	Not on Trust formulary for this indication. Shared with adult & paediatric neurology teams (01/12/21). MMC approved and added to formulary for this indication (13/01/22).
Nintedanib for treating progressive fibrosing interstitial lung diseases (TA747)	17/11/2021	Nintedanib – recommended as an option for treating chronic progressive fibrosing interstitial lung diseases (PF ILD) in adults.  -	х		10/02/2022	85	Not on Trust formulary for this indication. Contacted Respiratory ILD team (17/11/21). Fast track submitted. MMC reviewed and added to formulary (10/02/22).
<b>Nivolumab</b> for adjuvant treatment of resected oesophageal or gastro-oesophageal junction cancer (TA746)	17/11/2021	Nivolumab – recommended for adjuvant treatment of completely resected oesophageal or gastro oesophageal junction cancer in adults who have residual disease after previous neoadjuvant chemoradiotherapy. It is recommended only if the company provides nivolumab according to the commercial arrangement.		х	09/12/2021	22	Not on Trust formulary for this indication. Contacted Upper GI team (17/11/21). Patients referred to the Christie. MMC deemed N/A (09/12/21).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	rmulary to NICE
	nereuse	maidated by mez	Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
NBTXR-3 for treating advanced soft tissue sarcoma (TERMINATED APPRAISAL) (TA745)	10/11/2021	NBTXR 3 – NOT RECOMMENDED for treating advanced soft tissue sarcoma. This is because Nanobiotix does not intend to make an evidence submission for the appraisal. Nanobiotix considers that there is not enough evidence to provide an evidence submission for this appraisal.		х	09/12/2021	29	Not on Trust formulary. Shared with Haematology and Surgery teams (10/11/21). Not recommended by NICE. MMC deemed N/A (09/12/21).
<b>Upadacitinib</b> for treating moderate rheumatoid arthritis ( <b>TA744</b> )	10/11/2021	Upadacitinib, with methotrexate – recommended as an option for treating active rheumatoid arthritis in adults whose disease has responded inadequately to intensive therapy with 2 or more conventional DMARDs, only if:  • disease is moderate (a disease activity score [DAS28] of 3.2 to 5.1) and  • the company provides upadacitinib according to the commercial arrangement.	х		09/12/2021	29	Not on Trust formulary for this indication. Shared with Rheumatology team (10/11/21). Fast track submitted. MMC approved and added to formulary (09/12/21).
Crizanlizumab for preventing sickle cell crises in sickle cell disease (TA743)	03/11/2021	Crizanlizumab – recommended as an option for preventing recurrent sickle cell crises (vaso-occlusive crises) in people aged 16 or over with sickle cell disease only if the conditions in the managed access agreement are followed.	х		10/02/2022	99	Not on Trust formulary. Contacted Haematology team (03/11/21). Fast track submitted. MMC approved and added to formulary (10/02/22).
Selpercatinib for treating advanced thyroid cancer with RET alterations (TA742)	03/11/2021	Selpercatinib – recommended for use within the CDF, as an option for treating:  advanced RET fusion-positive thyroid cancer in adults who need systemic therapy after sorafenib or lenvatinib  advanced RET-mutant medullary thyroid cancer in people 12 years and older who need systemic therapy after cabozantinib or vandetanib.  It is recommended only if the conditions in the managed access agreement are followed.		х	11/11/2021	8	Not on Trust formulary. Contacted Head & Neck team (03/11/21). MMC deemed N/A (11/11/21).
Apalutamide with androgen deprivation therapy for treating hormone-sensitive metastatic prostate cancer (TA741)	28/10/2021	Apalutamide plus androgen deprivation therapy (ADT) – recommended as an option for treating hormone-sensitive metastatic prostate cancer in adults, only if docetaxel is not suitable; the company provides apalutamide according to the commercial arrangement.		х	11/11/2021	14	Not on Trust formulary for this indication. Shared with Urology team (28/10/21). MFT not commissioned for prostate cancer. MMC deemed N/A (11/11/21).
Apalutamide with androgen deprivation therapy for treating high-risk hormone-relapsed non-metastatic prostate cancer (TA740)	28/10/2021	Apalutamide plus androgen deprivation therapy (ADT) – recommended as an option for treating hormone relapsed non metastatic prostate cancer that is at high risk of metastasising in adults. High risk is defined as a blood prostate-specific antigen (PSA) level that has doubled in 10 months or less on continuous ADT. Recommended only if the company provides apalutamide according to the commercial arrangement.		х	11/11/2021	14	Not on Trust formulary for this indication. Shared with Urology team (28/10/21). MFT not commissioned for prostate cancer. MMC deemed N/A (11/11/21).
<b>Atezolizumab</b> for untreated PD-L1-positive advanced urothelial cancer when cisplatin is unsuitable ( <b>TA739</b> )	27/10/2021	Atezolizumab – recommended as an option for untreated locally advanced or metastatic urothelial cancer in adults whose tumours express PD L1 at a level of 5% or more and when cisplatin-containing chemotherapy is unsuitable; the company provides atezolizumab according to the commercial arrangement.		x	11/11/2021	15	Not on Trust formulary for this indication. Contacted Urology team (27/10/21). MMC deemed N/A (11/11/21).
Berotralstat for preventing recurrent attacks of hereditary angioedema (TA738)	20/10/2021	Berotralstat – recommended as an option for preventing recurrent attacks of hereditary angioedema in people 12 years and older, only if:  • they have at least 2 attacks per month, and • it is stopped if the number of attacks per month does not reduce by at least 50% after 3 months.  It is only recommended if the company provides berotralstat according to the commercial arrangement.	x		11/11/2021	22	On Trust formulary for this indication (EAMS). Contacted Adult and Paediatric Immunology teams (20/10/21). Updated fast track submitted. MMC approved and added to the formulary (11/11/21).
Pembrolizumab with platinum- and fluoropyrimidine-based chemotherapy for untreated advanced oesophageal and gastro-oesophageal junction cancer (TA737)	20/10/2021	Pembrolizumab with platinum & fluoropyrimidine-based chemotherapy— recommended as an option for untreated locally advanced unresectable or metastatic carcinoma of the oesophagus or HER2 negative gastro-oesophageal junction adenocarcinoma in adults whose tumours express PD L1 with a combined positive score (CPS) of 10 or more. Pembrolizumab is only recommended if the company provides it according to the commercial arrangement.		х	11/11/2021	22	Not on Trust formulary for this indication. Contacted Upper GI team (20/10/21). Patients referred to the Christie. MMC deemed N/A (11/11/21).
<b>Nivolumab</b> for treating recurrent or metastatic squamous cell carcinoma of the head and neck after platinum-based chemotherapy (replacing TA490) ( <b>TA736</b> )		Nivolumab – recommended as an option for treating recurrent or metastatic squamous cell carcinoma of the head and neck in adults whose disease has progressed on platinum based chemotherapy, only if:  • the disease has progressed within 6 months of having chemotherapy and  • the company provides it according to the commercial arrangement.		х	11/11/2021	22	Not on Trust formulary for this indication. Contacted Head & Neck team (20/10/21). MMC deemed N/A (11/11/21).
Tofacitinib for treating juvenile idiopathic arthritis (TA735)	20/10/2021	Tofacitinib – recommended as an option for treating active polyarticular juvenile idiopathic arthritis (JIA; rheumatoid factor positive or negative polyarthritis and extended oligoarthritis), and juvenile psoriatic arthritis in people 2 years and older. This is if their condition has responded inadequately to previous treatment with disease-modifying antirheumatic drugs (DMARDs), and only if: a TNF alpha inhibitor is not suitable or does not control the condition well enough, and; the company provides tofacitinib according to the commercial arrangement.	х		01/12/2021	42	Not on Trust formulary for this indication. Contacted paediatric rheumatology team (20/10/21). Fast track submitted. PMMC approved and added to the formulary.

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE		ormulary to NICE			
		, and the second	Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Secukinumab for treating moderate to severe plaque psoriasis in children and young people (TA734)	01, 20, 2022	Secukinumab – recommended as an option for treating plaque psoriasis in children and young people aged 6 to 17 years, only if the disease is severe, as defined by a total PASI of 10 or more and the disease has not responded to other systemic treatments, including ciclosporin, methotrexate and phototherapy, or these options are contraindicated or not tolerated and the company provides the drug according to the commercial arrangement.	x		03/11/2021	27	Not on Trust formulary for this indication. Contacted paediatric dermatology teams (07/10/21). Fast track submitted. PMMC approved and added to formulary (03/11/21).
Inclisiran for treating primary hypercholesterolaemia or mixed dyslipidaemia (TA733)		Inclisiran— recommended as an option for treating primary hypercholesterolaemia (heterozygous familial & non-familial) or mixed dyslipidaemia as an adjunct to diet in adults. It is recommended only if there is a history of any of the following cardiovascular events: ACS (such as myocardial infarction or unstable angina needing hospitalisation; coronary or other arterial revascularisation procedures; CHD; ischaemic stroke or PAD, and LDL-C concentrations are persistently 2.6 mmol/l or more, despite maximum tolerated lipid-lowering therapy, that is: maximum tolerated statins with or without other lipid-lowering therapies or, other lipid-lowering therapies when statins are not tolerated or are contraindicated, and the company provides inclisiran according to the commercial arrangement.  Inclisiran— recommended only in research for treating primary hypercholesterolaemia (heterozygous familial and non-familial) or mixed dyslipidaemia in adults who have no history of cardiovascular events. This research is in the form of a clinical trial currently in development.	х		10/02/2022	127	Not on Trust formulary. Contacted Adult and paediatric lipid teams (06/10/21). Fast track application prepared. Waiting for Primary Care issues to be resolved. MMC approved and added to the formulary (10/02/22).
Baloxavir marboxil for treating acute uncomplicated influenza (TERMINATED APPRAISAL) (TA732)	06/10/2021	Baloxavir marboxil— NOT RECOMMENDED for treating acute uncomplicated influenza. This is because Roche has confirmed that it does not intend to make an evidence submission for the appraisal at this time. Roche considers that there is not enough evidence to provide an evidence submission for this appraisal		х	11/11/2021	36	Not on Trust formulary. Shared with Vaccine and Virology teams (06/10/21). Not recommended by NICE. MMC deemed N/A (11/11/21).
Vericiguat for treating chronic heart failure with reduced ejection fraction (TERMINATED APPRAISAL) (TA731)	23,03,2022	Vericiguat – NOT RECOMMENDED for treating chronic heart failure with reduced ejection fraction. This is because Bayer did not provide an evidence submission for the appraisal and will not be launching the technology in the UK.		х	14/10/2021	15	Not on Trust formulary. Shared with Cardiology team (29/09/21). Not recommended by NICE. MMC deemed N/A (14/10/21).
Avapritinib for treating unresectable or metastatic gastrointestinal stromal tumours (TERMINATED APPRAISAL) (TA730)	29/09/2021	Avapritinib – NOT RECOMMENDED for treating unresectable or metastatic gastrointestinal stromal tumours. This is because Blueprint Medicines has confirmed that it does not intend to make a submission for the appraisal and will not be launching the technology in the UK.		х	14/10/2021	15	Not on Trust formulary. Shared with Gastro team (29/09/21). Not recommended by NICE. MMC deemed N/A (14/10/21).
Sapropterin for treating hyperphenylalaninaemia in phenylketonuria (TA729)	,,,,,	Sapropterin – recommended as an option for treating hyperphenylalaninaemia that responds to sapropterin (response as defined in the SmPC) in people with phenylketonuria (PKU), only if they are:  • under 18 and a dose of 10 mg/kg is used, only using a higher dose if target blood phenylalanine levels cannot be achieved at 10 mg/kg  • aged 18 to 21 inclusive, continuing the dose they were having before turning 18 or at a maximum dose of 10 mg/kg  • pregnant (from a positive pregnancy test until birth).  Sapropterin is recommended only if the company provides it according to the commercial arrangement.	х		08/12/2021	77	Not on Trust formulary for this indication. Contacted Adult and Paediatric Metabolic teams (22/09/21). Adult patients are treated at SRFT (23/09/21). Paeds submitted fast track. PMMC approved and added to formulary (08/12/21) .
Midostaurin for treating advanced systemic mastocytosis (TA728)	22/09/2021	Midostaurin monotherapy— recommended as an option for treating aggressive systemic mastocytosis, systemic mastocytosis with associated haematological neoplasm, or mast cell leukaemia in adults. It is recommended only if the company provides midostaurin according to the commercial arrangement.	х		14/10/2021	22	Not on Trust formulary for this indication. Contacted Haematology team (22/09/21). Fast track application submitted. MMC approved and added to formulary (14/10/21).
Isatuximab with carfilzomib and dexamethasone for treating relapsed or refractory multiple myeloma (TERMINATED APPRAISAL) (TA727)	22/09/2021	Isatuximab with carfilzomib and dexamethasone— NOT RECOMMENDED for treating relapsed or refractory multiple myeloma. This is because Sanofi has confirmed that it does not intend to make an evidence submission for the appraisal. Sanofi considers that the technology is unlikely to be a cost-effective use of NHS resources.		х	14/10/2021	22	Not on Trust formulary for this indication. Shared with Haematology team (22/09/21). Not recommended by NICE. MMC deemed N/A (14/10/21).
Daratumumab with pomalidomide and dexamethasone for treating relapsed or refractory multiple myeloma (TERMINATED APPRAISAL) (TA726)	22/09/2021	Daratumumab with pomalidomide and dexamethasone— NOT RECOMMENDED for treating relapsed or refractory multiple myeloma. This is because Janssen has confirmed that it does not intend to make an evidence submission for the appraisal. Janssen considers that the technology is unlikely to be a cost-effective use of NHS resources.		х	14/10/2021	22	Not on Trust formulary for this indication. Shared with Haematology team (22/09/21). Not recommended by NICE. MMC deemed N/A (14/10/21).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	ence of local fo	ormulary to NICE
			Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Abemaciclib with fulvestrant for treating hormone receptor-positive, HER2-negative advanced breast cancer after endocrine therapy (updates & replaces TA579) (TA725)	15/09/2021	Abemaciclib plus fulvestrant – recommended as an option for treating hormone receptor positive, human epidermal growth factor receptor 2 (HER2) negative, locally advanced or metastatic breast cancer in adults who have had endocrine therapy only if:  • exemestane plus everolimus is the most appropriate alternative to a cyclin dependent kinase 4 and 6 (CDK 4/6) inhibitor and  • the company provides abemaciclib according to the commercial arrangement.		х	14/10/2021	29	Not on Trust formulary for this indication. Contacted Surgical Breast team (15/09/21). Eligible patients referred to Christie for treatment, MMC deemed N/A (14/10/21).
<b>Nivolumab</b> with ipilimumab and chemotherapy for untreated metastatic non-small-cell lung cancer ( <b>TA724</b> )	08/09/2021	Nivolumab plus ipilimumab and 2 cycles of platinum-doublet chemotherapy— NOT RECOMMENDED for untreated metastatic non-small-cell lung cancer (NSCLC) in adults whose tumours have no epidermal growth factor receptor (EGFR) or anaplastic lymphoma kinase (ALK) mutations.		х	14/10/2021	36	Not on Trust formulary for this indication. Not recommended by NICE. Shared with Pulmonary Oncology team (08/09/21). MMC deemed N/A (14/10/21).
Bimekizumab for treating moderate to severe plaque psoriasis (TA723)	01/09/2021	Bimekizumab – recommended as an option for treating plaque psoriasis in adults, only if:  the disease is severe, as defined by a total Psoriasis Area and Severity Index (PASI) of 10 or more and a Dermatology Life Quality Index (DLQI) of more than 10 and  the disease has not responded to other systemic treatments, including ciclosporin, methotrexate and phototherapy, or these options are contraindicated or not tolerated and  the company provides the drug according to the commercial arrangement.		х	09/09/2021	8	Not on Trust formulary. Contacted Dermatology team (06/09/21). MFT not commissioned for use of biologics in psoriasis, patients referred to SRFT. MMC deemed N/A (09/09/21).
Pemigatinib for treating relapsed or refractory advanced cholangiocarcinoma with FGFR2 fusion or rearrangement (TA722)	25/08/2021	Pemigatinib – recommended as an option for treating locally advanced or metastatic cholangiocarcinoma with a fibroblast growth factor receptor 2 (FGFR2) fusion or rearrangement that has progressed after systemic therapy in adults. It is recommended only if the company provides pemigatinib according to the commercial arrangement.		х	09/09/2021	15	Not on Trust formulary. Contacted HPB team (09/09/21). Patients referred for oncology treatment at Christie Hospital. MMC deemed N/A (09/09/21).
Abiraterone for treating newly diagnosed high- risk hormone-sensitive metastatic prostate cancer (TA721)	18/08/2021	Abiraterone with prednisone or prednisolone plus androgen deprivation therapy (ADT) – NOT  RECOMMENDED for treating newly diagnosed high-risk hormone sensitive metastatic prostate cancer in adults.		х	09/09/2021	22	Not on Trust formulary. Shared with Urology team (09/09/21). Not recommended by NICE. MMC deemed N/A (09/09/21).
Chlormethine gel for treating mycosis fungoides-type cutaneous T-cell lymphoma (TA720)	18/08/2021	Chlormethine gel – recommended as an option for treating early stage (stage 1A, 1B, and 2A) mycosis fungoides-type cutaneous T cell lymphoma (MF CTCL) in adults, only if the company provides chlormethine gel according to the commercial arrangement.		х	09/09/2021	22	Not on Trust formulary. Contacted Haematology team (18/08/21). Patients referred for treatment at Christie Hospital. MMC deemed N/A (09/09/21).
<b>Nivolumab</b> with ipilimumab for previously treated metastatic colorectal cancer with high microsatellite instability or mismatch repair deficiency ( <b>TA716</b> )	28/07/2021	Nivolumab plus ipilimumab – recommended as an option for treating metastatic colorectal cancer with high microsatellite instability (MSI) or mismatch repair (MMR) deficiency after fluoropyrimidine-based combination chemotherapy. It is recommended only if the company provides nivolumab and ipilimumab according to the commercial arrangement.		х	12/08/2021	15	Not on Trust formulary for this indication. Contacted Gastroenterology team (28/07/21). Patients referred for oncology treatment at Christie Hospital. MMC deemed N/A (12/08/21).
Secukinumab for treating non-radiographic axial spondyloarthritis in adults (TA719)	21/07/2021	Secukinumab – recommended as an option for treating active non-radiographic axial spondyloarthritis with objective signs of inflammation (shown by elevated C-reactive protein or MRI) that is not controlled well enough with non-steroidal anti-inflammatory drugs (NSAIDs) in adults. It is recommended only if:  • tumour necrosis factor (TNF)-alpha inhibitors are not suitable or do not control the condition well enough and  • the company provides secukinumab according to the commercial arrangement.	х		12/08/2021	22	Not on Trust formulary for this indication. Contacted Rheumatology team (21/07/21). MMC approved and added to formulary (12/08/21).
Ixekizumab for treating axial spondyloarthritis in adults (TA718)	21/07/2021	Ixekizumab – recommended as an option for treating active ankylosing spondylitis that is not controlled well enough with conventional therapy, or active non-radiographic axial spondyloarthritis with objective signs of inflammation (shown by elevated C-reactive protein or MRI) that is not controlled well enough with non-steroidal anti-inflammatory drugs (NSAIDs), in adults. It is recommended only if:  • tumour necrosis factor (TNF)-alpha inhibitors are not suitable or do not control the condition well enough, and  • the company provides ixekizumab according to the commercial arrangement	х		12/08/2021	22	Not on Trust formulary for this indication. Contacted Rheumatology team (21/07/21). MMC approved and added to formulary (12/08/21).
<b>Duvelisib</b> for treating relapsed follicular lymphoma after 2 or more systemic therapies (TERMINATED APPRAISAL) (TA717)	21/07/2021	Duvelisib – NOT RECOMMENDED for treating relapsed follicular lymphoma after 2 or more systemic therapies. This is because Secura Bio has confirmed that it does not intend to make an evidence submission for the appraisal at this time. Because of limited resources, Secura Bio has chosen to focus on the greater unmet need for duvelisib in treating chronic lymphocytic leukaemia.		х	12/08/2021	22	Not on Trust formulary for this indication. Shared with Haematology team (21/07/21). MMC deemed N/A (12/08/21).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE		ormulary to NICE			
		, and the second	<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Adalimumab, etanercept, infliximab and abatacept for treating moderate rheumatoid arthritis after conventional DMARDs have failed (TA715)	14/07/2021	Adalimumab, etanercept and infliximab, all with methotrexate – recommended as options for treating active rheumatoid arthritis in adults, only if:  • intensive therapy with 2 or more conventional disease-modifying antirheumatic drugs (DMARDs) has not controlled the disease well enough and  • disease is moderate (a disease activity score [DAS28] of 3.2 to 5.1) and  • the companies provide adalimumab, etanercept and infliximab at the same or lower prices than those agreed with the Commercial Medicines Unit.  Adalimumab and etanercept can be used as monotherapy when methotrexate is contraindicated or not tolerated, when the criteria in 1.1 are met.	х		12/08/2021	29	Not on Trust formulary for this indication. Contacted Rheumatology team (14/07/21). MMC approved and added to formulary (12/08/21).
Dasatinib for treating Philadelphia- chromosome-positive acute lymphoblastic leukaemia (TERMINATED APPRAISAL) (TA714)	14/07/2021	Dasatinib— NOT RECOMMENDED for treating Philadelphia chromosome positive acute lymphoblastic leukaemia in children and adults because Bristol Myers Squibb does not intend to make a submission for the appraisal. Bristol Myers Squibb considers that there is not enough evidence to provide an evidence submission for this appraisal.		х	12/08/2021	29	Not on Trust formulary for this indication. Shared with Haematology team (14/07/21). MMC deemed N/A (12/08/21).
Nivolumab for advanced non-squamous non- small-cell lung cancer after chemotherapy (TA713)	07/07/2021	Nivolumab – recommended as an option for treating locally advanced or metastatic non-squamous non-small-cell lung cancer (NSCLC) in adults after chemotherapy, only if:  • their tumours are PD-L1 positive, and  • it is stopped at 2 yrs of uninterrupted treatment, or earlier if their disease progresses, and  • they have not had a PD-1 or PD-L1 inhibitor before.  It is recommended only if the company provides nivolumab according to the commercial arrangement.	х		12/08/2021	36	Not on Trust formulary for this indication. Contacted Pulmonary oncology team (07/07/21). MMC approved and added to formulary (12/08/21).
Enzalutamide for treating hormone-sensitive metastatic prostate cancer (TA712)	07/07/2021	Enzalutamide plus androgen deprivation therapy (ADT) — recommended as an option for treating hormone-sensitive metastatic prostate cancer in adults. It is only recommended if the company provides enzalutamide according to the agreed commercial arrangement.		х	12/08/2021	36	Not on Trust formulary for this indication. Contacted Urology team (07/07/21). MFT not commissioned for prostate cancer. MMC deemed N/A (12/08/21).
Guselkumab for treating active psoriatic arthritis after inadequate response to DMARDs (TA711)	30/06/2021	Guselkumab, alone or with methotrexate – recommended as an option for treating active psoriatic arthritis in adults whose disease has not responded well enough to DMARDs or who cannot tolerate them, only if they have:  • peripheral arthritis with 3 or more tender joints and 3 or more swollen joints  • moderate to severe psoriasis (a body surface area of at least 3% affected by plaque psoriasis and a Psoriasis Area and Severity Index [PASI] score greater than 10)  • had 2 conventional DMARDs and at least 1 biological DMARD.  Guselkumab is recommended only if the company provides it according to the commercial arrangement.	х		12/08/2021	43	Not on Trust formulary for this indication. Contacted Adult & Paediatric Rheumatology teams (30/06/21). Fast track submitted. MMC approved and added to formulary (12/08/21).
Ravulizumab for treating atypical haemolytic uraemic syndrome (TA710)	23/06/2021	Ravulizumab — recommended as an option for treating atypical haemolytic uraemic syndrome (aHUS) in people weighing 10 kg or more:  who have not had a complement inhibitor before or  whose disease has responded to at least 3 months of eculizumab treatment.  It is recommended only if the company provides ravulizumab according to the commercial arrangement.		х	11/11/2021	141	Not on Trust formulary for this indication. Contacted Adult & Paediatric Haematology & Renal teams (23/06/21). Adult patients referred for treatment at Newcastle (08/07/21). Fast track submitted, MMC approved and added to formulary (11/11/21).
Pembrolizumab for untreated metastatic colorectal cancer with high microsatellite instability or mismatch repair deficiency (TA709)	23/06/2021	Pembrolizumab – recommended as an option for untreated metastatic colorectal cancer with high microsatellite instability (MSI) or mismatch repair (MMR) deficiency in adults, only if:  • pembrolizumab is stopped after 2 years and no documented disease progression, and  • the company provides pembrolizumab according to the commercial arrangement.		х	08/07/2021	15	Not on Trust formulary for this indication. Contacted Gastroenterology team (23/06/21). Patients referred for treatment at Christie Hospital. MMC deemed N/A (08/07/21).
Budesonide orodispersible tablet for inducing remission of eosinophilic oesophagitis (TA708)	23/06/2021	Budesonide (orodispersible tablet (ODT)) – recommended as an option for inducing remission of eosinophilic oesophagitis in adults.	х		08/07/2021	15	On Trust formulary for this indication (Dec-18). Contacted Upper GI team (15/06/21). MMC deemed compliant (08/07/21).
<b>Nivolumab</b> for previously treated unresectable advanced or recurrent oesophageal cancer (TA707)	15/06/2021	Nivolumab – recommended for treating unresectable advanced, recurrent or metastatic oesophageal squamous cell carcinoma in adults after fluoropyrimidine and platinum-based therapy. It is recommended only if the company provides nivolumab according to the commercial arrangement.		х	08/07/2021	23	Not on Trust formulary for this indication. Contacted Upper GI team (15/06/21). N/A Christie. MMC deemed N/A (08/07/21).
Ozanimod for treating relapsing—remitting multiple sclerosis (TA706)	09/06/2021	Ozanimod - NOT RECOMMENDED for treating relapsing–remitting multiple sclerosis in adults with clinical or imaging features of active disease.		х	08/07/2021	29	Not on Trust formulary. Not recommended by NICE. Shared with Neurology teams (09/06/21). MMC deemed N/A (08/07/21).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	as Adherence of local formulary to NICE					
			Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)	
Atezolizumab monotherapy for untreated advanced non-small-cell lung cancer (TA705)	02/06/2021	Atezolizumab – recommended as an option for untreated metastatic non-small-cell lung cancer (NSCLC) in adults if:  • their tumours have PD-L1 expression on at least 50% of tumour cells or 10% of tumour-infiltrating immune cells  • their tumours do not have epidermal growth factor receptor (EGFR) or anaplastic lymphoma kinase (ALK) mutations and  • the company provides atezolizumab according to the commercial arrangement.	х		12/08/2021	71	Not on Trust formulary for this indication. Contacted Pulmonary oncology team (02/06/21). Fast track submitted (09/07/21). MMC approved and added to formulary (12/08/21).	
Trastuzumab deruxtecan for treating HER2- positive unresectable or metastatic breast cancer after 2 or more anti-HER2 therapies (TA704)	26/05/2021	Trastuzumab deruxtecan – recommended for use within the CDF as an option for treating HER2 positive unresectable or metastatic breast cancer in adults after 2 or more anti HER2 therapies. It is recommended only if the conditions in the managed access agreement are followed.		х	10/06/2021	15	Not on Trust formulary. Contacted Breast team (26/05/21) eligible patients referred to Christie for treatment (27/05/21). MMC deemed N/A (10/06/21).	
Ibrutinib with rituximab for untreated chronic lymphocytic leukaemia (TERMINATED APPRAISAL) (TA703)	26/05/2021	<b>librutinib</b> with rituximab — <b>NOT RECOMMENDED</b> for untreated chronic lymphocytic leukaemia. This is because Janssen has confirmed that it does not intend to make an evidence submission for the appraisal. Janssen considers that there is unlikely to be enough evidence that the technology is a cost-effective use of NHS resources for this population		х	10/06/2021	15	Not on Trust formulary. Not recommended by NICE. MMC deemed N/A (10/06/21).	
Ibrutinib with obinutuzumab for untreated chronic lymphocytic leukaemia and small lymphocytic lymphoma (TERMINATED APPRAISAL) (TA702)	26/05/2021	<b>librutinib</b> with obinutuzumab — <b>NOT RECOMMENDED</b> for untreated chronic lymphocytic leukaemia and small lymphocytic lymphoma. This is because Janssen has confirmed that it does not intend to make an evidence submission for the appraisal. Janssen considers that the technology is unlikely to be a cost-effective use of NHS resources.		х	10/06/2021	15	Not on Trust formulary. Not recommended by NICE. MMC deemed N/A (10/06/21).	
Crisaborole for treating mild to moderate atopic dermatitis in people 2 years and older (TERMINATED APPRAISAL) (TA701)	19/05/2021	Crisaborole — NOT RECOMMENDED for treating mild to moderate atopic dermatitis in people 2 years and older. This is because Pfizer withdrew its evidence submission. The company has confirmed that it does not wish to make an evidence submission for the appraisal because currently the technology will not be launched in the UK.		х	10/06/2021	22	Not on Trust formulary. Not recommended by NICE. MMC deemed N/A (10/06/21).	
Selinexor with low-dose dexamethasone for treating refractory multiple myeloma (TERMINATED APPRAISAL) (TA700)	19/05/2021	Selinexor with low-dose dexamethasone — NOT RECOMMENDED for treating refractory multiple myeloma. This is because Karyopharm Therapeutics has confirmed that it does not intend to make an evidence submission for the appraisal and will not be launching the technology in the UK.		х	10/06/2021	22	Not on Trust formulary. Not recommended by NICE. MMC deemed N/A (10/06/21).	
Ofatumumab for treating relapsing multiple sclerosis (TA699)	19/05/2021	Ofatumumab — recommended as an option for treating relapsing—remitting multiple sclerosis in adults with active disease defined by clinical or imaging features. This is only if the company provides ofatumumab according to the commercial arrangement.		x	10/06/2021	22	Not on Trust formulary for this indication. Contacted Adult & Paediatric Neurology teams (19/05/21). Adult patients referred to SRFT (19/05/21). Paeds to submit fast track for patients eligible under NHSE Commissioning Medicines for Children in Specialised Services. For review at PMMC.	
Ravulizumab for treating paroxysmal nocturnal haemoglobinuria (TA698)	19/05/2021	Ravulizumab – recommended as an option for treating paroxysmal nocturnal haemoglobinuria in adults:  • with haemolysis with clinical symptoms suggesting high disease activity, or  • whose disease is clinically stable after having eculizumab for at least 6 months, and  • the company provides it according to the commercial arrangement.		х	10/06/2021	22	Not on Trust formulary for this indication. Contacted Haemtology team (19/05/21). Patients referred to centres in Leeds or London (19/05/21). MMC deemed N/A (10/06/21).	
Andexanet alfa for reversing anticoagulation from apixaban or rivaroxaban (TA697)	12/05/2021	Andexanet alfa — recommended as an option for reversing anticoagulation from apixaban or rivaroxaban in adults with life-threatening or uncontrolled bleeding, only if:  • the bleed is in the gastrointestinal tract, and  • the company provides andexanet alfa according to the commercial arrangement.  Andexanet alfa — recommended only in research for reversing anticoagulation from apixaban or rivaroxaban in adults with life-threatening or uncontrolled bleeding in the skull (intracranial haemorrhage; ICH), in the form of an ongoing randomised trial mandated by the regulator.	х		08/07/2021	57	Not on Trust formulary for this indication. Multidisciplinary team to submit Fast track. MMC approved and added to the formulary for this indication (08/07/21).	
Tafamidis for treating transthyretin amyloidosis with cardiomyopathy (TA696)	12/05/2021	Tafamidis — NOT RECOMMENDED, within its marketing authorisation, for treating wild-type or hereditary transthyretin amyloidosis with cardiomyopathy (ATTR CM) in adults.		х	10/06/2021	29	Not on Trust formulary. Not recommended by NICE. MMC deemed N/A (10/06/21).	

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	as Adherence of local formulary to NICE				
		, and the second	<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	<b>Notes</b> (e.g. rationale, method of making available)
Carfilzomib with dexamethasone and lenalidomide for previously treated multiple myeloma (TA695)	28/04/2021	Carfilzomib plus lenalidomide and dexamethasone is recommended as an option for treating multiple myeloma in adults, only if:  they have had only 1 previous therapy, which included bortezomib, and the company provides carfilzomib according to the commercial arrangement.	х		13/05/2021	15	Not on Trust formulary for this indication. Contacted Haematology team (28/04/21). Fast track submitted (30/04/21). MMC approved and added to the formulary for this indication (13/05/21).
<b>Bempedoic acid</b> with ezetimibe for treating primary hypercholesterolaemia or mixed dyslipidaemia ( <b>TA694</b> )	28/04/2021	Bempedoic acid with ezetimibe — recommended as an option for treating primary hypercholesterolaemia (heterozygous familial and non-familial) or mixed dyslipidaemia as an adjunct to diet in adults. It is recommended only if:  • statins are contraindicated or not tolerated,  • ezetimibe alone does not control low-density lipoprotein cholesterol well enough, and  • the company provides bempedoic acid and bempedoic acid with ezetimibe according to the commercial arrangement.  Bempedoic acid with ezetimibe can be used as separate tablets or a fixed-dose combination.	х		10/06/2021	43	Not on Trust formulary. Contacted Lipid Clinic team (28/04/21). Fast track submitted (27/05/21). MMC approved and added to the formulary for this indication (10/06/21).
Olaparib plus bevacizumab for maintenance treatment of advanced ovarian, fallopian tube or primary peritoneal cancer (TA693)	28/04/2021	Olaparib plus bevacizumab – recommended for use within the CDF as an option for maintenance treatment of advanced (International Federation of Gynecology and Obstetrics [FIGO] stages 3 and 4) high-grade epithelial ovarian, fallopian tube or primary peritoneal cancer in adults when:  • there has been a complete or partial response after first-line platinum-based chemotherapy plus bevacizumab, and  • the cancer is associated with homologous recombination deficiency (HRD).  • It is recommended only if the conditions in the managed access agreement for olaparib are followed.		х	13/05/2021	15	Not on Trust formulary for this indication. Contacted Gynaecological Oncology team (28/04/21). MMC deemed N/A - patients referred to the Christie Hospital (13/05/21).
Pembrolizumab for treating locally advanced or metastatic urothelial carcinoma after platinum-containing chemotherapy (TA692)	28/04/2021	Pembrolizumab – NOT RECOMMENDED, within its marketing authorisation, for treating locally advanced or metastatic urothelial carcinoma in adults who have had platinum-containing chemotherapy.  This recommendation is not intended to affect treatment with pembrolizumab that was started in the Cancer Drugs Fund before this guidance was published. For those people, pembrolizumab will be funded by the company until they and their NHS clinician consider it appropriate to stop.		х	13/05/2021	15	Not on Trust formulary for this indication. Not recommended by NICE. MMC deemed N/A (13/05/21).
Avelumab for untreated metastatic Merkel cell carcinoma (TA691)	21/04/2021	Avelumab — recommended as an option for treating metastatic Merkel cell carcinoma in adults who have not had chemotherapy for metastatic disease. It is recommended only if the company provides avelumab according to the commercial arrangement.		х	13/05/2021	22	Not on Trust formulary for this indication. Contacted Dermatology team (21/04/21). MMC deemed N/A - patients referred to the Christie Hospital (13/05/21).
Teduglutide for treating short bowel syndrome (TERMINATED APPRAISAL) (TA690)	21/04/2021	<b>Teduglutide</b> — <b>NOT RECOMMENDED</b> for short bowel syndrome in people 1 year and over because Takeda withdrew its evidence submission. Another company has confirmed that it wishes to make a new submission for the appraisal.		х	13/05/2021	22	Not on Trust formulary. Not recommended by NICE. MMC deemed N/A (13/05/21).
Acalabrutinib for treating chronic lymphocytic leukaemia (TA689)	21/04/2021	Acalabrutinib as monotherapy – recommended as an option for untreated chronic lymphocytic leukaemia (CLL) in adults, only if:  • there is a 17p deletion or TP53 mutation, or  • there is no 17p deletion or TP53 mutation, and fludarabine plus cyclophosphamide and rituximab (FCR), or bendamustine plus rituximab (BR) is unsuitable, and  • the company provides the drug according to the commercial arrangement.  Acalabrutinib as monotherapy – recommended as an option for previously treated CLL in adults. It is recommended only if the company provides the drug according to the commercial arrangement.	x		11/02/2021	-69	MMC approved and on Trust formulary for this indication (11/02/21).
			40	54		Avorage	
			% "Yes"	% "N/A"	-	Average implement time(days)	
Adherence statistics for 2021-22			43%	57%		27	



## Manchester University NHS Foundation Trust

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	ormulary to NICE
0	nereuse	marcated by their	Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Ribociclib with fulvestrant for treating hormone receptor-positive, HER2-negative advanced breast cancer after endocrine therapy (TA687)	31/03/2021	Ribociclib plus fulvestrant – recommended as an option for treating hormone receptor-positive, human epidermal growth factor receptor 2 (HER2)-negative, locally advanced or metastatic breast cancer in adults who have had previous endocrine therapy only if:  • exemestane plus everolimus is the most appropriate alternative to a cyclin-dependent kinase 4 and 6 (CDK 4/6) inhibitor, and  • the company provides ribociclib according to the commercial arrangement.		Х	08/04/2021	8	Not on Trust formulary. Contacted Breast team (31/03/21) eligible patients referred to Christie for treatment (10/03/21). MMC deemed N/A, added to the formulary for this indication, not stocked (08/04/21).
Blinatumomab for previously treated Philadelphia-chromosome-positive acute lymphoblastic leukaemia (TERMINATED APPRAISAL) (TA686)	31/03/2021	Blinatumomab – NOT RECOMMENDED for treating Philadelphia-chromosome-positive relapsed or refractory acute lymphoblastic leukaemia. This is because Amgen UK has confirmed that it does not intend to make an evidence submission for the appraisal. Amgen UK considers that there is unlikely to be enough evidence that the technology is a cost-effective use of NHS resources for this population.		х	08/04/2021	8	Not on Trust formulary for this indication. Terminated appraisal by NICE. MMC deemed N/A (08/04/21).
Anakinra for treating Still's disease (TA685)	31/03/2021	Anakinra – recommended as an option for treating Still's disease with moderate to high disease activity, or continued disease activity after non-steroidal anti-inflammatory drugs (NSAIDs) or glucocorticoids. It is only recommended for:  • adult-onset Still's disease that has responded inadequately to 2 or more conventional disease-modifying antirheumatic drugs (DMARDs)  • systemic juvenile idiopathic arthritis in people 8 months and older with a body weight of 10kg or more that has not responded to at least 1 conventional DMARD.	х		13/05/2021	43	On Trust formulary for this indication. Contacted Rheumatology team (31/03/21). Updated fast track application to be submitted for adult. MMC approved (13/05/21).
<b>Nivolumab</b> for adjuvant treatment of completely resected melanoma with lymph node involvement or metastatic disease (updates & replaces TA558) ( <b>TA684</b> )	17/03/2021	Nivolumab – recommended as an option for the adjuvant treatment of completely resected melanoma in adults with lymph node involvement or metastatic disease. It is recommended only if the company provides nivolumab according to the commercial arrangement.		х	08/04/2021	22	On formulary for this indication (Feb-19). Updated guidance. Contacted Dermatology team (17/03/21). N/A eligible patients referred to the Christie for treatment. MMC deemed N/A (08/04/21).
Pembrolizumab with pemetrexed and platinum chemotherapy for untreated, metastatic, non-squamous non-small-cell lung cancer (updates & replaces TA557) (TA683)	10/03/2021	Pembrolizumab with pemetrexed and platinum chemotherapy — recommended as an option for untreated, metastatic, non-squamous non-small-cell lung cancer (NSCLC) in adults whose tumours have no epidermal growth factor receptor (EGFR) positive or anaplastic lymphoma kinase (ALK) positive mutations. This is only if: it is stopped at 2 years of uninterrupted treatment, or earlier if the disease progresses and; the company provides pembrolizumab according to the commercial arrangement.	х		13/05/2021	64	Not on Trust formulary for this indication. Contacted Respiratory Oncology team (10/03/21). Fast track submitted (09/04/21). MMC approved (13/05/21).
Erenumab for preventing migraine (TA682)	10/03/2021	Erenumab – recommended as an option for preventing migraine in adults, only if: they have 4 or more migraine days a month; at least 3 preventive drug treatments have failed; the 140 mg dose of erenumab is used and the company provides it according to the commercial arrangement.  Stop erenumab after 12 weeks of treatment if: in episodic migraine (less than 15 headache days a month) the frequency does not reduce by at least 50%; in chronic migraine (15 headache days a month or more with at least 8 of those having features of migraine) the frequency does not reduce by at least 30%.		х	08/04/2021	29	Not on Trust formulary. Contacted Neurology team who confirmed on formulary at SRFT and eligible patients referred for treatment (10/03/21). MMC deemed N/A (08/04/21).
Baricitinib for treating moderate to severe atopic dermatitis (TA681)	03/03/2021	Baricitinib – recommended as an option for treating moderate to severe atopic dermatitis in adults, only if: the disease has not responded to at least 1 systemic immunosuppressant, such as ciclosporin, methotrexate, azathioprine and mycophenolate mofetil, or these are not suitable, and; the company provides it according to the commercial arrangement.		х	08/04/2021	36	Not on Trust formulary for this indication. Contacted Dermatology team (03/03/21). Not currently commissioned to provide treatment for atopic dermatitis in adults. MMC deemed N/A (08/04/21).
Lenalidomide maintenance treatment after an autologous stem cell transplant for newly diagnosed multiple myeloma (TA680)	03/03/2021	Lenalidomide – recommended as maintenance treatment after an autologous stem cell transplant for newly diagnosed multiple myeloma in adults, only if: the dosage schedule is 10 mg per day on days 1 to 21 of a 28 day cycle and; the company provides lenalidomide according to the commercial arrangement.  -	х		11/02/2021	-20	Not on Trust formulary for this indication. Haematology team submitted NHSE fast track for this indication (09/02/21). MMC approved and added to the formulary for this indication (11/02/21).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	as Adherence of local formulary to NICE					
	Kereuse	indicated by NiCL	Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)	
Dapagliflozin for treating chronic heart failure with reduced ejection fraction (TA679)	24/02/2021	Dapagliflozin – recommended as an option for treating symptomatic chronic heart failure with reduced ejection fraction in adults, only if it is used as an add-on to optimised standard care with:  • angiotensin-converting enzyme (ACE) inhibitors or angiotensin 2 receptor blockers (ARBs), with beta blockers, and, if tolerated, mineralocorticoid receptor antagonists (MRAs), or  • sacubitril valsartan, with beta blockers, and, if tolerated, MRAs.	х		11/03/2021	15	Not on Trust formulary for this indication. Contacted Cardiology team (24/02/21). Fast track submitted (01/03/21). MMC approved and added to the formulary for this indication (11/03/21).	
Omalizumab for treating chronic rhinosinusitis with nasal polyps (TERMINATED APPRAISAL) (TA678)	24/02/2021	Omalizumab – NOT RECOMMENDED for treating chronic rhinosinusitis with nasal polyps because Novartis Pharmaceuticals did not provide an evidence submission. The company has confirmed that it does not intend to make a submission for the appraisal because the technology will not be launched in the UK for treating this indication.		х	11/03/2021	15	Not on Trust formulary for this indication. Terminated appraisal by NICE. MMC deemed N/A (11/03/21).	
Autologous anti-CD19-transduced CD3+ cells for treating relapsed or refractory mantle cell lymphoma (TA677)	24/02/2021	Autologous anti-CD19-transduced CD3+ cells – recommended for use within the CDF as an option for relapsed or refractory mantle cell lymphoma in adults who have previously had a Bruton's tyrosine kinase (BTK) inhibitor. It is only recommended if the conditions in the managed access agreement for autologous anti CD19 transduced CD3+ cells treatment are followed.	х		11/02/2021	-13	On Trust formulary. MMC approved and added to the formulary for this indication (11/02/21).	
Filgotinib for treating moderate to severe rheumatoid arthritis (TA676)	24/02/2021	Filgotinib, with methotrexate—recommended as an option for treating active RA in adults whose disease has responded inadequately to intensive therapy with 2 or more conventional DMARDs, only if: disease is moderate or severe DAS28 score of 3.2 or more) and; the company provides filgotinib according to the commercial arrangement.  Filgotinib, with methotrexate—recommended as an option for treating active RA in adults whose disease has responded inadequately to or who cannot have other DMARDs, including at least 1 biological DMARD, only if: disease is severe (a DAS28 of more than 5.1) and they cannot have rituximab and the company provides filgotinib according to the commercial arrangement.  Filgotinib, with methotrexate—recommended as an option for treating active RA in adults whose disease has responded inadequately to rituximab and at least 1 biological DMARD, only if: disease is severe (a DAS28 of more than 5.1) and; the company provides filgotinib according to the commercial arrangement.  Filgotinib can be used as monotherapy when methotrexate is contraindicated or if people cannot tolerate it, when the criteria in sections 1.1, 1.2 or 1.3 are met.	х		08/04/2021	43	Not on Trust formulary. Contacted Rheumatology team (24/02/21). MMC approved and added to the formulary for this indication (08/04/21).	
Vernakalant for the rapid conversion of recent onset atrial fibrillation to sinus rhythm (TERMINATED APPRAISAL) (TA675)	17/02/2021	Vernakalant – NOT RECOMMENDED for or the rapid conversion of recent onset atrial fibrillation to sinus rhythm in adults. This is because Correvio Ltd did not provide an evidence submission to NICE. Decisiob to be reviewed if the company decides to make a submission.		х	11/03/2021	22	Not on Trust formulary. Terminated appraisal by NICE. MMC deemed N/A (11/03/21).	
Pembrolizumab for untreated PD-L1-positive, locally advanced or metastatic urothelial cancer when cisplatin is unsuitable (TERMINATED APPRAISAL) (replacing TA522) (TA674)	17/02/2021	Pembrolizumab – NOT RECOMMENDED for untreated PD-L1-positive, locally advanced or metastatic urothelial cancer when cisplatin is unsuitable in adults. This is because Merck Sharp & Dohme did not provide a complete evidence submission to NICE.		х	11/03/2021	22	Not on Trust formulary for this indication. Terminated appraisal by NICE. MMC deemed N/A (11/03/21).	
<b>Niraparib</b> for maintenance treatment of advanced ovarian, fallopian tube and peritoneal cancer after response to first-line platinum-based chemotherapy (TA673)	17/02/2021	Niraparib – recommended for use within the CDF as an option for maintenance treatment for advanced (FIGO stages 3 and 4) high-grade epithelial ovarian, fallopian tube or primary peritoneal cancer after response to first-line platinum-based chemotherapy in adults. It is recommended only if the conditions in the managed access agreement for niraparib are followed.		x	11/03/2021	22	Not on Trust formulary for this indication. Contacted Gynaecological oncology team, eligible patients referred to the Christie Hospital (17/02/21). MMC deemed N/A (11/03/21).	
<b>Brigatinib</b> for ALK-positive advanced non-small- cell lung cancer that has not been previously treated with an ALK inhibitor ( <b>TA670</b> )	27/01/2021	Brigatinib – recommended as an option for treating anaplastic lymphoma kinase (ALK)-positive advanced non-small-cell lung cancer (NSCLC) that has not been previously treated with an ALK inhibitor in adults. It is recommended only if the company provides brigatinib according to the commercial arrangement.	х		14/02/2021	18	Not on Trust formulary for this indication. Lung Cancer team submitted fast track application (11/02/21). MMC approved and added to the formulary for this indication (14/02/21).	
<b>Trifluridine–tipiracil</b> for treating metastatic gastric cancer or gastro-oesophageal junction adenocarcinoma after 2 or more therapies ( <b>TA669</b> )	27/01/2021	Trifluridine—tipiracil— NOT RECOMMENDED for treating metastatic gastric cancer or gastro-oesophageal junction adenocarcinoma in adults who have had 2 or more systemic treatment regimens.		х	11/02/2021	15	Not on Trust formulary for this indication. Contacted Gastro team (27/01/21). N/A response (28/01/21). MMC deemed N/A (11/02/21).	

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE		ormulary to NICE			
			<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
<b>Encorafenib</b> plus cetuximab for previously treated BRAF V600E mutation-positive metastatic colorectal cancer ( <b>TA668</b> )	06/01/2021	Encorafenib plus cetuximab – recommended as an option for treating BRAF V600E mutation-positive metastatic colorectal cancer in adults who have had previous systemic treatment. It is recommended only if the company provides it according to the commercial arrangements.		x	14/01/2021	8	Not on Trust formulary for this indication. Contacted Colorectal team (06/01/21). N/A response, patients referred to the Christie Hospital (06/01/21). MMC deemed N/A (14/01/21).
Caplacizumab with plasma exchange and immunosuppression for treating acute acquired thrombotic thrombocytopenic purpura (TA667)	16/12/2020	Caplacizumab with plasma exchange and immunosuppression—recommended as an option for treating an acute episode of acquired thrombotic thrombocytopenic purpura (TTP) in adults, and in young people aged 12 years and over who weigh at least 40kg. Treatment should be started and supervised by physicians experienced in managing thrombotic microangiopathies. It is recommended only if the company provides caplacizumab according to the commercial arrangement.		х	14/01/2021	29	Not on Trust formulary for this indication. Contacted Haematology team (16/12/20). N/A response, patients referred to the Royal Liverpool and Broadgreen University Hospitals NHS Trust (16/12/20). MMC deemed N/A (14/01/21).
Atezolizumab with bevacizumab for treating advanced or unresectable hepatocellular carcinoma (TA666)	16/12/2020	Atezolizumab plus bevacizumab – recommended as an option for treating advanced or unresectable hepatocellular carcinoma (HCC) in adults who have not had previous systemic treatment, only if they have Child Pugh grade A liver impairment and an Eastern Cooperative Oncology Group (ECOG) performance status of 0 or 1 and; the company provides it according to the commercial arrangement.		х	14/01/2021	29	Not on Trust formulary for this indication. Contacted Hepatology (16/12/20). N/A response, patients referred to the Christie Hospital (16/12/20). MMC deemed N/A (14/01/21).
Liraglutide for managing overweight and obesity (TA664)	09/12/2020	Liraglutide – recommended as an option for managing overweight and obesity alongside a reduced-calorie diet and increased physical activity in adults, only if they have a BMI of at least 35 kg/m² (or at least 32.5 kg/m² for members of minority ethnic groups known to be at equivalent risk of the consequences of obesity at a lower BMI than the white population) and; they have non-diabetic hyperglycaemia (defined as a haemoglobin ALc level of 42 mmol/mol to 47 mmol/mol [6.0% to 6.4%] or a fasting plasma glucose level of 5.5 mmol/L to 6.9 mmol/L) and; they have a high risk of cardiovacular disease based on risk factors such as hypertension and dyslipidaemia; and it is prescribed in 2 <sup>RY</sup> care by a specialist multidisciplinary tier 3 weight management service and; the company provides it according to the commercial arrangement.	х		11/02/2021	64	Not on Trust formulary for this indication. Contacted Diabetes team (09/12/20). Fast track application to be submitted (09/12/20). MMC approved (11/02/21)
Venetoclax with obinutuzumab for untreated chronic lymphocytic leukaemia (TA663)	09/12/2020	Venetoclax plus obinutuzumab – recommended as an option for untreated chronic lymphocytic leukaemia (CLL) in adults, only if there is a 17p deletion or TP53 mutation, or; there is no 17p deletion or TP53 mutation, and fludarabine plus cyclophosphamide and rituximab (FCR), or bendamustine plus rituximab (BR), is unsuitable, and; the companies provide the drugs according to the commercial arrangements.  Venetoclax plus obinutuzumab – recommended for use within the CDF as an option for untreated CLL in adults, only if there is no 17p deletion or TP53 mutation, and FCR or BR is suitable, and; the conditions in the MAA for venetoclax plus obinutuzumab are followed.	х		14/01/2021	36	Not on Trust formulary with obinutuzumab for this indication. Contacted Haematology team (09/12/20). Fast track submitted (09/12/20). MMC approved and added to formulary for this indication (14/01/21).
Durvalumab in combination for untreated extensive-stage small-cell lung cancer (TA662) (TERMINATED APPRAISAL)	25/11/2020	Durvalumab – NOT RECOMMENDED in combination for untreated extensive-stage small-cell lung cancer because AstraZeneca withdrew its evidence submission. The company has confirmed that it does not intend to make a submission for the appraisal because the technology is unlikely to be a cost-effective use of NHS resources.		х	10/12/2020	15	Not on Trust formulary for this indication. Terminated appraisal by NICE. MMC deemed N/A (10/12/20).
Darolutamide with androgen deprivation therapy for treating hormone-relapsed non-metastatic prostate cancer (TA660)	25/11/2020	Darolutamide with androgen deprivation therapy (ADT)— recommended as an option for treating hormone-relapsed prostate cancer in adults at high risk of developing metastatic disease. It is recommended only if the company provides darolutamide according to the commercial arrangement.		х	10/12/2020	15	Not on Trust formulary. Contacted Adult Urology team (26/11/20). Eligible patients referred to the Christie Hospital (08/12/20). MMC deemed N/A (10/12/20).
Galcanezumab for preventing migraine (TA659)	18/11/2020	Galcanezumab – recommended as an option for preventing migraine in adults, only if they have 4 or more migraine days a month; at least 3 preventive drug treatments have failed and; the company provides it according to the commercial arrangement.		х	10/12/2020	22	Not on Trust formulary. Contacted Adult and Paediatric neurology teams (26/11/20). MMC approved and added to formulary for this indication not stocked (10/09/20).
Isatuximab with pomalidomide and dexamethasone for treating relapsed and refractory multiple myeloma (TA658)	18/11/2020	Isatuximab, plus pomalidomide and dexamethasone— recommended for use within the CDF as an option for treating relapsed and refractory multiple myeloma in adults who have had lenalidomide and a proteasome inhibitor, and whose disease has progressed on their last treatment, only if they have had 3 previous lines of treatment and the conditions in the managed access agreement for isatuximab plus pomalidomide and dexamethasone are followed.	х		12/11/2020	-6	On Trust formulary for this indication (EAMS approved (Jan-20). Haematology team submitted fast track. Approved by MMC and added to the formulary for this indication (FAD) (12/11/20).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA	Release indicated by NICE	Adherence of local formulary to NICE						
	nereuse		Yes (mark 'x' if applicable)	N/A (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)		
<b>Siponimod</b> for treating secondary progressive multiple sclerosis ( <b>TA656</b> )	18/11/2020	Siponimod – recommended as an option for treating secondary progressive multiple sclerosis with evidence of active disease (that is, relapses or imaging features of inflammatory activity) in adults. It is recommended only if the company provides siponimod according to the commercial arrangement.		х	10/12/2020	22	Not on Trust formulary. N/A response from Adult neurology team, patients treated at SRFT. Paediatric neurology response N/A (26/11/20). To be reviewed by MMC (10/12/20).		
<b>Nivolumab</b> for advanced squamous non-small- cell lung cancer after chemotherapy ( <b>TA655</b> )	21/10/2020	Nivolumab – recommended as an option for treating locally advanced or metastatic squamous non-small-cell lung cancer (NSCLC) in adults after chemotherapy, only if it is stopped at 2 years of uninterrupted treatment, or earlier if their disease progresses and they have not had a PD-1 or PD-L1 inhibitor before. It is recommended only if the company provides nivolumab according to the commercial arrangement.	x		12/11/2020	22	Not on Trust formulary for this indication. Lung Cancer team submitted fast track application (06/11/20). MMC approved and added to the formulary for this indication (12/11/20).		
Osimertinib for untreated EGFR mutation- positive non-small-cell lung cancer (replacing TA621) (TA654)	14/10/2020	Osimertinib – recommended as an option for untreated locally advanced or metastatic epidermal growth factor receptor (EGFR) mutation-positive non-small-cell lung cancer (NSCLC) in adults. It is recommended only if the company provides osimertinib according to the commercial arrangement.	x		12/11/2020	29	Not on Trust formulary for this indication. Lung Cancer team submitted fast track application (06/11/20). MMC approved and added to the formulary for this indication (12/11/20).		
Alpelisib with fulvestrant for treating hormone- receptor positive, HER2-negative, PIK3CA- positive advanced breast cancer (TA652) (TERMINATED APPRAISAL)	07/10/2020	Alpelisib – NOT RECOMMENDED with fulvestrant for treating hormone-receptor positive, HER2-negative, PIK3CA-positive advanced breast cancer because Novartis did not provide an evidence submission to NICE.		х	12/11/2020	36	Not on Trust formulary. Terminated appraisal by NICE. MMC deemed N/A (12/11/20).		
Naldemedine for treating opioid-induced constipation (TA651)	30/09/2020	Naldemedine – recommended, within its marketing authorisation, as an option for treating opioid-induced constipation in adults who have had laxative treatment.	х		12/11/2020	43	Not on Trust formulary. Contacted Gastro, Surgical and Medicine teams (30/09/20). Fast track application submitted (06/11/20). Approved by MMC and added to the formulary for this indication (12/11/20).		
Pembrolizumab with axitinib for untreated advanced renal cell carcinoma (TA650)	30/09/2020	Pembrolizumab with axitinib – NOT RECOMMENDED within its marketing authorisation, for untreated advanced renal cell carcinoma in adults.		х	08/10/2020	8	Not on Trust formulary for this indication. Surgical & Renal Teams confirmed compliance with non-use (30/09/20). MMC deemed N/A (08/10/20).		
Polatuzumab vedotin with rituximab and bendamustine for treating relapsed or refractory diffuse large B-cell lymphoma (TA649)	23/09/2020	Polatuzumab vedotin with rituximab and bendamustine— recommended as an option for treating relapsed or refractory diffuse large B cell lymphoma in adults who cannot have a haematopoietic stem cell transplant. It is recommended only if the company provides polatuzumab vedotin according to the commercial arrangement.	х		08/10/2020	15	Not on Trust formulary. Contacted Haematology Oncology teams (23/09/20); submitted fast track application (24/09/20). Approved by MMC and added to the formulary for this indication (08/10/20).		
Dupilumab for treating chronic rhinosinusitis with nasal polyps (TA648) (TERMINATED APPRAISAL)	09/09/2020	Dupilumab – NOT RECOMMENDED for treating chronic rhinosinusitis with nasal polyps because Sanofi did not provide an evidence submission. The company has confirmed that it does not intend to make a submission for the appraisal because there is unlikely to be sufficient evidence that the technology is a cost-effective use of NHS resources in this population.		х	08/10/2020	29	Not on Trust formulary for this indication. Terminated appraisal by NICE. MMC deemed N/A (08/10/20).		
Eculizumab for treating relapsing neuromyelitis optica (TA647) (TERMINATED APPRAISAL)	02/09/2020	Eculizumab – NOT RECOMMENDED for treating relapsing neuromyelitis optica because Alexion Pharma UK did not provide an evidence submission. The company has confirmed that it does not intend to make a submission for the appraisal because the technology will not be launched in the UK for this indication.		х	10/09/2020	8	Not on Trust formulary for this indication. Terminated appraisal by NICE. MMC deemed N/A (10/09/20).		
Avelumab with axitinib for untreated advanced renal cell carcinoma (TA645)	02/09/2020	Avelumab with axitinib – recommended for use within the CDF as an option for untreated advanced renal cell carcinoma in adults. It is recommended only if the conditions in the managed access agreement for avelumab with axitinib are followed.		x	10/09/2020	8	Not on Trust formulary for this indication. Contacted Surgical and Renal teams (02/09/20). N/A responses (02/09/20), eleigible patients referred to the Christie Hospital. MMC approved and added to formulary for this indication - not stocked (10/09/20).		
Entrectinib for treating NTRK fusion-positive solid tumours (TA644)	12/08/2020	Entrectinib – recommended for use within the CDF as an option for treating neurotrophic tyrosine receptor kinase (NTRK) fusion-positive solid tumours in adults and children 12 years and older if the disease is locally advanced or metastatic or surgery could cause severe health problems and; they have not had an NTRK inhibitor before and; they have no satisfactory treatment options. It is recommended only if the conditions in the managed access agreement for entrectinib are followed.	x		10/09/2020	29	Not on Trust formulary. Contacted Haematology Oncology teams (12/08/20); submitted fast track application (12/08/20). MMC approved and added to formulary for this indication (10/09/20).		

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE		ormulary to NICE			
		,, ·	<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Entrectinib for treating ROS1-positive advanced non-small-cell lung cancer (TA643)	12/08/2020	Entrectinib – recommended, within its marketing authorisation, as an option for treating ROS1-positive advanced non-small-cell lung cancer (NSCLC) in adults who have not had ROS1 inhibitors. It is recommended only if the company provides entrectinib according to the commercial arrangement.	х		10/09/2020	29	Not on Trust formulary. Contacted Respiratory Oncology teams (12/08/20); submitted fast track application (12/08/20). MMC approved and added to formulary for this indication (10/09/20).
Gilteritinib for treating relapsed or refractory acute myeloid leukaemia (TA642)	12/08/2020	Gilteritinib monotherapy — recommended as an option for treating relapsed or refractory FLT3 mutation-positive acute myeloid leukaemia (AML) in adults only if the company provides gilteritinib according to the commercial arrangement.	х		14/05/2020	-90	On Trust formulary for this indication. Haem team previously submitted fast track application for SSC2162. MMC approved and added to formulary for this indication (14/05/20).
Brentuximab vedotin in combination for untreated systemic anaplastic large cell lymphoma (TA641)	12/08/2020	Brentuximab vedotin with cyclophosphamide, doxorubicin and prednisone (CHP)— recommended, within its marketing authorisation, as an option for untreated systemic anaplastic large cell lymphoma in adults. It is only recommended if the company provides brentuximab vedotin according to the commercial arrangement.	x		13/08/2020	1	Not on Trust formulary for this indication. Contacted Haematology team (12/08/20). Haem team previously submitted fast track application for SSC2155. MMC approved and added to formulary for this indication (13/08/20).
Treosulfan with fludarabine for malignant disease before allogeneic stem cell transplant (TA640)	05/08/2020	Treosulfan with fludarabine – recommended as an option for conditioning treatment before allogeneic haematopoietic stem cell transplant (allo-HSCT) for people with malignant diseases for whom a reduced intensity regimen, such as low-dose busulfan with fludarabine, would be suitable.	x		10/09/2020	36	Not on Trust formulary for this indication. Contacted Haematology team (05/08/20). Haem team submitted fast track application (05/08/20). MMC approved and added to formulary for this indication (10/09/20).
Atezolizumab with nab-paclitaxel for untreated PD-L1-positive, locally advanced or metastatic, triple-negative breast cancer (TA639)	01/07/2020	Atezolizumab with nab paclitaxel— recommended for treating triple-negative, unresectable, locally advanced or metastatic breast cancer in adults whose tumours express PD-level of 1% or more and who have not had previous chemotherapy for metastatic disease. It is recommended only if the company provides atezolizumab according to the commercial arrangement.		х	13/08/2020	43	Not on Trust formulary for this indication. Contacted Surgery Oncology team (01/07/20). N/A response eligible patients to be referred to the Christie Hospital (07/07/20). MMC deemed N/A, added to the formulary for this indication, not stocked (13/08/20).
Atezolizumab with carboplatin and etoposide for untreated extensive-stage small-cell lung cancer (TA638)	01/07/2020	Atezolizumab with carboplatin and etoposide— recommended as an option for untreated extensive-stage small-cell lung cancer in adults, only if:  • they have an Eastern Cooperative Oncology Group (ECOG) performance status of 0 or 1, and  • the company provides atezolizumab according to the commercial arrangement.	х		13/08/2020	43	Not on Trust formulary for this indication. N/A at ORC site for adults. Wythenshawe submitted fast track application (07/07/20). Approved by MMC and added to the formulary for this indication (13/08/20).
Eculizumab for treating refractory myasthenia gravis (TA636) (TERMINATED APPRAISAL)	30/06/2020	Eculizumab – NOT RECOMMENDED for treating refractory myasthenia gravis because Alexion Pharma UK did not provide an evidence submission. The company has confirmed that it does not intend to make a submission for the appraisal because the technology will not be launched in the UK for this indication.		х	09/07/2020	9	Not on Trust formulary for this indication. Terminated appraisal by NICE. MMC deemed N/A (09/07/20).
Ramucirumab with erlotinib for untreated EGFR-positive metastatic non-small-cell lung cancer (TA635) (TERMINATED APPRAISAL)	30/06/2020	Ramucirumab with erlotinib – NOT RECOMMENDED for untreated epidermal growth factor receptor (EGFR)-positive metastatic non-small-cell lung cancer because Eli Lilly and Company Limited did not provide an evidence submission. The company has confirmed that it does not intend to make a submission for the appraisal because the technology is unlikely to be a cost effective use of NHS resources.		х	09/07/2020	9	Not on Trust formulary for this indication. Terminated appraisal by NICE. MMC deemed N/A (09/07/20).
Daratumumab with lenalidomide and dexamethasone for untreated multiple myeloma (TA634) (TERMINATED APPRAISAL)	30/06/2020	Daratumumab with lenalidomide and dexamethasone— NOT RECOMMENDED for untreated multiple myeloma because Janssen did not provide an evidence submission. The company has confirmed that it does not intend to make a submission for the appraisal because the technology is unlikely to be a cost-effective use of NHS resources.		х	09/07/2020	9	Not on Trust formulary for this indication. Terminated appraisal by NICE. MMC deemed N/A (09/07/20).
Avatrombopag for treating thrombocytopenia in people with chronic liver disease needing a planned invasive procedure (TA626)	24/06/2020	Avatrombopag – recommended, within its marketing authorisation, as an option for treating severe thrombocytopenia (that is, a platelet count of below 50,000 platelets per microlitre of blood) in adults with chronic liver disease having a planned invasive procedure.	x		13/08/2020	50	Not on Trust formulary. Contacted Hepatology team for review and fast track submission (24/06/20). Submitted (06/08/20). Approved by MMC and added to the formulary for this indication (13/08/20).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	Adherence of local formulary to NICE					
		·	<b>Yes</b> (mark 'x' if applicable)	N/A (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)	
Trastuzumab emtansine for adjuvant treatment of HER2-positive early breast cancer (TA632)		Trastuzumab emtansine— recommended as an option for the adjuvant treatment of human epidermal growth factor receptor 2 (HER2)—positive early breast cancer in adults who have residual invasive disease in the breast or lymph nodes after neoadjuvant taxane—based and HER2—targeted therapy. It is recommended only if the company provides trastuzumab emtansine according to the commercial arrangement.		х	11/06/2020	1	Not on Trust formulary for this indication. Surgical/ Haematology/Oncology team confirmed N/A. Eligible patients to be referred to the Christie Hospital (10/06/20). MMC deemed N/A, added to the formulary for this indication, not stocked (11/06/20).	
Fremanezumab for preventing migraine (TA631)	05/05/2020	Fremanezumab – recommended as an option for preventing migraine in adults, only if:  • the migraine is chronic, that is, 15 or more headache days a month for more than 3 months with at least 8 of those having features of migraine  • at least 3 preventive drug treatments have failed and  • the company provides it according to the commercial arrangement.		х	09/07/2020	36	Not on Trust formulary. N/A SRFT response from Neurology Consultants (16/06/20).	
<b>Lenalidomide</b> with rituximab for previously treated follicular lymphoma ( <b>TA627</b> )		<b>Lenalidomide</b> with <b>rituximab</b> — recommended as an option for previously treated follicular lymphoma (grade 1 to 3A) in adults. It is only recommended if the company provides lenalidomide according to the commercial arrangement.	x		09/04/2020	2	Not on Trust formulary for this indication. Adult Haematology submitted fast track application 07/04/20. MMC Chairs approval and added to formulary for this indication 09/04/20.	
			31	32				
			% "Yes"	% "N/A"	-	Average implement time(days)		
Adherence statistics for 2020-21			49%	51%		21		



This spreadsheet enables self-audit of a medicines formulary for adherence to NICE Technology Appraisals. No copyright is asserted if used for non-commercial purposes within the NHS.

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	ence of local fo	ormulary to NICE
			Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
2019-20							
Recombinant human parathyroid hormone for treating hypoparathyroidism (TA625) (TERMINATED APPRAISAL)	04/03/2020	Recombinant human parathyroid hormone — NOT RECOMMENDED for treating hypoparathyroidism because Shire Pharmaceuticals (now part of Takeda) did not provide an evidence submission. The company has advised NICE that there is a clinical study being done in the UK, so there is insufficient evidence to provide a submission for this appraisal at this stage.		х	13/03/2020	9	Not on Trust formulary. Terminated appraisal by NICE. MMC deemed N/A (13/03/20).
Peginterferon beta-1a for treating relapsing—remitting multiple sclerosis (TA624)	19/02/2020	Peginterferon beta-1a — recommended, within its marketing authorisation, as an option for treating relapsing—remitting multiple sclerosis in adults.		х	13/03/2020	23	Not on Trust formulary for this indication. Adult Neurology team confirmed N/A (21/02/20). Awaiting response from Paediatric team. MMC deemed N/A, added to the formulary for this indication, not stocked (13/03/20).
Patiromer for treating hyperkalaemia (TA623)	13/02/2020	Patiromer – recommended as an option for treating hyperkalaemia in adults only if used:  • in emergency care for acute life-threatening hyperkalaemia alongside standard care or  • for people with persistent hyperkalaemia and stages 3b to 5 chronic kidney disease or heart failure, if they have a confirmed serum potassium level of at least 6.0 mmol/litre and; are not taking, or are taking a reduced dosage of, a renin-angiotensin-aldosterone system (RAAS) inhibitor because of hyperkalaemia and; are not on dialysis.	х		06/04/2020	53	Not on Trust formulary (application deferred Dec- 18). Renal and Cardiology teams submitted fast track application. MMC Approved, added to the formulary for this indication (06/04/20).
Sotagliflozin with insulin for treating type 1 diabetes (TA622)	12/02/2020	Sotagliflozin with insulin is recommended as an option for treating type 1 diabetes in adults with a body mass index (BMI) of at least 27 kg/m2, when insulin alone does not provide adequate glycaemic control despite optimal insulin therapy, only if:  • sotagliflozin is given as one 200 mg tablet daily  • they are on insulin doses of 0.5 units/kg of body weight/day or more and  • they have completed a structured education programme that is evidence based, quality assured, delivered by trained educators and includes information about diabetic ketoacidosis, such as:    how to recognise its risk factors, signs and symptoms   how and when to monitor blood ketone levels   what actions to take for elevated blood ketones and  • treatment is started and supervised by a consultant physician specialising in endocrinology and diabetes treatment, and haemoglobin A1c (HbA1c) levels are assessed after 6 months and regularly after this.	x		11/06/2020	120	Not on Trust formulary. Diabetes / Endocrinology team submitted fast track application 29/05/20. To be reviewed by MMC on 11/06/20.
Osimertinib for untreated EGFR mutation- positive non-small-cell lung cancer (TA621)	22/01/2020	Osimertinib — NOT RECOMMENDED within its marketing authorisation, for untreated locally advanced or metastatic epidermal growth factor receptor (EGFR) mutation-positive non-small-cell lung cancer (NSCLC) in adults.		х	13/02/2020	22	Not on Trust formulary for this indication. Respiratory team confirmed N/A. MMC deemed N/A (13/02/20).
Olaparib for maintenance treatment of relapsed platinum-sensitive ovarian, fallopian tube or peritoneal cancer (TA620)	15/01/2020	Olaparib – recommended as an option for the maintenance treatment of relapsed, platinum-sensitive, high-grade epithelial ovarian, fallopian tube or primary peritoneal cancer in adults whose disease has responded to platinum-based chemotherapy only if they have a BRCA1 or BRCA2 mutation; they have had 3 or more courses of platinum-based chemotherapy and; the company provides olaparib according to the commercial arrangement.  Olaparib – recommended for use within the CDF as an option for the maintenance treatment of relapsed, platinum-sensitive, high-grade epithelial ovarian, fallopian tube or primary peritoneal cancer in adults whose disease has responded to platinum-based chemotherapy only if they have a BRCA1 or BRCA2 mutation; they have had 2 courses of platinum-based chemotherapy and; the conditions in the MAA for olaparib are followed.		x	13/02/2020	29	Not on Trust formulary for this indication. Surgical/ Haematology/Oncology team confirmed N/A, all eligible patients would be referred to the Christie Hospital (15/01/20). MMC deemed N/A, added to the formulary for this indication, not stocked (13/02/20).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	as Adherence of local formulary to NICE					
			<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)	
Palbociclib with fulvestrant for treating hormone receptor-positive, HER2-negative, advanced breast cancer (TA619)	15/01/2020	Palbociclib with fulvestrant – recommended for use within the CDF as an option for treating hormone receptor-positive, human epidermal growth factor receptor 2 (HER2)-negative, locally advanced or metastatic breast cancer in people who have had previous endocrine therapy only if exemestane plus everolimus is the most appropriate alternative to a cyclin-dependent kinase 4 and 6 (CDK 4/6) inhibitor and; the conditions in the MAA for palbociclib with fulvestrant are followed.	х		13/02/2020	29	Not on Trust formulary for this indication. Surgical/ Haematology/Oncology team confirmed N/A, all eligible patients would be referred to the Christie Hospital (15/01/20). MMC deemed N/A, added to the formulary for this indication, not stocked (13/02/20).	
Atezoliumab with carboplatin and nab- paclitaxel for untreated advanced non- squamous non-small-cell lung cancer (TA618) (TERMINATED APPRAISAL)	15/01/2020	Atezolizumab with carboplatin and nab-paclitaxel— NOT RECOMMENDED for untreated advanced non-squamous non-small-cell lung cancer because Roche did not provide an evidence submission. The company has confirmed that it does not intend to make a submission for the appraisal because the technology, in this combination, is unlikely to be used at this point in the treatment pathway.		x	13/02/2020	29	Not on Trust formulary for this indication. Respiratory team confirmed N/A. Terminated appraisal by NICE. MMC deemed N/A (13/02/20).	
Lusutrombopag for treating thrombocytopenia in people with chronic liver disease needing a planned invasive procedure (TA617)	08/01/2020	Lusutrombopag – recommended as an option for treating severe thrombocytopenia (that is, a platelet count of below 50,000 platelets per microlitre of blood) in adults with chronic liver disease having planned invasive procedures.	х		13/02/2020	36	Not on Trust formulary. Haematology and Hepatology team contacted. MMC approved & added to the formulary (13/02/20).	
Cladribine for treating relapsing–remitting multiple sclerosis (TA616)	18/12/2019	Cladribine—recommended as an option for treating highly active multiple sclerosis in adults, only if the person has rapidly evolving severe relapsing—remitting multiple sclerosis, that is with at least 2 relapses in the previous year and 1 T1 gadolinium-enhancing lesion at baseline MRI or a significant increase in T2 lesion load compared with a previous MRI, or; relapsing—remitting multiple sclerosis that has responded inadequately to treatment with disease-modifying therapy, defined as 1 relapse in the previous year and MRI evidence of disease activity.		x	13/02/2020	57	Not on Trust formulary for this indication. Neurology team contacted. MMC deemed N/A, added to the formulary for this indication, not stocked (13/02/20).	
Cannabidiol with clobazam for treating seizures associated with Lennox–Gastaut syndrome (TA615)	18/12/2019	Cannabidiol with clobazam— recommended as an option for treating seizures associated with Lennox—Gastaut syndrome in people aged 2 years and older, only if the frequency of drop seizures is checked every 6 months, and cannabidiol is stopped if the frequency has not fallen by at least 30% compared with the 6 months before starting treatment; the company provides cannabidiol according to the commercial arrangement.	х		05/02/2020	49	Not on Trust formulary for this indication. Paediatric Neurology team submitted fast track application. PMMC approved & added to the formulary (05/02/20).	
Cannabidiol with clobazam for treating seizures associated with Dravet syndrome (TA614)	18/12/2019	Cannabidiol with clobazam – recommended as an option for treating seizures associated with Dravet syndrome in people aged 2 years and older, only if the frequency of convulsive seizures is checked every 6 months, and cannabidiol is stopped if the frequency has not fallen by at least 30% compared with the 6 months before starting treatment; the company provides cannabidiol according to the commercial arrangement.	x		05/02/2020	49	Not on Trust formulary for this indication. Paediatric Neurology team submitted fast track application. PMMC approved & added to the formulary (05/02/20).	
Fluocinolone acetonide intravitreal implant for treating chronic diabetic macular oedema in phakic eyes after an inadequate response to previous therapy (TA613)	20/11/2019	Fluocinolone acetonide intravitreal implant— NOT RECOMMENDED as an option for treating chronic diabetic macular oedema that is insufficiently responsive to available therapies in an eye with a natural lens (phakic eye)		х	12/12/2019	22	Not on Trust formulary for this indication. MREH team confirmed compliance with non-use for this indication (09/12/12). MMC deemed N/A (12/12/19).	
Neratinib for extended adjuvant treatment of hormone receptor-positive, HER2-positive early stage breast cancer after adjuvant trastuzumab (TA612)	20/11/2019	Neratinib— recommended for the extended adjuvant treatment of hormone receptor-positive, human epidermal growth factor receptor 2 (HER2) positive early stage breast cancer in adults who completed adjuvant trastuzumab-based therapy less than 1 year ago only if trastuzumab is the only HER2 directed adjuvant treatment they have had, and; if they had neoadjuvant chemotherapy-based regimens, they still had residual invasive disease in the breast or axilla following the neoadjuvant treatment, and; the company provides neratinib according to the commercial arrangement.		x	12/12/2019	22	Not on Trust formulary. Surgical/ Haematology/Oncology team confirmed eligible patients would be referred to the Christie Hospital (21/11/19). MMC deemed N/A, added to the formulary for this indication, not stocked (12/12/19).	
<b>Rucaparib</b> for maintenance treatment of relapsed platinum-sensitive ovarian, fallopian tube or peritoneal cancer ( <b>TA611</b> )	13/11/2019	Rucaparib – recommended for use within the CDF as an option for maintenance treatment of relapsed platinum-sensitive high-grade epithelial ovarian, fallopian tube or primary peritoneal cancer that has responded to platinum-based chemotherapy in adults, only if the conditions in the managed access agreement for rucaparib are followed.		x	12/12/2019	29	Not on Trust formulary. Haematology/Oncology team confirmed eligible patients are referred to the Christie hospital (13/11/19). MMC deemed N/A (12/12/19)	

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	ence of local fo	ormulary to NICE
ii ,			<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Pentosan polysulfate sodium for treating bladder pain syndrome (TA610)	13/11/2019	Pentosan polysulfate sodium – recommended as an option for treating bladder pain syndrome with glomerulations or Hunner's lesions in adults with urinary urgency and frequency, and moderate to severe pain, only if their condition has not responded to an adequate trial of standard oral treatments; it is not offered in combination with bladder instillations; any previous treatment with bladder instillations was not stopped because of lack of response; it is used in secondary care and the company provides pentosan polysulfate sodium according to the commercial arrangement.	x		12/12/2019	29	Not on Trust formulary. Urology Consultants invited to submit a fast track application. MMC approved & added to the formulary (12/12/19).
Ramucirumab for treating unresectable hepatocellular carcinoma after sorafenib (TA609) (TERMINATED APPRAISAL)	30/10/2019	Ramucirumab – NOT RECOMMENDED for treating unresectable hepatocellular carcinoma in adults who have had sorafenib, when disease has progressed or sorafenib is not tolerated, because Lilly did not provide an evidence submission. The company has confirmed that it does not intend to make a submission for the appraisal because the technology is unlikely to be a cost-effective use of NHS resources.		х	14/11/2019	15	Not on Trust formulary. Terminated appraisal by NICE. MMC deemed N/A (14/11/19).
Ibrutinib with rituximab for treating Waldenstrom's macroglobulinaemia (TA608) (TERMINATED APPRAISAL)	30/10/2019	Ibrutinib with rituximab— NOT RECOMMENDED for treating Waldenstrom's macroglobulinaemia in adults because Janssen did not provide an evidence submission. The company has confirmed that it does not intend to make a submission Because there is unlikely to be sufficient evidence that the technology is a cost-effective use of NHS resources in this population.		x	14/11/2019	15	Not on Trust formulary for this indication. Terminated appraisal by NICE. MMC deemed N/A (14/11/19).
<b>Rivaroxaban</b> for preventing atherothrombotic events in people with coronary or peripheral artery disease ( <b>TA607</b> )	17/10/2019	Rivaroxaban plus aspirin – recommended as an option for preventing atherothrombotic events in adults with CAD or symptomatic PAD who are at high risk of ischaemic events.	x		12/12/2019	56	Not on Trust formulary for this indication. Cardiology/Haematology/Medicine Consultants contacted to review and invited to submit application (18/10/19). Approved clinically by MMC (12/12/19).
Lanadelumab for preventing recurrent attacks of hereditary angioedema (TA606)	16/10/2019	Lanadelumab – recommended as an option for preventing recurrent attacks of hereditary angioedema in people aged 12 and older, only if they are eligible for preventive C1-esterase inhibitor (C1-INH) treatment in line with NHSE commissioning policy and the company provides lanadelumab according to the commercial arrangement.	х		14/11/2019	29	Not on Trust formulary for this indication. Immunology Consultants submitted Fast track application for use in line with NICE; confirmed compliance (18/10/19). MMC approved & added to formulary in line with NICE/NHSE (14/11/19).
Xeomin (botulinum neurotoxin type A) for treating chronic sialorrhoea (TA605)	09/10/2019	Xeomin (botulinum neurotoxin type A)— recommended as an option for treating chronic sialorrhoea caused by neurological conditions in adults. It is recommended only if the company provides it according to the commercial arrangement.	×		12/12/2019	64	Not on Trust formulary for this indication. Medicine & Surgery teams contacted to review and invited to submit application (18/10/19). MMC approved & added to formulary (12/12/19).
Idelalisib for treating refractory follicular lymphoma (TA604)	02/10/2019	Idelalisib— NOT RECOMMENDED for treating follicular lymphoma that has not responded to 2 prior lines of treatment in adults.		x	10/10/2019	8	Not on Trust formulary for this indication. Haematology Consultants confirmed treatment is not used (03/10/19). MMC deemed compliant with non-use (10/10/19).
Lenalidomide with bortezomib and dexamethasone for untreated multiple myeloma (TA603) (TERMINATED APPRAISAL)	25/09/2019	Lenalidomide with bortezomib & dexamethasone— NOT RECOMMENDED for untreated multiple myeloma in adults because Celgene did not provide an evidence submission. The company has confirmed that it does not intend to make a submission for the appraisal because there is unlikely to be sufficient evidence that the technology is a cost-effective use of NHS resources in this population.		х	10/10/2019	15	Not on Trust formulary. Terminated appraisal by NICE. MMC deemed N/A (10/10/19).
Pomalidomide with bortezomib and dexamethasone for treating relapsed or refractory multiple myeloma (TA602) (TERMINATED APPRAISAL)	25/09/2019	Pomalidomide with bortezomib and dexamethasone - NOT RECOMMENDED for treating relapsed or refractory multiple myeloma in adults because Celgene did not provide an evidence submission. The company has confirmed that it does not intend to make a submission for the appraisal because the technology is unlikely to be a cost-effective use of NHS resources.		х	10/10/2019	15	Not on Trust formulary. Terminated appraisal by NICE. MMC deemed N/A (10/10/19).
Bezlotoxumab for preventing recurrent Clostridium difficile infection (TA601) (TERMINATED APPRAISAL)	25/09/2019	Beziotoxumab - NOT RECOMMENDED for preventing recurrent Clostridium difficile infection in adults because Merck Sharp & Dohme did not provide an evidence submission. The company has confirmed that it does not intend to make a submission for the appraisal because the technology is unlikely to be used at this point in the treatment pathway.		х	10/10/2019	15	Not on Trust formulary. Terminated appraisal by NICE. MMC deemed N/A (10/10/19).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	ence of local fo	ormulary to NICE
		, and the second	<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Pembrolizumab with carboplatin and paclitaxel for untreated metastatic squamous non-small-cell lung cancer (TA600)	11/09/2019	Pembrolizumab with carboplatin and paclitaxel— recommended for use within the CDF as an option for untreated metastatic squamous NSCLC in adults only if pembrolizumab is stopped at 2 years of uninterrupted treatment, or earlier if disease progresses, and the company provides pembrolizumab according to the managed access agreement.	х		12/09/2019	1	Not on Trust formulary for this indication. Respiratory and Oncology Consultants submitted fast track application (28/08/19). MMC approved & added to the formulary (12/09/19).
Sodium zirconium cyclosilicate for treating hyperkalaemia (TA599)	04/09/2019	Sodium zirconium cyclosilicate— recommended as an option for treating hyperkalaemia in adults only if used in emergency care for acute life-threatening hyperkalaemia alongside standard care or in outpatient care for people with persistent hyperkalaemia and CKD stage 3b to 5 or heart failure, if they have a confirmed serum potassium level of at least 6.0 mmol/L; are not taking an optimised dosage of reninangiotensin-aldosterone system inhibitor because of hyperkalaemia and; are not on dialysis. Only recommended if the company provides it according to the commercial arrangement.	x		12/09/2019	8	Not on Trust formulary. Renal, Cardiology and Acute Medicine Consultants submitted fast track application (05/09/19). MMC approved & added to the formulary (12/09/19).
Olaparib for maintenance treatment of BRCA mutation-positive advanced ovarian, fallopian tube or peritoneal cancer after response to 1 <sup>st</sup> line platinum-based chemotherapy (TA598)	28/08/2019	Olaparib – recommended for use within the CDF as an option for the maintenance treatment of BRCA mutation positive, advanced (FIGO stages 3 and 4), high-grade epithelial ovarian, fallopian tube or primary peritoneal cancer that has responded to 1 <sup>st</sup> -line platinum-based chemotherapy in adults; only if the conditions in the managed access agreement for olaparib are followed.		х	12/09/2019	15	Not on Trust formulary for this indication. Haematology Oncology Consultants confirmed patients would be referred to Christie Hospital for treatment (28/08/19). MMC deemed N/A, added to the formulary, not stocked (12/09/19).
Dapagliflozin with insulin for treating type 1 diabetes (TA597)	28/08/2019	Dapagliflozin with insulin — recommended as an option for treating type 1 diabetes in adults with a BMI of at least 27kg/m² when insulin alone does not provide adequate glycaemic control despite optimal insulin therapy, only if they are on insulin doses of more than 0.5 units/kg of body weight/day and they have completed a structured education programme that is evidence based, quality assured, delivered by trained educators and includes information about diabetic ketoacidosis and; treatment is started and supervised by a consultant physician specialising in endocrinology and diabetes.	х		14/11/2019	78	Not on Trust formulary for this indication. Diabetes Consultants submitted a fast track application for use in line with NICE (04/11/19). MMC approved and added to the formulary for this indication (14/11/19).
<b>Risankizumab</b> for treating moderate to severe plaque psoriasis ( <b>TA596</b> )	21/08/2019	Risankizumab — recommended as an option for treating plaque psoriasis in adults, only if the disease is severe, as defined by a total Psoriasis Area and Severity Index (PASI) of 10 or more and a Dermatology Life Quality Index (DLQI) of more than 10 and; the disease has not responded to other systemic treatments, including ciclosporin, methotrexate and phototherapy, or these options are contraindicated or not tolerated and; the company provides the drug according to the commercial arrangement.		x	12/09/2019	22	Not on Trust formulary for this indication. TGH is not commissioned for this service (22/08/19). MMC deemed N/A, added to the formulary for this indication, not stocked (12/09/19).
<b>Dacomitinib</b> for untreated EGFR mutation-positive non-small-cell lung cancer ( <b>TA595</b> )	14/08/2019	Dacomitinib – recommended as an option for untreated locally advanced or metastatic epidermal growth factor receptor (EGFR) mutation-positive non-small-cell lung cancer (NSCLC) in adults. It is recommended only if the company provides it according to the commercial arrangement.		х	12/09/2019	29	Not on Trust formulary. Respiratory Consultants confirmed patients would be referred to Christie Hospital for treatment (14/08/19). MMC deemed N/A, added to the formulary, not stocked (12/09/19).
Brentuximab vedotin for untreated advanced Hodgkin lymphoma (TA594) (TERMINATED APPRAISAL)	14/08/2019	Brentuximab vedotin – NOT RECOMMENDED for untreated advanced Hodgkin lymphoma because Takeda did not provide an evidence submission. The company has confirmed that it does not intend to make a submission for the appraisal because it considers that, at this time, there is insufficient evidence to provide a UK submission for this appraisal. The company has confirmed that it does not intend to make a submission for the appraisal until data from a key study in this indication are available in June 2021.		х	12/09/2019	29	Not on Trust formulary for this indication. Terminated appraisal by NICE. MMC deemed N/A, not stocked (12/09/19).
<b>Ribociclib</b> with <b>fulvestrant</b> for treating hormone receptor-positive, HER2-negative, advanced breast cancer ( <b>TA593</b> )	14/08/2019	Ribociclib with fulvestrant – recommended for use within the CDF as an option for treating hormone receptor-positive, human epidermal growth factor receptor 2 (HER2)-negative, locally advanced or metastatic breast cancer in people who have had previous endocrine therapy only if exemestane plus everolimus is the most appropriate alternative to a cyclin-dependent kinase 4 and 6 (CDK 4/6) inhibitor and; the conditions in the MAA for ribociclib with fulvestrant are followed.		х	12/09/2019	29	Not on Trust formulary. Surgical Consultants confirmed patients would be referred to Christie Hospital for treatment (14/08/19). MMC deemed N/A, added to the formulary, not stocked (12/09/19).
Cemiplimab for treating metastatic or locally advanced cutaneous squamous cell carcinoma (TA592)	07/08/2019	Cemiplimab — recommended for use within the CDF as an option for treating locally advanced or metastatic cutaneous squamous cell carcinoma in adults when curative surgery or curative radiotherapy is not appropriate. It is recommended only if the conditions in the MAA are followed.		x	12/09/2019	36	Not on Trust formulary. Head & Neck Consultants confirmed patients would be referred to Christie Hospital for treatment (08/08/19). MMC deemed N/A, added to the formulary, not stocked (12/09/19).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE		ormulary to NICE			
			<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
<b>Letermovir</b> for preventing cytomegalovirus disease after a stem cell transplant ( <b>TA591</b> )	31/07/2019	Letermovir – recommended as an option for preventing cytomegalovirus (CMV) reactivation and disease after an allogeneic haematopoietic stem cell transplant (HSCT) in adults who are seropositive for CMV. It is recommended only if the company provides it according to the commercial arrangement.	х		12/09/2019	43	Not on the Trust formulary for this indication. Haematology team submitted Fast track application for use in line with NICE; confirmed use would be compliant (05/08/19). MMC approved & added to formulary (12/09/19).
Fluocinolone acetonide intravitreal implant for treating recurrent non-infectious uvetitis (TA590)	31/07/2019	Fluocinolone acetonide intravitreal implant – recommended as an option for preventing relapse in recurrent non-infectious uveitis affecting the posterior segment of the eye. It is recommended only if the company provides it according to the commercial arrangement.	х		12/09/2019	43	Not on the Trust formulary for this indication. MREH Uveitis team submitted Fast track application for use in line with NICE; confirmed use would be compliant (06/08/19). MMC approved & added to formulary (12/09/19).
Blinatumomab for treating acute lymphoblastic leukaemia in remission with minimal residual disease activity (TA589)	24/07/2019	Blinatumomab — recommended as an option for treating Philadelphia-chromosome-negative CD19 positive B precursor acute lymphoblastic leukaemia in adults with minimal residual disease (MRD) of at least 0.1%, only if the disease is in first complete remission and the company provides blinatumomab according to the commercial arrangement.	x		12/09/2019	50	Not on the Trust formulary for this indication. Haematology team submitted Fast track application for use in line with NICE; confirmed use would be compliant (30/07/19). MMC approved & added to formulary (12/09/19).
Nusinersen for treating spinal muscular atrophy (TA588)	24/07/2019	Nusinersen — recommended as an option for treating 5q spinal muscular atrophy (SMA) only if people have pre-symptomatic SMA, or SMA types 1, 2 or 3 and the conditions in the managed access agreement are followed.	x		12/09/2019	50	Not on the Trust formulary for this indication. Paediatric Neurology team submitted Fast track application for use in line with NICE (07/08/19). MMC approved & added to formulary (12/09/19).
<b>Lenalidomide</b> plus dexamethasone for previously untreated multiple myeloma (TA587)	26/06/2019	Lenalidomide plus dexamethasone — recommended as an option for previously untreated multiple myeloma in adults who are not eligible for a stem cell transplant, only if thalidomide is contraindicated (including for pre-existing conditions that it may aggravate) or the person cannot tolerate thalidomide, and the company provides lenalidomide according to the commercial arrangement.	x		12/09/2019	78	Not on the Trust formulary for this indication. Haematology team submited Fast track application for use in line with NICE; confirmed compliance (01/07/19). MMC approved & added to formulary (12/09/19).
<b>Lenalidomide</b> plus dexamethasone for multiple myeloma after 1 treatment with bortezomib (TA586)	26/06/2019	<b>Lenalidomide</b> plus <b>dexamethasone</b> – recommended as an option for treating multiple myeloma in adults only if they have had only 1 previous therapy, which included bortezomib, and the company provides it according to the commercial arrangement.	x		12/09/2019	78	Not on the Trust formulary for this indication. Haematology team submitted Fast track application for use in line with NICE; confirmed compliance (01/07/19). MMC deemed compliant with use and added to formulary (12/09/19).
Ocrelizumab for treating primary progressive multiple sclerosis (TA585)	12/06/2019	Ocrelizumab – recommended as an option for treating early primary progressive multiple sclerosis with imaging features characteristic of inflammatory activity in adults. It is recommended only if the company provides it according to the commercial arrangement.		х	11/07/2019	29	Not on the Trust formulary for this indication. Neurology team confirmed patients would be referred for treatment at SRFT (12/06/19). MMC deemed N/A, added to the formulary, not stocked (11/07/19).
Atezolizumab in combination for treating metastatic non-squamous non-small-cell lung cancer (TA584)	05/06/2019	Atezolizumab plus bevacizumab, carboplatin & paclitaxel - recommended as an option for metastatic non-squamous non-small-cell lung cancer (NSCLC) in adults who have not had treatment for their metastatic NSCLC before and whose PD-L1 tumour proportion score is between 0% and 49% or when targeted therapy for epidermal growth factor receptor (EGFR) positive or anaplastic lymphoma kinase (ALK) positive NSCLC has failed.		x	11/07/2019	36	Not on the Trust formulary for this indication. Respiratory team confirmed N/A, patients referred to Christie Hospital for treatment (08/07/19). MMC deemed N/A, added to the formulary for this indication, not stocked (11/07/19).
Ertugliflozin with metformin and a dipeptidyl peptidase-4 inhibitor for treating type 2 diabetes (TA583)	05/06/2019	Ertugliflozin with metformin and a dipeptidyl peptidase 4 (DPP 4) inhibitor –recommended as an option for treating type 2 diabetes in adults when diet and exercise alone do not provide adequate glycaemic control, only if the disease is uncontrolled with metformin and a DPP 4 inhibitor, and a sulfonylurea or pioglitazone is not appropriate.	×		12/09/2019	99	Not on the Trust formulary for this indication. Diabetes team submitted a Fast track application for use in line with NICE and confirmed compliance (29/08/19). MMC approved and added to formulary for this indication (12/09/19).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	ence of local fo	ormulary to NICE
			<b>Yes</b> (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Cabozantinib for previously treated advanced hepatocellular carcinoma (TA582) (TERMINATED APPRAISAL)	24/05/2019	Cabozantinib — NOT RECOMMENDED for previously treated advanced hepatocellular carcinoma because lpsen Ltd did not provide an evidence submission. The company has confirmed that it does not intend to make a submission for the appraisal because there is unlikely to be sufficient evidence that the technology is a cost-effective use of NHS resources in this population		х	13/06/2019	20	Not on Trust formulary for this indication. Terminated appraisal by NICE. MMC deemed N/A, not stocked (13/06/19).
<b>Nivolumab</b> with ipilimumab for untreated advanced renal cell carcinoma ( <b>TA581</b> )	15/05/2019	Nivolumab with ipilimumab — recommended for use within the CDF as an option for adults with untreated advanced renal cell carcinoma that is intermediate- or poor-risk as defined in the International Metastatic Renal Cell Carcinoma Database Consortium criteria. It is recommended only if the conditions in the managed access agreement for nivolumab with ipilimumab are followed.		x	13/06/2019	29	Not on the Trust formulary for this indication. Renal team confirmed not applicable as patients would be referred to Christie (18/05/19).MMC deemed N/A, added to the formulary for this indication, not stocked (13/06/19)
Enzalutamide for hormone-relapsed non-metastatic prostate cancer (TA580)	15/05/2019	Enzalutamide — NOT RECOMMENDED for treating high-risk hormone-relapsed non-metastatic prostate cancer in adults.		x	13/06/2019	29	Not on Trust formulary. Urology Consultants confirmed treatment is not applicable, not used (20/05/19). MMC deemed N/A (13/06/19).
Abemaciclib with fulvestrant for treating hormone receptor-positive, HER2-negative advanced breast cancer after endocrine therapy (TA579)	08/05/2019	Abemaciclib with fulvestrant – recommended for use within the CDF as an option for treating hormone receptor-positive, human epidermal growth factor receptor 2 (HER2) negative locally advanced or metastatic breast cancer in people who have had endocrine therapy only if exemestane plus everolimus would be the most appropriate alternative and; the conditions in the managed access agreement for abemaciclib with fulvestrant are followed.		х	13/06/2019	36	Not on the Trust formulary. Oncology team confirmed patients would be referred to Christie Hospital for treatment (07/05/19). MMC deemed N/A, added to the formulary, not stocked (13/06/19).
<b>Durvalumab</b> for treating locally advanced unresectable non-small-cell lung cancer after platinum-based chemoradiation ( <b>TA578</b> )	01/05/2019	<b>Durvalumab</b> (monotherapy) — recommended for use within the CDF as an option for treating locally advanced unresectable non-small-cell lung cancer (NSCLC) in adults whose tumours express PD L1 on at least 1% of tumour cells and whose disease has not progressed after platinum-based chemoradiation only if they have had concurrent platinum-based chemoradiation; the conditions in the managed access agreement are followed.		х	09/05/2019	8	Not on Trust formulary. Respiratory Consultants confirmed patients would be referred to Christie Hospital for treatment (01/05/19). MMC deemed N/A, added to the formulary, not stocked (09/05/19).
Brentuximab vedotin for treating CD30-positive cutaneous T-cell lymphoma (TA577)	24/04/2019	Brentuximab vedotin — recommended as an option for treating CD30 positive cutaneous T cell lymphoma (CTCL) after at least 1 systemic therapy in adults, only if they have mycosis fungoides stage IIB or over, primary cutaneous anaplastic large cell lymphoma or Sézary syndrome and; the company provides brentuximab vedotin according to the commercial arrangement.		x	09/05/2019	15	Not on the Trust formulary for this indication. Haematology team confirmed not applicable as patients would be referred to Christie/SRFT (26/04/19). MMC deemed N/A, added to the formulary, not stocked (09/05/19).
Bosutinib for untreated chronic myeloid leukaemia (TA576) (TERMINATED APPRAISAL)	17/04/2019	<b>Bosutinib</b> - <b>NOT RECOMMENDED</b> for untreated chronic myeloid leukaemia because Pfizer did not provide an evidence submission. The company has confirmed that it does not intend to make a submission for the appraisal because the technology is unlikely to be used at this point in the treatment pathway.		х	09/05/2019	22	Not on Trust formulary for this indication. Terminated appraisal by NICE. MMC deemed not applicable (09/05/19).
Tildrakizumab for treating moderate to severe plaque psoriasis (TA575)	17/04/2019	Tildrakizumab - recommended as an option for treating plaque psoriasis in adults, only if the disease is severe, as defined by a total Psoriasis Area and Severity Index (PASI) of 10 or more and a Dermatology Life Quality Index (DLQI) of more than 10 and; the disease has not responded to other systemic treatments, including ciclosporin, methotrexate and phototherapy, or these options are contraindicated or not tolerated and; the company provides the drug according to the commercial arrangement.	х		09/05/2019	22	Not on the Trust formulary for this indication. Dermatology team confirmed not applicable as TGH is not commissioned for this service (17/04/19). MMC deemed N/A, added to the formulary for this indication, not stocked (09/05/19).
Certolizumab pegol for treating moderate to severe plaque psoriasis (TA574)	17/04/2019	Certolizumab pegol - recommended as an option for treating plaque psoriasis in adults, only if the disease is severe, as defined by a total Psoriasis Area and Severity Index (PASI) of 10 or more and a Dermatology Life Quality Index (DLQI) of more than 10 and; the disease has not responded to other systemic treatments, including ciclosporin, methotrexate and phototherapy, or these options are contraindicated or not tolerated and; the lowest maintenance dosage of certolizumab pegol is used (200 mg every 2 weeks) after the loading dosage and the company provides the drug according to the commercial arrangement.		x	09/05/2019	22	Not on the Trust formulary for this indication. Dermatology team confirmed not applicable as TGH is not commissioned for this service (17/04/19). MMC deemed N/A, added to the formulary, not stocked (09/05/19).
Daratumumab with bortezomib and dexamethasone for previously treated multiple myeloma (TA573)	10/04/2019	Daratumumab plus bortezomib plus dexamethasone - recommended for use within the CDF as an option for treating relapsed multiple myeloma in people who have had 1 previous treatment. It is recommended only if the conditions in the managed access agreement for daratumumab plus bortezomib plus dexamethasone are followed.	х		11/04/2019	1	Not on the Trust formulary for this indication. Haematology team submitted Fast track application for use in line with NICE and confirmed compliance (26/03/19). MMC deemed compliant with use and added to formulary (11/04/19).
-			22	31			

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	Adherence of local formulary to NICE					
			Yes	N/A	Date of local	Time to	<b>Notes</b> (e.g. rationale, method of making available)	
			(mark 'x' if	(mark 'x' if	decision	implement		
			applicable)	applicable)	(DD/MM/YY)	(days)		
						Average		
			% "Yes"	% "N/A"	_	implement		
			time(days)					
Adherence statistics for 2019-20			42%	58%		34		



This spreadsheet enables self-audit of a medicines formulary for adherence to NICE Technology Appraisals. No copyright is asserted if used for non-commercial purposes within the NHS.

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	rmulary to NICE
J	nereuse	marcated by their	Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	<b>Notes</b> (e.g. rationale, method of making available)
2018-19							
Ertugliflozin as monotherapy or with metformin for treating type 2 diabetes (TA572)	27/03/2019	Ertugliflozin (monotherapy) - recommended as an option for treating type 2 diabetes in adults for whom metformin is contraindicated or not tolerated and when diet and exercise alone do not provide adequate glycaemic control, only if a dipeptidyl peptidase 4 (DPP 4) inhibitor would otherwise be prescribed and a sulfonylurea or pioglitazone is not appropriate.  Ertugliflozin with metformin - recommended as an option for treating type 2 diabetes, only if a sulfonylurea is contraindicated or not tolerated or the person is at significant risk of hypoglycaemia or its consequences.	х		09/05/2019	43	Not on the Trust formulary. Diabetes team submitted Fast track application for use in line with NICE and confirmed compliance (24/04/19). MMC deemed compliant and added to formulary for this indication (09/05/19).
Brigatinib for treating ALK-positive advanced non- small-cell lung cancer after crizotinib (TA571)	20/03/2019	Brigatinib - recommended for treating anaplastic lymphoma kinase (ALK)-positive advanced non-small-cell lung cancer (NSCLC) in adults who have already had crizotinib. It is recommended only if the company provides it according to the commercial arrangement.		х	11/04/2019	22	Not on Trust formulary. Respiratory Consultants confirmed patients would be referred to Christie Hospital for treatment (20/03/19). MMC deemed N/A, added to the formulary for this indication, not stocked (11/04/19).
Pembrolizumab for treating recurrent or metastatic squamous cell carcinoma of the head and neck after platinum-based chemotherapy (TA570) (TERMINATED APPRAISAL)	20/03/2019	Pembrolizumab - NOT RECOMMENDED for treating recurrent or metastatic squamous cell carcinoma of the head and neck after platinum-based chemotherapy because Merck Sharp & Dohme UK Ltd did not provide an evidence submission. The company has confirmed that it does not intend to make a submission for the appraisal because the technology is unlikely to be used at this point in the treatment pathway.		x	11/04/2019	22	Not on Trust formulary for this indication. Terminated appraisal by NICE. MMC deemed compliant (11/04/19).
Pertuzumab for adjuvant treatment of HER2- positive early stage breast cancer ( <b>TA569</b> )	20/03/2019	<b>Pertuzumab</b> with IV <b>trastuzumab</b> & chemotherapy - recommended for the adjuvant treatment of human epidermal growth factor receptor 2 (HER2)-positive early stage breast cancer in adults, only if they have lymph node-positive disease the company provides it according to the commercial arrangement.		х	11/04/2019	22	Not on the Trust formulary for this indication. Oncology team confirmed patients would be referred to Christie Hospital for treatment (21/03/19). MMC deemed N/A, added to the formulary for this indication, not stocked (11/04/19).
Abatacept for treating psoriatic arthritis after DMARDs (TA568) (TERMINATED APPRAISAL)	13/03/2019	Abatacept - NOT RECOMMENDED for treating psoriatic arthritis after disease modifying anti-rheumatic drugs (DMARDs) because Bristol–Myers Squibb Pharmaceuticals Ltd did not provide an evidence submission. The company has confirmed that it does not intend to make a submission for the appraisal because the technology will not be launched in the UK (in this indication).		x	11/04/2019	29	Not on Trust formulary for this indication. Terminated appraisal by NICE. MMC deemed compliant (11/04/19).
Tisagenlecleucel for treating relapsed or refractory diffuse large B-cell lymphoma after 2 or more systemic therapies (TA567)	13/03/2019	<b>Tisagenlecleucel</b> - recommended for use within the Cancer Drugs Fund as an option for treating relapsed or refractory diffuse large B-cell lymphoma in adults after 2 or more systemic therapies, only if the conditions in the managed access agreement are followed.	x		11/04/2019	29	Not on the Trust formulary for this indication. Haematology team submitted Fast track application for use in line with NICE and confirmed compliance (18/03/19). MMC deemed compliant with use and added to formulary for this indication (11/04/19).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	ence of local fo	ormulary to NICE
			Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Cochlear implants for children and adults with severe to profound deafness (replacing TA166) (TA566)	07/03/2019	Unilateral cochlear implantation - recommended as an option for people with severe to profound deafness who do not receive adequate benefit from acoustic hearing aids.  Simultaneous bilateral cochlear implantation - recommended as an option for children & adults who are blind or who have other disabilities that increase their reliance on auditory stimuli as a primary sensory mechanism for spatial awareness with severe to profound deafness who do not receive adequate benefit from	х		14/03/2019	7	No medicines mentioned in the guidance. Otolaryngology Surgeons planning for prospective monitoring of compliance (14/03/19).
Benralizumab for treating severe eosinophilic asthma (TA565)	06/03/2019	<b>Benralizumab</b> (as an add-on therapy) - recommended as an option for treating severe eosinophilic asthma that is inadequately controlled in adults despite maintenance therapy with high-dose inhaled corticosteroids and long-acting beta-agonists as per NICE. Benralizumab is recommended only if the company provides it according to the commercial arrangement.	х		14/03/2019	8	Not on the Trust formulary. Respiratory team (Wyth) submitted Fast track application for use in line with NICE and confirmed compliance (06/03/19). MMC deemed compliant with use and added to formulary for this indication (14/03/19).
Dabrafenib with trametinib for treating advanced metastatic BRAF V600E mutation-positive non-small-cell lung cancer (TA564) (TERMINATED APPRAISAL)	27/02/2019	<b>Dabrafenib</b> with <b>trametinib</b> - <b>NOT RECOMMENDED</b> for treating advanced metastatic BRAF V600E mutation-positive non-small-cell lung cancer as no evidence submission was received from Novartis ( <b>TERMINATED APPRAISAL</b> ).		x	14/03/2019	15	Not on Trust formulary for this indication. Terminated appraisal by NICE. MMC deemed compliant (14/03/19).
Abemaciclib with an aromatase inhibitor for previously untreated, hormone receptor-positive, HER2-negative, locally advanced or metastatic breast cancer (TA563)	27/02/2019	Abemaciclib with an aromatase inhibitor - recommended as an option for treating locally advanced or metastatic, hormone receptor-positive, human epidermal growth factor receptor 2 (HER2)-negative breast cancer as first endocrine-based therapy in adults. Abemaciclib is recommended only if the company provides it according to the commercial arrangement.		х	14/03/2019	15	Not on the Trust formulary. Oncology team confirmed patients would be referred to Christie Hospital for treatment (01/03/19). MMC deemed N/A, added to the formulary for this indication, not stocked (14/03/19).
Encorafenib with binimetinib for unresectable or metastatic BRAF V600 mutation-positive melanoma (TA562)	27/02/2019	<b>Encorafenib</b> with <b>binimetinib</b> - recommended as an option for treating unresectable or metastatic BRAF V600 mutation-positive melanoma in adults. It is recommended only if the company provides encorafenib and binimetinib according to the commercial arrangements.		x	14/03/2019	15	Not on Trust formulary for this indication. Dermatology Consultants confirmed patients would be referred to Christie Hospital for treatment (27/02/19). MMC deemed N/A, added to the formulary for this indication, not stocked (14/03/19).
Venetoclax with rituximab for previously treated chronic lymphocytic leukaemia (TA561)	27/02/2019	<b>Venetoclax</b> with <b>rituximab</b> - recommended as an option for treating chronic lymphocytic leukaemia in adults who have had at least 1 previous therapy. It is recommended only if the company provides it according to the commercial arrangement.	x		14/03/2019	15	Not on the Trust formulary. Haematology team submitted Fast track application for use in line with NICE and confirmed compliance (08/03/19). MMC deemed compliant with use and added to formulary for this indication (14/03/19).
Bevacizumab with carboplatin, gemcitabine and paclitaxel for treating the first recurrence of platinum-sensitive advanced ovarian cancer (TA560) (TERMINATED APPRAISAL)	20/02/2019	Bevacizumab with carboplatin - NOT RECOMMENDED for treating chronic lymphocytic leukaemia because no evidence submission was received from Roche (TERMINATED APPRAISAL).		х	14/03/2019	22	Not on Trust formulary for this indication. Terminated appraisal by NICE. MMC deemed compliant (14/03/19).
Axicabtagene ciloleucel for treating diffuse large B-cell lymphoma and primary mediastinal large B-cell lymphoma after 2 or more systemic therapies (TA559)		Axicabtagene ciloleucel – recommended for use within the CDF as an option for treating relapsed or refractory diffuse large B cell lymphoma or primary mediastinal large B cell lymphoma in adults after 2 or more systemic therapies, only if the conditions in the managed access agreement are followed.	х		14/02/2019	22	Not on the Trust formulary. Haematology team submitted Fast track application for use in line with NICE and confirmed compliance (23/01/19). MMC deemed compliant with use and added to formulary for this indication (14/02/19).
Nivolumab for adjuvant treatment of completely resected melanoma with lymph node involvement or metastatic disease (TA558)	23/01/2019	<b>Nivolumab</b> – recommended for use within the CDF as an option for the adjuvant treatment of completely resected melanoma in adults with lymph node involvement or metastatic disease. It is recommended only if the conditions in the managed access agreement are followed.		x	14/02/2019	22	Not on Trust formulary for this indication. Dermatology Consultants confirmed patients would be referred to Christie Hospital for treatment (24/01/19). MMC deemed N/A, added to the formulary for this indication, not stocked (14/02/19).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			ormulary to NICE		
			Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Pembrolizumab with pemetrexed and platinum chemotherapy for untreated, metastatic, non-squamous non-small-cell lung cancer (TA557)	10/01/2019	Pembrolizumab with pemetrexed & platinum chemotherapy – recommended for use within the CDF as an option for untreated, metastatic, non-squamous non-small-cell lung cancer (NSCLC) in adults whose tumours have no epidermal growth factor receptor (EGFR)- or anaplastic lymphoma kinase (ALK)-positive mutations. It is only recommended if pembrolizumab is stopped at 2 years of uninterrupted treatment or earlier if disease progresses and the company provides pembrolizumab according to the managed access agreement.		x	10/01/2019	0	Not on Trust formulary for this indication. Respiratory Consultants confirmed patients would be referred to Christie Hospital for treatment (10/01/19). MMC deemed N/A, added to the formulary for this indication, not stocked (10/01/19).
Darvadstrocel for treating complex perianal fistulas in Crohn's disease (TA556)	09/01/2019	Darvadstrocel – NOT RECOMMENDED for previously treated complex perianal fistulas in adults with non-active or mildly active luminal Crohn's disease.		х	10/01/2019	1	Not on Trust formulary. Gastroenterology Consultants confirmed treatment is not applicable, not used (09/01/19). MMC deemed compliant with non-use (10/01/19).
Regorafenib for previously treated advanced hepatocellular carcinoma (TA555)	09/01/2019	Regorafenib – recommended as an option for treating advanced unresectable hepatocellular carcinoma in adults who have had sorafenib, only if they have Child–Pugh grade A liver impairment and an Eastern Cooperative Oncology Group (ECOG) performance status of 0 or 1 and the company provides it according to the commercial arrangement.		х	10/01/2019	1	Not on Trust formulary for this indication. Hepatology Consultants confirmed patients would be referred to Christie Hospital for treatment (09/01/19). MMC deemed N/A, added to the formulary for this indication, not stocked (10/01/19).
Tisagenlecleucel for treating relapsed or refractory B-cell acute lymphoblastic leukaemia in people aged up to 25 years (TA554)	21/12/2018	<b>Tisagenlecleucel</b> – recommended for use within the CDF as an option for treating relapsed or refractory B cell acute lymphoblastic leukaemia in people aged up to 25 years, only if the conditions in the managed access agreement are followed.	x		14/02/2019	55	Not on the Trust formulary. Paediatric Haematology team submitted Fast track application for use in line with NICE and confirmed compliance (02/02/19). MMC deemed compliant with use and added to formulary for this indication (14/02/19).
Pembrolizumab for adjuvant treatment of resected melanoma with high risk of recurrence (TA553)	19/12/2018	Pembrolizumab – recommended for use within the CDF as an option for the adjuvant treatment of stage III melanoma with lymph node involvement in adults who have had complete resection. It is recommended only if the conditions in the managed access agreement for pembrolizumab are followed.		x	10/01/2019	22	Not on Trust formulary for this indication. Dermatology Consultants confirmed patients would be referred to Christie or SRFT for treatment (19/12/18). MMC deemed N/A, added to the formulary for this indication, not stocked (10/01/19).
Liposomal cytarabine—daunorubicin for untreated acute myeloid leukaemia (TA552)	19/12/2018	Liposomal cytarabine—daunorubicin — recommended as an option for untreated therapy-related acute myeloid leukaemia or acute myeloid leukaemia with myelodysplasia-related changes in adults. It is recommended only if the company provides it according to the commercial arrangement.	х		13/12/2018	-6	On Trust formulary for this indication (approved 13/12/18 in line with CDF). Haematology Consultants confirmed compliance (19/12/18). MMC deemed compliant with use (10/01/19).
Lenvatinib for untreated advanced hepatocellular carcinoma (TA551)	19/12/2018	<b>Lenvatinib</b> – recommended as an option for untreated, advanced, unresectable hepatocellular carcinoma in adults, only if they have Child–Pugh grade A liver impairment and an Eastern Cooperative Oncology Group (ECOG) performance status of 0 or 1 and; the company provides it according to the commercial arrangement.		х	10/01/2019	22	Not on Trust formulary for this indication. Hepatology Consultants confirmed patients would be referred to Christie for treatment (19/12/18). MMC deemed N/A, added to the formulary, not stocked (10/01/19).
Vandetanib for treating medullary thyroid cancer (TA550)	12/12/2018	Vandetanib – NOT RECOMMENDED for treating aggressive and symptomatic medullary thyroid cancer in adults with unresectable, locally advanced or metastatic disease.		х	10/01/2019	29	Not on Trust formulary. Endocrinology Consultants confirmed treatment is not applicable, not used (13/12/18). MMC deemed compliant with non-use (10/01/19).
Denosumab for preventing skeletal-related events in multiple myeloma (TA549) (TERMINATED APPRAISAL)		<b>Denosumab – NOT RECOMMENDED</b> for preventing skeletal-related events in multiple myeloma because no evidence submission was received from Amgen ( <b>TERMINATED APPRAISAL</b> ).		х	13/12/2018	8	Not on Trust formulary for this indication. Terminated appraisal by NICE. MMC deemed not applicable (13/12/18).
Decitabine for untreated acute myeloid leukaemia (TA548) (TERMINATED APPRAISAL)	05/12/2018	Decitabine – NOT RECOMMENDED for untreated acute myeloid leukaemia because no evidence submission was received from Janssen (TERMINATED APPRAISAL).		х	13/12/2018	8	Not on Trust formulary. Terminated appraisal by NICE. MMC deemed not applicable (13/12/18).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	ormulary to NICE
			Yes (mark 'x' if applicable)	N/A (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Tofacitinib for moderately to severely active ulcerative colitis (TA547)	28/11/2018	<b>Tofacitinib</b> — active ulcerative colitis in adults when conventional therapy or a biological agent cannot be tolerated or the disease has responded inadequately or lost response to treatment. It is recommended only if the company provides tofacitinib with the discount agreed in the commercial arrangement.	x		13/12/2018	15	Not on the Trust formulary for this indication. Gastroenterology Consultants submitted Fast track application for use in line with NICE and confirmed compliance (25/10/18). MMC deemed compliant with use and added to formulary for this indication (13/12/18).
Padeliporfin for untreated localised prostate cancer (TA546)	21/11/2018	Padeliporfin – NOT RECOMMENDED for untreated, unilateral, low-risk prostate cancer in adults.		х	13/12/2018	22	Not on Trust formulary. Urology Consultants confirmed treatment is not applicable, not used (22/11/18). MMC deemed compliant with non-use (13/12/18).
Gemtuzumab ozogamicin for untreated acute myeloid leukaemia (TA545)	14/11/2018	Gemtuzumab ozogamicin with daunorubicin & cytarabine – recommended as an option for untreated de novo CD33-positive acute myeloid leukaemia (AML), except acute promyelocytic leukaemia, in people 15 years and over, only if: they start induction therapy when either the cytogenetic test confirms that the disease has favourable, intermediate or unknown cytogenetics (that is, because the test was unsuccessful) or when their cytogenetic test results are not yet available and; they start consolidation therapy when their cytogenetic test confirms that the disease has favourable, intermediate or unknown cytogenetics (because the test was unsuccessful) and; the company provides gemtuzumab ozogamicin according to the commercial arrangement.	x		13/12/2018	29	Not on the Trust formulary. Haematology team submitted Fast track application for use in line with NICE and confirmed compliance (28/11/18). MMC deemed compliant with use and added to formulary for this indication (13/12/18).
Dabrafenib with trametinib for adjuvant treatment of resected BRAF V600 mutation-positive melanoma (TA544)	17/10/2018	<b>Dabrafenib</b> with <b>trametinib</b> – recommended as an option for the adjuvant treatment of resected stage III BRAF V600 mutation-positive melanoma in adults. It is recommended only if the company provides dabrafenib and trametinib with the discounts agreed in the commercial arrangements.		х	13/12/2018	57	Not on Trust formulary for this indication. Dermatology Team confirmed patients would be referred to Christie for treatment (18/10/18). MMC deemed N/A, added to the formulary, not stocked (13/12/18)
Tofacitinib for treating active psoriatic arthritis after inadequate response to DMARDs ( <b>TA543</b> )	03/10/2018	Tofacitinib with methotrexate – recommended as an option for treating active psoriatic arthritis in adults, only if it is used as per NICE TA199 (recommendations 1.1 and 1.2) or the person has had a TNF-alpha inhibitor but their disease has not responded within the first 12 weeks or has stopped responding after 12 weeks or; TNF alpha inhibitors are contraindicated but would otherwise be considered (as described in NICE TA199. Tofacitinib is only recommended if the company provides it according to the commercial arrangement.	х		11/10/2018	8	Not on the Trust formulary. Rheumatology Consultants submitted Fast track application for use in line with NICE and confirmed compliance (05/10/18). MMC deemed compliant with use and added to formulary for this indication (11/10/18).
Cabozantinib for untreated advanced renal cell carcinoma (TA542)	03/10/2018	<b>Cabozantinib</b> – recommended for adults with untreated advanced renal cell carcinoma that is intermediate or poor risk as defined in the International Metastatic Renal Cell Carcinoma Database Consortium criteria. It is recommended only if the company provides cabozantinib according to the commercial arrangement.		х	11/10/2018	8	Not on Trust formulary for this indication. Renal and Haematology Team confirmed patients would be referred to Christie for treatment (05/10/18). MMC deemed N/A, added to the formulary, not stocked (11/10/18).
Inotuzumab ozogamicin for treating relapsed or refractory B-cell acute lymphoblastic leukaemia (TA541)	19/09/2018	Inotuzumab ozogamicin – recommended as an option for treating relapsed or refractory CD22-positive B-cell precursor acute lymphoblastic leukaemia in adults. People with relapsed or refractory Philadelphia-chromosome-positive disease should have had at least 1 tyrosine kinase inhibitor. Recommended only if the company provides it according to the commercial arrangement.	х		11/10/2018	22	Not on the Trust formulary. Haematology Consultants submitted Fast track application for use in line with NICE and confirmed compliance (04/10/18). MMC deemed compliant with use and added to formulary for this indication (11/10/18).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	ormulary to NICE
		, , ,	Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Pembrolizumab for treating relapsed or refractory classical Hodgkin lymphoma (TA540)	03/09/2018	Pembrolizumab – NOT RECOMMENDED for treating relapsed or refractory classical Hodgkin lymphoma in adults who have had autologous stem cell transplant and brentuximab vedotin.  Pembrolizumab - recommended for use within the CDF as an option for treating relapsed or refractory classical Hodgkin lymphoma in adults who have had brentuximab vedotin and cannot have autologous stem cell transplant, only if: pembrolizumab is stopped after 2 years of treatment or earlier if the person has a stem cell transplant or the disease progresses and the conditions in the managed access agreement for pembrolizumab are followed.	х		13/09/2018	10	Not on the Trust formulary for this indication. Haematology Consultants submitted Fast track application for use in line with CDF and confirmed compliance (05/10/18). MMC deemed compliant with use and added to formulary for this indication (10/10/18).
Lutetium (177Lu) oxodotreotide for treating unresectable or metastatic neuroendocrine tumours ( <b>TA539</b> )	29/08/2018	Lutetium (177Lu) oxodotreotide – recommended as an option for treating unresectable or metastatic, progressive, well-differentiated (grade 1 or grade 2), somatostatin receptor-positive gastroenteropancreatic neuroendocrine tumours (NETs) in adults only if the company provides it according to the commercial arrangement.		х	13/09/2018	15	Not on Trust formulary. Haematology Consultants confirmed patients would be referred to Christie for treatment (30/08/18). MMC deemed N/A, added to the formulary, not stocked (13/09/18).
Dinutuximab beta for treating neuroblastoma (TA538)	22/08/2018	<b>Dinutuximab beta</b> – recommended as an option for treating high-risk neuroblastoma in people aged 12 months and over whose disease has at least partially responded to induction chemotherapy, followed by myeloablative therapy and stem cell transplant, only if they have not already had anti-GD2 immunotherapy and the company provides dinutuximab beta according to the commercial arrangement.	x		13/09/2018	22	On Trust formulary for this indication (01/08/2018). Paediatric Consultants confirmed compliance (22/08/18). MMC deemed compliant with use (13/09/18).
Ixekizumab for treating active psoriatic arthritis after inadequate response to DMARDs (TA537)	08/08/2018	Ixekizumab alone, or with methotrexate – treating active psoriatic arthritis in adults, only if it is used as described in NICE's TA guidance on etanercept, infliximab and adalimumab for the treatment of psoriatic arthritis or; the person has had a TNF-alpha inhibitor but their disease has not responded within the first 12 weeks or has stopped responding after the first 12 weeks or; TNF-alpha inhibitors are contraindicated but would otherwise be considered (as described in NICE's TA guidance on etanercept, infliximab and adalimumab for the treatment of psoriatic arthritis). Ixekizumab is only recommended if the company provides it according to the commercial arrangement	х		13/09/2018	36	Not on Trust formulary for this indication. Rheumatology Consultants submitted Fast track application and confirmed compliance (23/08/18). MMC deemed compliant with use (13/09/18).
Alectinib for untreated ALK-positive advanced non-small-cell lung cancer (TA536)	08/08/2018	Alectinib – kinase (ALK)-positive advanced non-small-cell lung cancer (NSCLC) in adults. It is recommended only if the company provides alectinib according to the commercial arrangement.		x	13/09/2018	36	Not on Trust formulary for this indication. Respiratory Consultants confirmed patients would be referred to Christie for treatment (28/08/18). MMC added to formulary (not stocked) (13/09/18).
Lenvatinib and sorafenib for treating differentiated thyroid cancer after radioactive iodine (TA535)	08/08/2018	Lenvatinib and sorafenib — locally advanced or metastatic differentiated thyroid cancer (papillary, follicular or Hürthle cell) in adults whose disease does not respond to radioactive iodine, only if they have not had a tyrosine kinase inhibitor before or; they have had to stop taking a tyrosine kinase inhibitor within 3 months of starting it because of toxicity (specifically, toxicity that cannot be managed by dose delay or dose modification). Lenvatinib and sorafenib are recommended only if the companies provide them according to the commercial arrangements.		х	13/09/2018	36	Not on Trust formulary for this indication. Head & Neck Consultants confirmed patients would be referred to Christie for treatment (22/08/18). MMC added to formulary (not stocked) (13/09/18).
Dupilumab for treating moderate to severe atopic dermatitis (TA534)	01/08/2018	<b>Dupilumab</b> – recommended as an option for treating moderate to severe atopic dermatitis in adults, only if the disease has not responded to at least 1 other systemic therapy, such as ciclosporin, methotrexate, azathioprine and mycophenolate mofetil, or these are contraindicated or not tolerated; the company provides dupilumab according to the commercial arrangement	x		13/09/2018	43	Not on Trust formulary. Dermatology Consultants submitted Fast track application and confirmed compliance (31/08/18). MMC deemed compliant with use (13/09/18)

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local f	ormulary to NICE
		, , ,	Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Ocrelizumab for treating relapsing—remitting multiple sclerosis (TA533)	25/07/2018	Ocrelizumab – recommended as an option for treating relapsing–remitting multiple sclerosis in adults with active disease defined by clinical or imaging features, only if alemtuzumab is contraindicated or otherwise unsuitable and the company provides ocrelizumab according to the commercial arrangement.		x	09/08/2018	15	Not on Trust formulary for this indication. Neurology team confirmed (25/07/18) that is N/A. All eligible MS patients are referred for treatment of disease modifying drugs via the specialist MS service at SRFT. MMC added to formulary (09/08/18). Not stocked.
Cenegermin for treating neurotrophic keratitis (TA532)	18/07/2018	Cenegermin – NOT RECOMMENDED for treating moderate or severe neurotrophic keratitis in adults.		×	09/08/2018	22	Not on Trust formulary for this indication. MREH Cornea Consultants confirmed treatment is not applicable, not used (19/07/18). MMC deemed compliant with non-use (09/08/18).
Pembrolizumab for untreated PD-L1-positive metastatic non-small-cell lung cancer ( <b>TA531</b> )	18/07/2018	Pembrolizumab — recommended as an option for untreated PD L1-positive metastatic non-small-cell lung cancer (NSCLC) in adults whose tumours express PD L1 (with at least a 50% tumour proportion score) and have no epidermal growth factor receptor- or anaplastic lymphoma kinase-positive mutations, only if pembrolizumab is stopped at 2 years of uninterrupted treatment or earlier in the event of disease progression and the company provides pembrolizumab according to the commercial access agreement.		х	09/08/2018	22	Not on Trust formulary for this indication. Respiratory Consultants confirmed patients would be referred to Christie for treatment (18/07/18). MMC added to formulary (not stocked) (09/08/18).
Nivolumab for treating locally advanced unresectable or metastatic urothelial cancer after platinum-containing chemotherapy (TA530)	04/07/2018	Nivolumab – NOT RECOMMENDED for treating locally advanced unresectable or metastatic urothelial carcinoma in adults who have had platinum-containing therapy.		x	12/07/2018	8	Not on Trust formulary for this indication. Urology Consultants confirmed treatment is not applicable, not used (07/07/18). MMC deemed compliant with non-use (12/07/18).
Crizotinib for treating ROS1-positive advanced non-small-cell lung cancer (TA529)	04/07/2018	<b>Crizotinib</b> – recommended for use within the Cancer Drugs Fund as an option for treating ROS1 positive advanced non-small-cell lung cancer (NSCLC) in adults, only if the conditions in the managed access agreement are followed.		х	12/07/2018	8	Not on Trust formulary for this indication. Respiratory Consultants confirmed patients would be referred to Christie for treatment (09/07/18). MMC added to formulary (not stocked) (12/07/18).
Niraparib for maintenance treatment of relapsed, platinum-sensitive ovarian, fallopian tube and peritoneal cancer (TA528)	04/07/2018	Niraparib – is recommended for use within the CDF as an option for treating relapsed, platinum-sensitive high-grade serous epithelial ovarian, fallopian tube or primary peritoneal cancer that has responded to the most recent course of platinum-based chemotherapy in adults, only if: they have a germline BRCA mutation and have had 2 courses of platinum-based chemotherapy or; they do not have a germline BRCA mutation and have had 2 or more courses of platinum-based chemotherapy and; the conditions in the managed access agreement for niraparib are followed.		х	12/07/2018	8	Not on Trust formulary for this indication. Gynaecology Consultants confirmed patients would be referred to Christie for treatment (12/07/18). MMC added to formulary (not stocked) (12/07/18).
Beta interferons and glatiramer acetate for treating multiple sclerosis (replaces TA32) (TA527)	27/06/2018	Interferon beta 1a – recommended as an option for treating multiple sclerosis (MS), only if the person has relapsing—remitting multiple sclerosis; and the companies provide it according to commercial arrangements.  Interferon beta 1b (Extavia) – recommended as an option for treating MS, only if the person has relapsing—remitting MS and has had 2 or more relapses within the last 2 years or; the person has secondary progressive MS with continuing relapses and; the company provides it according to the commercial arrangement.  Glatiramer acetate – recommended as an option for treating MS, only if the person has relapsing—remitting MS and the company provides it according to the commercial arrangement.  Interferon beta 1b (Betaferon) – NOT RECOMMENDED as an option for treating MS.		x	12/07/2018	15	Not on Trust formulary for this indication. Neurology team confirmed (09/07/18) that is N/A. All eligible MS patients are referred for treatment of disease modifying drugs via the specialist MS service at SRFT. MMC added to formulary (12/07/18). Not stocked.

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	ence of local fo	ormulary to NICE
			Yes (mark 'x' if applicable)	N/A (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Arsenic trioxide for treating acute promyelocytic leukaemia (TA526)	13/06/2018	<b>Arsenic trioxide</b> - recommended as an option for inducing remission and consolidation in acute promyelocytic leukaemia (characterised by the presence of the t[15;17] translocation or the PML/RAR-alpha gene) in adults with: untreated, low-to-intermediate risk disease (defined as a white blood cell count of 10x103 per microlitre or less), when given with all-trans-retinoic acid (ATRA); relapsed or refractory disease, after a retinoid and chemotherapy.	x		21/06/2018	8	On Trust formulary for relapsed APML (14/11/02). Haematology Consultants submitted Fast track application to cover any difference from original application and confirmed compliance (18/05/18). MMC deemed compliant with use (21/06/18).
Atezolizumab for treating locally advanced or metastatic urothelial carcinoma after platinum-containing chemotherapy (TA525)	13/06/2018	<b>Atezolizumab</b> - recommended as an option for treating locally advanced or metastatic urothelial carcinoma in adults who have had platinum-containing chemotherapy, only if: atezolizumab is stopped at 2 years of uninterrupted treatment or earlier if the disease progresses and; the company provides atezolizumab with the discount agreed in the PAS.		x	21/06/2018	8	Not on Trust formulary for this indication. Urology Consultants confirmed patients would be referred to Christie for treatment (15/06/18). MMC added to formulary (not stocked) (21/06/18).
Brentuximab vedotin for treating CD30-positive Hodgkin lymphoma (replaces TA446) ( <b>TA524</b> )	13/06/2018	Brentuximab vedotin - recommended as an option for treating CD30 positive Hodgkin lymphoma in adults with relapsed or refractory disease, only if they have already had autologous stem cell transplant or; they have already had at least 2 previous therapies when autologous stem cell transplant or multi-agent chemotherapy are not suitable and; the company provides brentuximab vedotin	х		14/11/2013	-1672	On the Trust formulary for this indication (14/11/13). Haematology Consultants confirmed compliance (18/05/18). MMC deemed compliant with use (21/06/18).
Midostaurin for untreated acute myeloid leukaemia (TA523)	13/06/2018	<b>Midostaurin</b> - recommended as an option in adults for treating newly diagnosed acute FLT3-mutation-positive myeloid leukaemia with standard daunorubicin and cytarabine as induction therapy, with high-dose cytarabine as consolidation therapy, and alone after complete response as maintenance therapy. It is recommended only if the company provides midostaurin with the discount agreed in the PAS.	х		21/06/2018	8	Not on the Trust formulary. Haematology Consultants submitted Fast track application and confirmed compliance (18/05/18). MMC deemed compliant with use (21/06/18).
Pembrolizumab for untreated locally advanced or metastatic urothelial cancer when cisplatin is unsuitable (TA522)	13/06/2018	Pembrolizumab - recommended for use within the CDF as an option for untreated locally advanced or metastatic urothelial carcinoma in adults when cisplatin-containing chemotherapy is unsuitable, only if pembrolizumab is stopped at 2 years of uninterrupted treatment or earlier if the disease progresses and; the conditions of the managed access agreement for pembrolizumab are followed.		x	21/06/2018	8	Not on Trust formulary for this indication. Urology Consultants confirmed patients would be referred to Christie for treatment (15/06/18). MMC added to formulary (not stocked) (21/06/18).
Guselkumab for treating moderate to severe plaque psoriasis (TA521)	13/06/2018	Guselkumab – recommended as an option for treating plaque psoriasis in adults, only if the disease is severe, as defined by a total Psoriasis Area and Severity Index (PASI) of 10 or more and a Dermatology Life Quality Index (DLQI) of more than 10 and; the disease has not responded to other systemic therapies, including ciclosporin, methotrexate and PUVA (psoralen and long-wave ultraviolet A radiation), or these options are contraindicated or not tolerated and the company provides the drug according to the commercial arrangement.	x		12/07/2018	29	Not on Trust formulary. Dermatology Consultants submitted fast track application in line with (04/07/18). MMC approved for use in line with NICE and added to formulary for this indication (12/07/18).
Atezolizumab for treating locally advanced or metastatic non-small-cell lung cancer after chemotherapy (TA520)	16/05/2018	Atezolizumab – recommended as an option for treating locally advanced or metastatic non-small-cell lung cancer (NSCLC) in adults who have had chemotherapy (and targeted treatment if they have an EGFR- or ALK positive tumour), only if atezolizumab is stopped at 2 years of uninterrupted treatment or earlier if the disease progresses and the company provides atezolizumab with the discount agreed in the PAS.		x	21/06/2018	36	Not on Trust formulary. Respiratory Consultants confirmed that patients would be referred to the Christie hospital (16/05/18). MMC approved for use in line with NICE and added to formulary for this indication (21/06/18). Not stocked
Pembrolizumab for treating locally advanced or metastatic urothelial carcinoma after platinum-containing chemotherapy (TA519)	25/04/2018	Pembrolizumab – recommended for use within the CDF as an option for treating locally advanced or metastatic urothelial carcinoma in adults who have had platinum-containing chemotherapy, only if pembrolizumab is stopped at 2 years of uninterrupted treatment or earlier in the event of disease progression and the conditions in the managed access agreement for pembrolizumab are followed.		х	10/05/2018	15	Not on Trust formulary for this indication. Urology Consultants confirmed patients would be referred to Christie for treatment (25/04/18). MMC added to formulary (not stocked) (10/05/18).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	Adherence of local formulary to NICE					
			Yes (mark 'x' if applicable)	N/A (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)	
Tocilizumab for treating giant cell arteritis ( <b>TA518</b> )  Avelumab for treating metastatic Merkel cell carcinoma ( <b>TA517</b> )	18/04/2018	Tocilizumab when used with a tapering course of glucocorticoids (and when used alone after glucocorticoids) — recommended as an option for treating giant cell arteritis in adults, only if they have relapsing or refractory disease; they have not already had tocilizumab; tocilizumab is stopped after 1 year of uninterrupted treatment at most and the company provides it with the discount agreed in the PAS.  Avelumab — recommended as an option for treating metastatic Merkel cell carcinoma in adults, only if they have had 1 or more lines of chemotherapy for metastatic disease. Recommended for use within the CDF as an option for treating metastatic Merkel cell carcinoma in adults, only if they have not had chemotherapy for metastatic disease and the conditions in the managed access agreement for avelumab are followed.	х	x	10/05/2018	29	Not on Trust formulary. Rheumatology Consultants submitted fast track application for use in line with NICE (25/04/18). MMC approved for use in line with NICE and added to formulary for this indication (10/05/18)  Not on Trust formulary. Dermatology Consultants confirmed that patients would be referred to the Christie Hospital for treatment (30/04/18). MMC approved for use in line with NICE and added to formulary for this indication, not stocked (10/05/18)	
			21	35				
			% "Yes"	% "N/A"	-	Average implement time(days)		
Adherence statistics for 2018-19			38%	63%		-11		



This spreadsheet enables self-audit of a medicines formulary for adherence to NICE Technology Appraisals. No copyright is asserted if used for non-commercial purposes within the NHS.

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	rmulary to NICE
	nereuse	marcated by MCE	Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	<b>Notes</b> (e.g. rationale, method of making available)
2017-18							
Cabozantinib for treating medullary thyroid cancer ( <b>TA516</b> )	28/03/2018	<b>Cabozantinib</b> - recommended as an option for treating progressive medullary thyroid cancer in adults with unresectable, locally advanced or metastatic disease, only if the company provides cabozantinib with the discount agreed in the PAS.	x		08/04/2018		Not on Trust formulary for this indication. Head & Neck surgical / HaemOnc Consultants confirmed that patients would be referred to the Christie Hospital for treatment (28/03/18). MMC approved for use in line with NICE, not stocked (08/04/18).
Eribulin for treating locally advanced or metastatic breast cancer after 1 chemotherapy regimen (replaces TA250) (TA515)	28/03/2018	<b>Eribulin - NOT RECOMMENDED</b> for treating locally advanced or metastatic breast cancer in adults who have had only 1 chemotherapy regimen.		х	08/04/2018	11	Not on Trust formulary for this indication. Haematology/Oncology Consultants confirmed treatment is not applicable, not used (28/03/18). MMC deemed compliant with non-use (08/04/18)
Regorafenib for previously treated advanced hepatocellular carcinoma (TA514)	21/03/2018	Regorafenib - NOT RECOMMENDED for treating advanced unresectable hepatocellular carcinoma in adults who have had sorafenib.		х	08/04/2018		Not on Trust formulary for this indication. Haematology/Oncology and Hepatology Consultants confirmed treatment is not applicable, not used (21/03/18). MMC deemed compliant with non-use (08/04/18).
Obinutuzumab for untreated advanced follicular lymphoma (TA513)		<b>Obinutuzumab</b> - recommended as an option for untreated advanced follicular lymphoma in adults (that is, $1^{\text{st}}$ as induction treatment with chemotherapy, then alone as maintenance therapy), only if the person has a Follicular Lymphoma International Prognostic Index (FLIPI) score of 2 or more and the company provides obinutuzumab with the discount agreed in the PAS.	x		08/04/2018		Not on Trust formulary for this indication. Haematology/Oncology Consultants completed fast track application form (27/03/18). MMC approved for use in line with NICE and added to formulary for this indication (08/04/18).
Tivozanib for treating advanced renal cell carcinoma (TA512)	21/03/2018	<b>Tivozanib</b> - recommended as an option for treating advanced renal cell carcinoma in adults, only if they have had no previous treatment and the company provides tivozanib with the discount agreed in the PAS.	х		08/04/2018		Not on Trust formulary. Haematology, Oncology and Renal Consultants confirmed patients would be referred to Christie hospital for treatment (21/03/18). MMC approved for use in line with NICE, not stocked (08/04/18).
Brodalumab for treating moderate to severe plaque psoriasis ( <b>TA511</b> )	21/03/2018	<b>Brodalumab</b> - recommended as an option for treating plaque psoriasis in adults, only if the disease is severe, as defined by a total Psoriasis Area and Severity Index (PASI) of 10 or more and a Dermatology Life Quality Index (DLQI) of more than 10 and the disease has not responded to other systemic therapies, including ciclosporin, methotrexate and PUVA (psoralen and long-wave ultraviolet A radiation), or these options are contraindicated or not tolerated & the company provides the drug with the discount agreed in the PAS.	x		08/04/2018		Not on Trust formulary. Dermatology / Rheumatology Consultants completed fast track application form (06/04/18). MMC approved for use in line with NICE and added to formulary for this indication (08/04/18).
Daratumumab monotherapy for treating relapsed and refractory multiple myeloma (TA510)	14/03/2018	Daratumumab (monotherapy) - recommended for use within the CDF as an option for treating relapsed and refractory multiple myeloma in adults whose previous therapy included a proteasome inhibitor and an immunomodulator, and whose disease progressed on the last therapy, only if they have daratumumab after 3 previous therapies and the conditions in the managed access agreement are followed.	х		08/02/2018		On the Trust formulary for this indication in line with CDF (08/02/18). Haematology Consultants confirmed compliance (20/03/18). MMC deemed compliant with use (08/04/18).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE		rmulary to NICE			
,.	nercuse	marcated by MCE	Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	<b>Notes</b> (e.g. rationale, method of making available)
Pertuzumab with trastuzumab and docetaxel for treating HER2-positive breast cancer (TA509)	07/03/2018	Pertuzumab in combination with trastuzumab and docetaxel - recommended for treating HER2 positive metastatic or locally recurrent unresectable breast cancer, in adults who have not had previous anti HER2 therapy or chemotherapy for their metastatic disease, only if the company provides pertuzumab within the agreed commercial access arrangement.	x		08/04/2018	32	Not on Trust formulary for this indication. Surgical, SMH and Oncology Consultants confirmed that patients would be referred to the Christie Hospital for treatment (14/03/18). MMC added to the formulary, not stocked (08/04/18).
Autologous chondrocyte implantation using chondrosphere for treating symptomatic articular cartilage defects of the knee (TA508)	07/03/2018	ACI using chondrosphere - recommended as an option for treating symptomatic articular cartilage defects of the femoral condyle and patella of the knee (International Cartilage Repair Society grade III or IV) in adults, only if the person has not had previous surgery to repair articular cartilage defects; there is minimal osteoarthritic damage to the knee (as assessed by clinicians experienced in investigating knee cartilage damage using a validated measure for knee osteoarthritis) and the defect is over 2cm <sup>2</sup> .		x	08/04/2018	32	Not on Trust formulary for this indication. Orthopaedic Surgery Consultants (Central) confirmed eligible patients would be referred to specialist centres for treatment (07/04/18).
Sofosbuvir–velpatasvir–voxilaprevir for treating chronic hepatitis C ( <b>TA507</b> )	21/02/2018	Sofosbuvir–velpatasvir–voxilaprevir - recommended as an option for treating chronic hepatitis C in adults if used as specified and the company provides the drug at the same price or lower than that agreed with the Commercial Medicines Unit.	х		10/05/2018	78	Not on Trust formulary. Hepatology Consultants completed fast track application form (16/04/18). To be approved for use in line with NICE by MMC for this indication (May 2018).
Lesinurad for treating chronic hyperuricaemia in people with gout ( <b>TA506</b> )	07/02/2018	<b>Lesinurad - NOT RECOMMENDED</b> with a xanthine oxidase inhibitor for treating hyperuricaemia in adults with gout whose serum uric acid is above the target level despite an adequate dose of a xanthine oxidase inhibitor alone.		х	08/02/2018	1	Not on Trust formulary. Rheumatology and Urology Consultants confirmed treatment is not applicable, not used (06/02/18). MMC deemed compliant with non-use (08/02/18).
Ixazomib with lenalidomide and dexamethasone for treating relapsed or refractory multiple myeloma ( <b>TA505</b> )	07/02/2018	Ixazomib, with Ienalidomide & dexamethasone - recommended for use within the CDF as an option for treating multiple myeloma in adults only if they have already had 2 or 3 lines of therapy and the conditions in the managed access agreement for ixazomib are followed.	х		08/02/2018	1	Not on Trust formulary. Haematology/Oncology Consultants completed fast track application form (07/02/18). MMC approved for use in line with NICE and added to formulary for this indication (08/02/18).
Pirfenidone for treating idiopathic pulmonary fibrosis (replaces TA282) (TA504)	06/02/2018	<b>Pirfenidone</b> - recommended as an option for treating idiopathic pulmonary fibrosis in adults only if the person has a forced vital capacity (FVC) between 50% and 80% predicted; the company provides pirfenidone with the discount agreed in the PAS and treatment is stopped if there is evidence of disease progression (an absolute decline of 10% or more in predicted FVC within any 12 month period).	х		08/02/2018	2	On Trust formulary for this indication. Repiratory Consultants confirmed patients would be referred for treatment to ILD Clinic at UHSM (08/02/18). MMC approved for use in line with NICE but not stocked (08/02/18).
Fulvestrant for untreated locally advanced or metastatic oestrogen-receptor positive breast cancer (TA503)	31/01/2018	<b>Fulvestrant - NOT RECOMMENDED</b> for treating locally advanced or metastatic oestrogen-receptor positive breast cancer in postmenopausal women who have not had endocrine therapy before.		x	08/02/2018	8	Not on Trust formulary. Surgical, SMH and Oncology Consultants confirmed treatment is not applicable (06/02/18). MMC deemed compliant with non-use (08/02/18).
Ibrutinib for treating relapsed or refractory mantle cell lymphoma ( <b>TA502</b> )	31/01/2018	<b>Ibrutinib</b> - recommended as an option for treating relapsed or refractory mantle cell lymphoma in adults, only if they have had only 1 previous line of therapy and the company provides ibrutinib with the discount agreed in the commercial access agreement with NHS England.	x		08/02/2018	8	On Trust formulary but not for this indication. Haematology/Oncology Consultants completed fast track application form (02/02/18). MMC approved for use in line with NICE and added to formulary for this indication (08/02/18).
Intrabeam radiotherapy system for adjuvant treatment of early breast cancer ( <b>TA501</b> )	31/01/2018	Intrabeam radiotherapy system - <b>NOT RECOMMENDED</b> for routine commissioning for adjuvant treatment of early invasive breast cancer during breast-conserving surgical removal of the tumour.  Intrabeam radiotherapy system - recommended only using machines that are already available and in conjunction with NHSE specified clinical governance, data collection and submission arrangements.		x	08/02/2018		Treatment not currently offered at the Trust. Consultants confirmed patients would be referred elsewhere to Christie for treatment (26/01/18). MMC deemed compliant with use and added to formulary (not stocked) (08/02/18).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE		rmulary to NICE			
,			Yes (mark 'x' if applicable)	N/A (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Ceritinib for untreated ALK-positive non-small-cell lung cancer (TA500)	24/01/2018	<b>Ceritinib</b> - recommended as an option for untreated anaplastic lymphoma kinase (ALK) positive advanced non-small-cell lung cancer in adults, only if the company provides it with the discount agreed in the PAS.	x		08/02/2018	15	Not on Trust formulary for this indication. Respiratory Consultants confirmed patients would be referred to Christie for treatment (26/01/18). MMC deemed compliant with use and added to formulary (not stocked) (08/02/18).
Glecaprevir–pibrentasvir for treating chronic hepatitis C (TA499)	24/01/2018	Glecaprevir–pibrentasvir - recommended as an option for treating chronic hepatitis C in adults, only if the company provides the drug at the same price or lower than that agreed with the Commercial Medicines Unit.	х		08/02/2018	15	On the Trust formulary for this indication in line with NHSE (10/08/17). Hepatology Consultants confirmed compliance (25/01/18). MMC deemed compliant with use (08/02/18).
Lenvatinib with everolimus for previously treated advanced renal cell carcinoma (TA498)	24/01/2018	<b>Lenvatinib</b> plus everolimus - recommended as an option for treating advanced renal cell carcinoma in adults who have had 1 previous vascular endothelial growth factor (VEGF)-targeted therapy, only if their Eastern Cooperative Oncology Group (ECOG) performance status score is 0 or 1 and the company provides lenvatinib with the discount agreed in the PAS.	х		08/02/2018	15	Not on Trust formulary. Renal Consultants confirmed patients would be referred to the Christie Hospital for treatment (24/01/18). MMC added to formulary (not stocked) (08/02/18).
Golimumab for treating non-radiographic axial spondyloarthritis ( <b>TA497</b> )	10/01/2018	<b>Golimumab</b> - recommended as an option for treating severe non-radiographic axial spondyloarthritis in adults whose disease has responded inadequately to, or who cannot tolerate, nonsteroidal anti-inflammatory drugs.	х		08/02/2018	29	Not on Trust formulary for this indication. Rheumatology Consultants completed fast track application (11/01/18). MMC approved for use in line with NICE (08/02/18).
Ribociclib with an aromatase inhibitor for previously untreated, hormone receptor-positive, HER2-negative, locally advanced or metastatic breast cancer (TA496)	20/12/2017	Ribociclib with an aromatase inhibitor - recommended as an option for treating hormone receptor-positive, human epidermal growth factor receptor 2 negative, locally advanced or metastatic breast cancer as initial endocrine-based therapy in adults. Recommended only if the company provides it with the discount agreed in the PAS.	x		11/01/2018	22	Not on Trust formulary. Surgical and Oncology SMH Consultants confirmed that patients would be referred to Christie or UHSM for treatment. MMC approved for use in line with NICE, not stocked (11/01/18).
Palbociclib with an aromatase inhibitor for previously untreated, hormone receptor-positive, HER2-negative, locally advanced or metastatic breast cancer (TA495)	20/12/2017	Palbociclib with an aromatase inhibitor - recommended as an option for treating hormone receptor-positive, human epidermal growth factor receptor 2-negative, locally advanced or metastatic breast cancer as initial endocrine-based therapy in adults. Recommended only if the company provides it with the discount agreed in the PAS.	x		11/01/2018	22	Not on Trust formulary. Surgical and Oncology SMH Consultants confirmed that patients would be referred to Christie or UHSM for treatment. MMC approved for use in line with NICE, not stocked (11/01/18).
Naltrexone-bupropion for managing overweight and obesity in adults ( <b>TA494</b> )	12/12/2017	Naltrexone—bupropion - NOT RECOMMENDED for managing overweight and obesity in adults alongside a reduced-calorie diet and increased physical activity.		х	14/12/2017	2	Not on Trust formulary. Not approved by NICE. MMC deemed compliant with non-use (14/12/17).
Cladribine tablets for treating relapsing–remitting multiple sclerosis ( <b>TA493</b> )	06/12/2017	Cladribine (tablets) - recommended as an option for treating highly active multiple sclerosis in adults, only if the person has rapidly evolving severe relapsing—remitting multiple sclerosis, that is, at least 2 relapses in the previous year and at least 1 T1 gadolinium-enhancing lesion at baseline MRI or; relapsing—remitting multiple sclerosis that has responded inadequately to treatment with disease-modifying therapy, defined as 1 relapse in the previous year and MRI evidence of disease activity.	х		14/12/2017	8	Not on Trust formulary for this indication. Neurology Consultants confirmed patients would be referred to Salford Royal Hospital where all treatment initiated (06/12/17). MMC added to formulary (not stocked) (14/12/17).
Atezolizumab for untreated locally advanced or metastatic urothelial cancer when cisplatin is unsuitable (TA492)	06/12/2017	Atezolizumab - recommended for use within the Cancer Drugs Fund as an option for untreated locally advanced or metastatic urothelial carcinoma in adults, for whom cisplatin-based chemotherapy is unsuitable, only if the conditions of the managed access agreement for atezolizumab are followed.	х		14/12/2017	8	Not on Trust formulary for this indication. Urology Consultants confirmed patients would be referred to Christie for treatment (12/12/17). MMC added to formulary (not stocked) (14/12/17).
Ibrutinib for treating Waldenstrom's macroglobulinaemia (TA491)	22/11/2017	<b>Ibrutinib</b> - recommended for use in the Cancer Drugs Fund as an option for treating Waldenstrom's macroglobulinaemia in adults who have had at least 1 prior therapy, only if the conditions in the managed access agreement for ibrutinib are followed.	х		09/11/2017	-13	On the Trust formulary for this indication in line with CDF (09/11/17). Haematology Consultants confirmed compliance (22/11/17). MMC deemed compliant with use (14/12/17).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			rmulary to NICE		
	Nereuse	marcated by MCL	Yes (mark 'x' if applicable)	N/A (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Nivolumab for treating squamous cell carcinoma of the head and neck after platinumbased chemotherapy (TA490)	22/11/2017	<b>Nivolumab</b> - recommended for use within the CDF as an option for treating squamous cell carcinoma of the head and neck in adults whose disease has progressed on platinum-based chemotherapy, only if the disease has progressed within 6 months of having chemotherapy; nivolumab is stopped at 2 years of uninterrupted treatment, or earlier in the event of disease progression and the conditions in the managed access agreement are followed.	х		14/12/2017	22	Not on Trust formulary for this indication. Head & Neck Consultants confirmed patients would be referred to Christie for treatment (01/12/17). MMC added to formulary (not stocked) (14/12/17).
Vismodegib for treating basal cell carcinoma (TA489)	22/11/2017	Vismodegib - NOT RECOMMENDED for treating symptomatic metastatic basal cell carcinoma, or locally advanced basal cell carcinoma that is inappropriate for surgery or radiotherapy, in adults.		х	14/12/2017	22	Not on the Trust formulary. Dermatology Consultants confirmed compliance (22/11/17). MMC deemed compliant with use (14/12/17)
Regorafenib for previously treated unresectable or metastatic gastrointestinal stromal tumours (TA488)	15/11/2017	Regorafenib - recommended as an option for treating unresectable or metastatic gastrointestinal stromal tumours in adults whose disease has progressed on, or who are intolerant to, prior treatment with imatinib and sunitinib, only if their Eastern Cooperative Oncology Group (ECOG) performance status is 0 to 1 and the company provides regorafenib with the discount agreed in the PAS.	x		14/12/2017	29	Not on Trust formulary for this indication. Gastro and Surgical Consultants confirmed patients would be referred to Christie for treatment (16/11/17). MMC added to formulary (not stocked) (14/12/17).
Venetoclax for treating chronic lymphocytic leukaemia (TA487)	08/11/2017	Venetoclax - recommended for use within the CDF, as an option for treating chronic lymphocytic leukaemia, that is, in adults:  • with a 17p deletion or TP53 mutation and when a B-cell receptor pathway inhibitor is unsuitable, or whose disease has progressed after a B-cell receptor pathway inhibitor or  • without a 17p deletion or TP53 mutation, and whose disease has progressed after both chemo immunotherapy and a B-cell receptor pathway inhibitor and • only if the conditions in the managed access agreement are followed.	x		14/12/2017	36	Not on Trust formulary. Haematology Consultants submitted fast track application (13/11/17) for review at MMC (14/12/17).
Aflibercept for treating choroidal neovascularisation ( <b>TA486</b> )	01/11/2017	Aflibercept - recommended as an option for treating visual impairment because of myopic choroidal neovascularisation in adults, only if the company provides aflibercept with the discount agreed in the PAS.	х		11/01/2018		Not on Trust formulary for this indication. Ophthalmology Consultants submitted fast track application (08/01/18) and confirmed compliance MMC approved for use in line with NICE (11/01/18).
Sarilumab for moderate to severe rheumatoid arthritis (TA485)	01/11/2017	Sarilumab, with methotrexate - recommended as an option for treating active RA in adults whose disease has responded inadequately to intensive therapy with a combination of conventional disease-modifying antirheumatic drugs (DMARDs)  Sarilumab, with methotrexate - recommended as an option for treating active RA in adults whose disease has responded inadequately to or who cannot have other DMARDs, including at least 1 biological DMARD.  Sarilumab, with methotrexate - recommended as an option for treating active RA in adults whose disease has responded inadequately to rituximab and at least 1 biological DMARD  Sarilumab (monotherapy) - recommended for people who cannot take methotrexate because it is contraindicated or because of intolerance, when the criteria above are met.	x		09/11/2017	8	Not on Trust formulary. Rheumatology Consultants submitted fast track application (02/11/17). MMC approved in line with NICE for this indication and added to the formulary (09/11/17).
Nivolumab for previously treated non- squamous non-small-cell lung cancer ( <b>TA484</b> )	01/11/2017	<b>Nivolumab</b> - recommended for use within the CDF as an option for treating locally advanced or metastatic non-squamous non-small-cell lung cancer in adults after chemotherapy.	х		09/11/2017		Not on Trust formulary for this indication. Respiratory Consultants confirmed patients would be referred to Christie for treatment (06/11/17). MMC deemed compliant with use and added to formulary (not stocked) (09/11/17).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	ence of local fo	rmulary to NICE
			Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	<b>Notes</b> (e.g. rationale, method of making available)
Nivolumab for previously treated squamous non-small-cell lung cancer (TA483)	01/11/2017	Nivolumab - recommended for use within the CDF as an option for treating locally advanced or metastatic squamous NSCLC in adults after chemotherapy.	х		09/11/2017	8	Not on Trust formulary for this indication. Respiratory Consultants confirmed patients would be referred to Christie for treatment (06/11/17). MMC deemed compliant with use and added to formulary (not stocked) (09/11/17).
Immunosuppressive therapy for kidney transplant in children and young people (replaces TA99) (TA482)	11/10/2017	Basiliximab; Immediate-release tacrolimus; Mycophenolate mofetil - as part of an immunosuppressive regimen - recommended as options to prevent organ rejection in children and young people having a kidney transplant.  Rabbit anti-human thymocyte immunoglobulin; prolonged-release tacrolimus; mycophenolate sodium; sirolimus; everolimus & belatacept - NOT RECOMMENDED as initial treatments to prevent organ rejection in children and young people having a kidney transplant.	х		12/10/2017	1	Basiliximab, immediate-release tacrolimus, mycophenolate mofetil on Trust formulary for this indication. Paediatric Renal Transplant Consultants confirmed compliance (26/10/17). MMC approved in line with NICE for this indication and added to the formulary (09/11/17).
Immunosuppressive therapy for kidney transplant in adults (replaces TA85) ( <b>TA481</b> )	11/10/2017	Basiliximab; Immediate-release tacrolimus; Mycophenolate mofetil - as part of an immunosuppressive regimen - recommended as options to prevent organ rejection in adults having a kidney transplant.  Rabbit anti-human thymocyte immunoglobulin; prolonged-release tacrolimus; mycophenolate sodium; sirolimus; everolimus & belatacept - NOT RECOMMENDED as initial treatments to prevent organ rejection in adults having a kidney transplant.	х		09/11/2017	29	Basiliximab, immediate-release tacrolimus, mycophenolate mofetil on Trust formulary for this indication. Renal Transplant team confirmed compliance (02/11/17). MMC deemed compliant with use (09/11/17)
Tofacitinib for moderate to severe rheumatoid arthritis (TA480)	11/10/2017	Tofacitinib, with methotrexate - recommended as an option for treating active RA in adults whose disease has responded inadequately to intensive therapy with a combination of conventional disease-modifying anti-rheumatic drugs (DMARDs).  Tofacitinib, with methotrexate - recommended as an option for treating active RA in adults whose disease has responded inadequately to, or who cannot have, other DMARDs, including at least 1 biological DMARD.  Tofacitinib (monotherapy) - can be used for adults who cannot take methotrexate because it is contraindicated or because of intolerance, when the criteria above are met.	х		09/11/2017	29	Not on Trust formulary. Rheumatology Consultants submitted fast track application (12/10/17). MMC approved in line with NICE for this indication and added to the formulary (09/11/17).
Reslizumab for treating severe eosinophilic asthma ( <b>TA479</b> )	04/10/2017	Reslizumab as an add-on therapy - recommended as an option for the treatment of severe eosinophilic asthma that is inadequately controlled in adults despite maintenance therapy with high-dose inhaled corticosteroids plus another drug, only if the blood eosinophil count has been recorded as 400 cells per microlitre or more; the person has had 3 or more severe asthma exacerbations needing systemic corticosteroids in the past 12 months.	х		09/11/2017	36	Not on the Trust formulary. Respiratory Consultants (Central & Trafford) deemed not applicable. UHSM submitted fast track application (17/10/17) for use by Complex Asthma clinic at Wythenshawe and confirmed use would be compliant with NICE. MMC approved in line with NICE for this indication and added to the formulary (09/11/17).
Brentuximab vedotin for treating relapsed or refractory systemic anaplastic large cell lymphoma (TA478)	04/10/2017	<b>Brentuximab vedotin</b> - recommended as an option for treating relapsed or refractory systemic anaplastic large cell lymphoma in adults, only if they have an Eastern Cooperative Oncology Group (ECOG) performance status of 0 or 1 and the company provides the medicine according to the commercial access agreement with NHS England.	х		12/10/2017	8	Not on Trust formulary for this indication. Haematology/Oncology Consultants completed fast track application form (04/10/17). MMC approved for use in line with NICE and added to formulary (12/10/17).
Autologous chondrocyte implantation for treating symptomatic articular cartilage defects of the knee (TA477)	04/10/2017	Autologous chondrocyte implantation (ACI) - recommended as an option for treating symptomatic articular cartilage defects of the knee, only if the person has not had previous surgery to repair articular cartilage defects; there is minimal osteoarthritic damage to the knee (as assessed by clinicians experienced in investigating knee cartilage damage using a validated measure for knee osteoarthritis); the defect is over 2cm² and the procedure is done at a tertiary referral centre.		х	12/10/2017	8	Not on Trust formulary for this indication. Orthopaedic Surgery Consultants (Central) confirmed that eligible patients would be referred to other specialist centres for treatment (07/10/17).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	rmulary to NICE
,	nereuse	marcated by their	Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	<b>Notes</b> (e.g. rationale, method of making available)
Paclitaxel as albumin-bound nanoparticles with gemcitabine for untreated metastatic pancreatic cancer (replaces TA360) (TA476)	06/09/2017	Paclitaxel (nab paclitaxel) with gemcitabine - recommended as an option for untreated metastatic adenocarcinoma of the pancreas in adults, only if other combination chemotherapies are unsuitable and they would otherwise have gemcitabine monotherapy and the company provides nab paclitaxel with the discount agreed in the PAS.	x		14/09/2017	8	Not on Trust formulary for this indication. Hepatobiliary Consultants confirmed that patients would be referred to the Christie to receive this treatment (06/09/17). MMC approved for addition to the formulary not stocked (14/09/17).
Dimethyl fumarate for treating moderate to severe plaque psoriasis ( <b>TA475</b> )	06/09/2017	Dimethyl fumarate - recommended as an option for treating plaque psoriasis in adults, only if the disease is severe, as defined by a total Psoriasis Area and Severity Index (PASI) of 10 or more and a Dermatology Life Quality Index (DLQI) of more than 10 and has not responded to other systemic therapies, including, ciclosporin, methotrexate and PUVA (psoralen and long-wave ultraviolet A radiation), or these options are contraindicated or not tolerated.	x		14/09/2017	8	Not on Trust formulary for this indication. Dermatology Consultants submitted a fast track application (11/09/17). MMC approved for addition to the formulary in line with NICE (14/09/17).
Sorafenib for treating advanced hepatocellular carcinoma (replaces TA189) ( <b>TA474</b> )	06/09/2017	<b>Sorafenib</b> - recommended as an option for treating advanced hepatocellular carcinoma only for people with Child-Pugh grade A liver impairment, only if the company provides sorafenib within the agreed commercial access arrangement.	х		14/09/2017	8	Not on Trust formulary for this indication. Hepatology Consultants confirmed that patients would be referred to the Christie to receive this treatment (13/09/17). MMC approved for addition to the formulary not stocked (14/09/17).
Cetuximab for treating recurrent or metastatic squamous cell cancer of the head and neck (replaces TA172) (TA473)	31/08/2017	<b>Cetuximab</b> in combination with <b>platinum-based chemotherapy</b> - recommended as an option for treating recurrent or metastatic squamous cell cancer of the head and neck in adults only if the cancer started in the oral cavity and when the company provides the drug in line with the commercial access agreement with NHS England.	x		14/09/2017	14	Not on Trust formulary for this indication. Head and Neck Consultants confirmed that patients would be referred to the Christie to receive this treatment (05/09/17). MMC approved for addition to the formulary not stocked (14/09/17).
Obinutuzumab with bendamustine for treating follicular lymphoma refractory to rituximab (TA472)	30/08/2017	Obinutuzumab in combination with bendamustine followed by obinutuzumab maintenance - recommended for use within the CDF as an option for treating adults with follicular lymphoma that did not respond or progressed during or up to 6 months after treatment with rituximab or a rituximab-containing regimen, only if the conditions in the managed access agreement for obinutuzumab are followed.	~		14/09/2017	15	Not on Trust formulary for this indication. Haematology Consultants submitted fast track application (05/09/17). MMC approved and deemed compliant with use and added to formulary (14/09/17).
Eluxadoline for treating irritable bowel syndrome with diarrhoea (TA471)	30/08/2017	<b>Eluxadoline</b> - recommended as an option for treating irritable bowel syndrome with diarrhoea in adults, only if the condition has not responded to other pharmacological treatments (for example, antimotility agents, antispasmodics, tricyclic antidepressants) or pharmacological treatments are contraindicated or not tolerated, and it is started in secondary care.	x		12/10/2017	43	Not on Trust formulary for this indication. Fast track application submitted (14/09/17). Approved by MMC for addition to the formulary and use in line with NICE (12/10/17).
Ofatumumab with chemotherapy for treating chronic lymphocytic leukaemia (TA470) (TERMINATED APPRAISAL)	23/08/2017	Ofatumumab with chemotherapy - NOT RECOMMENDED for treating chronic lymphocytic leukaemia because no evidence submission was received from Novartis Pharmaceuticals UK (TERMINATED APPRAISAL).		х	14/09/2017	22	Not on Trust formulary for this indication. Terminated appraisal by NICE. MMC deemed compliant (14/09/17).
Idelalisib with ofatumumab for treating chronic lymphocytic leukaemia (TA469) (TERMINATED APPRAISAL)	23/08/2017	Idelalisib with ofatumumab - NOT RECOMMENDED for treating chronic lymphocytic leukaemia because no evidence submission was received from Gilead Sciences (TERMINATED APPRAISAL).		х	14/09/2017	22	Not on Trust formulary for this indication. Terminated appraisal by NICE. MMC deemed compliant (14/09/17).
Methylnaltrexone bromide for treating opioid- induced constipation (TA468) (TERMINATED APPRAISAL)	23/08/2017	Methylnaltrexone bromide - NOT RECOMMENDED for treating opioid-induced constipation because no evidence submission was received from Swedish Orphan Biovitrum Ltd (TERMINATED APPRAISAL).		х	14/09/2017	22	Not on Trust formulary for this indication. Terminated appraisal by NICE. MMC deemed compliant (14/09/17).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	is medical condition, as Adherence of local formulary to					
			Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	<b>Notes</b> (e.g. rationale, method of making available)	
Holoclar for treating limbal stem cell deficiency after eye burns ( <b>TA467</b> )	16/08/2017	Holoclar - recommended as an option in people with moderate to severe limbal stem cell deficiency after eye burns; recommended in people with moderate to severe limbal stem cell deficiency after eye burns for treating both eyes only in the context of research and when there is not enough tissue for a conjunctival limbal autograft.	х		14/09/2017	29	Not on Trust formulary for this indication. MREH Consultants confirmed patients would be referred to the Queen Victoria Hospital in East Grinstead for treatment (17/08/17). MMC approved in line with NICE for this indication and added to the formulary not stocked (14/09/17).	
Baricitinib for moderate to severe rheumatoid arthritis (TA466)	09/08/2017	Baricitinib with methotrexate - recommended as an option for treating active rheumatoid arthritis in adults whose disease has responded inadequately to intensive therapy with a combination of conventional disease-modifying antirheumatic drugs (DMARDs)  Baricitinib with methotrexate - recommended as an option for treating active rheumatoid arthritis in adults whose disease has responded inadequately to or who cannot have other DMARDs, including at least 1 biological DMARD, only if disease is severe (a DAS28 of more than 5.1) and they cannot have rituximab.  Baricitinib (monotherapy) - for people who cannot take methotrexate because it is contraindicated or because of intolerance	х		14/09/2017	36	Not on Trust formulary for this indication. Rheumatology Consultants submitted fast track application (10/08/17). MMC approved in line with NICE for this indication and added to the formulary (14/09/17).	
Olaratumab in combination with doxorubicin for treating advanced soft tissue sarcoma (TA465)	09/08/2017	Olaratumab in combination with doxorubicin - recommended for use within the Cancer Drugs Fund as an option for advanced soft tissue sarcoma in adults, only if they have not had any previous systemic chemotherapy for advanced soft tissue sarcoma, they cannot have curative treatment with surgery or their disease does not respond to radiotherapy.	x		14/09/2017	36	Not on Trust formulary for this indication. Haematology/Oncology Consultants confirmed patients would be referred to the Christie Hospital for treatment (09/08/17). MMC added to formulary (not stocked) (14/09/17).	
Bisphosphonates for treating osteoporosis (TA464)	09/08/2017	Oral Alendronic acid, ibandronic acid & risedronate sodium - recommended as options for treating osteoporosis in adults.  IV ibandronic acid & zoledronic acid - recommended as options for treating osteoporosis in adults	х		14/09/2017	36	Oral bisphosphonates currently on the formulary for this indication (Jun-00; Mar-07 & Jun-00 respectively). Fast track application submitted to cover IV ibandronic & zoledronic acid (01/09/17) MMC approved in line with NICE for this indication and added to the formulary (14/09/17).	
Cabozantinib for previously treated advanced renal cell carcinoma (TA463)	09/08/2017	Cabozantinib - recommended as an option for treating advanced renal cell carcinoma in adults after vascular endothelial growth factor (VEGF)-targeted therapy.	х		14/09/2017	36	Not on Trust formulary for this indication. Renal Consultants confirmed patients would be referred to the Christie Hospital for treatment (09/08/17). MMC added to formulary (not stocked) (14/09/17).	
Nivolumab for treating relapsed or refractory classical Hodgkin lymphoma (TA462)	26/07/2017	<b>Nivolumab</b> - recommended as an option for treating relapsed or refractory classical Hodgkin lymphoma in adults after autologous stem cell transplant and treatment with brentuximab vedotin.	х		13/07/2017	-13	On Trust formulary for this indication (13/07/17) in line with its addition to the CDF for relapsed hodgkin lymphoma in patients who have undergone HSCT and also failed brentuximab. The Haematology team confirmed use is already in line with NICE (28/07/17). MMC deemed compliant with use (10/08/17).	
Roflumilast for treating chronic obstructive pulmonary disease (replaces TA244) ( <b>TA461</b> )	26/07/2017	<b>Roflumilast</b> (as an add-on to bronchodilator therapy) - recommended as an option for treating severe chronic obstructive pulmonary disease in adults with chronic bronchitis.	х		14/09/2017	50	On formulary in line with TA244 for adults with severe COPD. This replaces TA244 as an add-on to bronchodilator therapy. Respiratory Consultants submitted fast track application (14/08/17) and confirmed use would be compliant with NICE. MMC approved in line with NICE for this indication and added to the formulary (14/09/17).	

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE		rmulary to NICE			
	7.0.0.0		Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Adalimumab and dexamethasone for treating non-infectious uveitis ( <b>TA460</b> )	26/07/2017	Adalimumab - recommended as an option for treating non-infectious uveitis in the posterior segment of the eye in adults with inadequate response to corticosteroids.  Dexamethasone (intravitreal implant) - recommended as an option for treating non-infectious uveitis in the posterior segment of the eye in adults.	x		14/09/2017	50	Adalimumab added to Trust formulary for this indication (Mar-13). MMC application for dexamethasone submitted in Mar-17, decision to wait for NICE guidance to be released. MREH Consultants submitted fast track application (23/08/17) and confirmed use would be compliant with NICE. MMC approved in line with NICE for this indication and added to the formulary (14/09/17).
Collagenase clostridium histolyticum for treating Dupuytren's contracture ( <b>TA459</b> )	26/07/2017	Collagenase clostridium histolyticum (CCH) - recommended as an option for treating Dupuytren's contracture with a palpable cord in adults.	х		10/08/2017	15	Not on the Trust formulary. Orthopaedic Surgery Consultants submitted fast track application (09/08/17) and confirmed use would be compliant with NICE. MMC approved in line with NICE for this indication and added to the formulary (10/08/17).
Trastuzumab emtansine for treating HER2- positive advanced breast cancer after trastuzumab and a taxane ( <b>TA458</b> )	19/07/2017	<b>Trastuzumab emtansine</b> - recommended as an option for treating human epidermal growth factor receptor 2 (HER2) positive, unresectable, locally advanced or metastatic breast cancer in adults who previously received trastuzumab and a taxane, separately or in combination. Patients should have either received prior therapy for locally advanced or metastatic disease or developed disease recurrence during or within 6 months of completing adjuvant therapy.	х		10/08/2017	22	Not on Trust formulary for this indication. Surgical & Haematology/Oncology Consultants confirmed patients would be referred to either UHSM or the Christie hospitals for treatment (19/07/17). MMC added to formulary. Not stocked for this indication (10/08/17).
Carfilzomib for previously treated multiple myeloma ( <b>TA457</b> )	19/07/2017	Carfilzomib with dexamethasone - recommended as an option for treating multiple myeloma in adults, only if they have had only 1 previous therapy, which did not include bortezomib.	x		13/07/2017	-6	On Trust formulary for this indication for CDF (13/07/17). Haematology Consultants confirmed compliance (19/07/17). MMC deemed compliant with use (10/08/17).
Ustekinumab for moderately to severely active Crohn's disease after previous treatment (TA456)	12/07/2017	Ustekinumab - recommended as an option for treating moderately to severely active Crohn's disease, that is, for adults who have had an inadequate response with, lost response to, or were intolerant to either conventional therapy or a TNF alpha inhibitor or have medical contraindications to such therapies.	х		10/08/2017	29	Not on Trust formulary. Fast track application submitted (17/07/17). Rheumatology Consultants confirmed compliance (17/07/17). MMC approved in line with NICE for this indication and added to the formulary (10/08/17).
Adalimumab, etanercept and ustekinumab for treating plaque psoriasis in children and young people (TA455)	12/07/2017	Adalimumab - recommended as an option for treating plaque psoriasis in children and young people aged 4 years or older.  Etanercept - recommended as an option for treating plaque psoriasis in children and young people aged 6 years or older.  Ustekinumab - recommended as an option for treating plaque psoriasis in children and young people aged 12 years or older.	х		18/07/2017	6	Not on Trust formulary for this indication. Paediatric Dermatology Consultants confirmed patients would be referred to SRFT for treatment (18/07/17). MMC added to formulary (not stocked for this indication) (10/08/17).
Daratumumab with lenalidomide and dexamethasone for treating relapsed or refractory multiple myeloma (TA454) (TERMINATED APPRAISAL)	05/07/2017	Daratumumab, with lenalidomide & dexamethasone - NOT RECOMMENDED for treating relapsed or refractory multiple myeloma because no evidence submission was received from Janssen-Cilag (TERMINATED APPRAISAL).		х	13/07/2017	8	Not on Trust formulary for this indication. Terminated appraisal by NICE. MMC deemed compliant (13/07/17).
Bortezomib for treating multiple myeloma after second or subsequent relapse (TA453) (TERMINATED APPRAISAL)	05/07/2017	<b>Bortezomib - NOT RECOMMENDED</b> for treating multiple myeloma after second or subsequent relapse because no evidence submission was received from Janssen–Cilag <b>(TERMINATED APPRAISAL)</b> .		х	13/07/2017	8	Not on Trust formulary for this indication. Terminated appraisal by NICE. MMC deemed compliant (13/07/17).
Ibrutinib for untreated chronic lymphocytic leukaemia without a 17p deletion or TP53 mutation (TA452) (TERMINATED APPRAISAL)	05/07/2017	<b>Ibrutinib - NOT RECOMMENDED</b> for untreated chronic lymphocytic leukaemia without a 17p deletion or TP53 mutation because no evidence submission was received from Janssen–Cilag (TERMINATED APPRAISAL).		х	13/07/2017	8	Not on Trust formulary for this indication. Terminated appraisal by NICE. MMC deemed compliant (13/07/17).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	ition, as Adherence of local formulary to NICE					
			Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)	
Ponatinib for treating chronic myeloid leukaemia and acute lymphoblastic leukaemia (TA451)	28/06/2017	Ponatinib - recommended as an option for treating chronic, accelerated or blast phase chronic myeloid leukaemia in adults when the disease is resistant to dasatinib or nilotinib or; they cannot tolerate dasatinib or nilotinib and for whom subsequent treatment with imatinib is not clinically appropriate or; the T315I gene mutation is present.  Ponatinib - recommended as an option for treating Philadelphia-chromosome-positive acute lymphoblastic leukaemia in adults when the disease is resistant to dasatinib or; they cannot tolerate dasatinib and for whom subsequent treatment with imatinib is not clinically appropriate or; the T315I gene mutation is present.	x		13/07/2017		Not on Trust formulary. Fast track application submitted (30/06/17). Haematology/Oncology Consultants confirmed use would be compliant with NICE (30/06/17). MMC approved in line with NICE for this indication and added to the formulary (13/07/17).	
Blinatumomab for previously treated Philadelphia-chromosome-negative acute lymphoblastic leukaemia (TA450)	28/06/2017	Blinatumomab - recommended as an option for treating Philadelphia- chromosome-negative relapsed or refractory precursor B-cell acute lymphoblastic leukaemia in adults.	x		13/07/2017		Not on Trust formulary. Fast track application submitted (30/06/17). Haematology/Oncology Consultants confirmed compliance (30/06/17). MMC approved in line with NICE for this indication and added to the formulary (13/07/17).	
Everolimus and sunitinib for treating unresectable or metastatic neuroendocrine tumours in people with progressive disease (TA449)	28/06/2017	Everolimus and sunitinib - recommended as options for treating well- or moderately differentiated unresectable or metastatic neuroendocrine tumours (NETs) of pancreatic origin in adults with progressive disease.  Everolimus - recommended as an option for treating well-differentiated (grade 1 or grade 2) non-functional unresectable or metastatic NETs of gastrointestinal or lung origin in adults with progressive disease.	x		13/07/2017		Not on Trust formulary for this indication. Haematology/Oncology Consultants confirmed patients would be referred to the Christie hospital for treatment (12/07/17). MMC approved in line with NICE for this indication and added to the formulary. Not stocked for this indication (13/07/17).	
Etelcalcetide for treating secondary hyperparathyroidism (TA448)	28/06/2017	<b>Etelcalcetide</b> - recommended as an option for treating $2^{RY}$ hyperparathyroidism in adults with chronic kidney disease on haemodialysis, only if treatment with a calcimimetic is indicated but cinacalcet is not suitable.	x		13/07/2017	15	Not on Trust formulary. Fast track application submitted (12/07/17). Renal Medicines Consultants confirmed compliance (12/07/17). MMC approved in line with NICE for this indication and added to the formulary (13/07/17).	
Pembrolizumab for untreated PD-L1-positive metastatic non-small-cell lung cancer ( <b>TA447</b> )	28/06/2017	Pembrolizumab - recommended for use within the CDF as an option for untreated PD-L1-positive metastatic non-small-cell lung cancer in adults, only if their tumours express PD-L1 with at least a 50% tumour proportion score and have no epidermal growth factor receptor- or anaplastic lymphoma kinase-positive mutations; pembrolizumab is stopped at 2 years of uninterrupted treatment and no documented disease progression.	х		13/07/2017	15	Not on Trust formulary for this indication. Respiratory Consultants confirmed patients would be referred to Christie for treatment (28/06/17). MMC deemed compliant with use and added to formulary (not stocked) (13/07/17).	
Brentuximab vedotin for treating CD30- positive Hodgkin lymphoma ( <b>TA446</b> )	14/06/2017	<b>Brentuximab vedotin</b> - recommended as an option for treating CD30 positive Hodgkin lymphoma in adults, only if they have relapsed or refractory disease after autologous stem cell transplant.	х		14/11/2013		On Trust formulary for this indication (14/11/13). Haematology Consultants confirmed compliance (15/06/17). MMC deemed compliant with use (13/07/17).	
Certolizumab pegol and secukinumab for treating active psoriatic arthritis after inadequate response to DMARDs ( <b>TA445</b> )	24/05/2017	<b>Certolizumab pegol &amp; Secukinumab</b> (alone, or in combination with methotrexate) - recommended as an option for treating active psoriatic arthritis in adults.	х		08/06/2017		Not on Trust formulary for this indication. Rheumatology Consultants submitted fast track application (25/05/17). MMC deemed compliant with use, added to formulary (08/06/17).	
Afatinib for treating advanced squamous non- small-cell lung cancer after platinum-based chemotherapy (TA444) (TERMINATED APPRAISAL)	24/05/2017	Afatinib - NOT RECOMMENDED for treating locally advanced or metastatic squamous non-small-cell lung cancer after platinum-based chemotherapy because no evidence submission was received from Boehringer Ingelheim (TERMINATED APPRAISAL).		x	08/06/2017		Not on Trust formulary for this indication. Terminated appraisal by NICE. MMC deemed compliant with non-use (08/06/17).	

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	indicated by NICE	Adherence of local formulary to NICE							
			Yes (mark 'x' if applicable)	N/A (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)			
Obeticholic acid for treating primary biliary cholangitis ( <b>TA443</b> )	26/04/2017	Obeticholic acid - recommended as an option for treating primary biliary cholangitis in combination with ursodeoxycholic acid for people whose disease has responded inadequately to ursodeoxycholic acid or as monotherapy for people who cannot tolerate ursodeoxycholic acid.	х		08/06/2017	43	Not on Trust formulary. Hepatobiliary Consultants submitted MMC application (18/05/17). MMC deemed compliant with use and added to formulary (08/06/17).			
Ixekizumab for treating moderate to severe plaque psoriasis (TA442)	26/04/2017	Ixekizumab - recommended as an option for treating plaque psoriasis in adults, only if: the disease is severe, as defined by a total Psoriasis Area and Severity Index (PASI) of 10 or more and a Dermatology Life Quality Index (DLQI) of more than 10; the disease has not responded to standard systemic therapies, for example, ciclosporin, methotrexate and PUVA (psoralen and long-wave ultraviolet radiation), or these treatments are contraindicated or the person cannot tolerate them.	x		11/05/2017	15	Not on Trust formulary. Fast track application submitted (27/04/17). Dermatology Consultants confirmed compliance (04/05/17). MMC approved in line with NICE for this indication and added to the formulary (11/05/17).			
Daclizumab for treating relapsing–remitting multiple sclerosis ( <b>TA441</b> )	26/04/2017	Daclizumab - recommended as an option for treating multiple sclerosis in adults, only if: the person has active relapsing–remitting multiple sclerosis previously treated with disease-modifying therapy, or rapidly evolving severe relapsing–remitting multiple sclerosis (that is, at least 2 relapses in the previous year and at least 1 gadolinium-enhancing lesion at baseline MRI) and alemtuzumab is contraindicated or otherwise unsuitable.	х		11/05/2017		Not on Trust formulary for this indication. Neurology Consultants confirmed patients would be referred to specialist MS clinic at SRFT for treatment (08/05/17). MMC added to formulary (11/05/17).			
Pegylated liposomal irinotecan for treating pancreatic cancer after gemcitabine ( <b>TA440</b> )	26/04/2017	Pegylated liposomal <b>irinotecan</b> in combination with <b>5-fluorouracil</b> and <b>leucovorin-NOT RECOMMENDED</b> for treating metastatic adenocarcinoma of the pancreas in adults whose disease has progressed after gemcitabine-based therapy.		x	11/05/2017	15	Not on Trust formulary. Consultants confirmed compliance (non-use) (04/05/16). MMC deemed compliant with non-use (11/05/17).			
			60	17						
			% "Yes"	% "N/A"	-	Average implement time(days)				
Adherence statistics for 2017-18			78%	22%		1				



**NHS Foundation Trust** 

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	rmulary to NICE
	neieuse		Yes (mark 'x' if applicable)	N/A (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
2016-17							
Cetuximab and panitumumab for previously untreated metastatic colorectal cancer (replaces TA176; partially updates TA240) (TA439)	29/03/2017	Cetuximab - recommended as an option for previously untreated epidermal growth factor receptor (EGFR)-expressing, RAS wild-type metastatic colorectal cancer in adults in combination with:  5 fluorouracil, folinic acid and oxaliplatin (FOLFOX) or 5 fluorouracil, folinic acid and irinotecan (FOLFIRI).  Panitumumab - recommended as an option for previously untreated RAS wild-type metastatic colorectal cancer in adults in combination with FOLFOX or FOLFIRI.	x		13/04/2017		Not on Trust formulary for this indication. Colorectal Consultants confirmed that patients are referred to the Christie hospital for treatment (02/04/17). MMC added to formulary (13/04/17).
Alectinib for previously treated anaplastic lymphoma kinase-positive advanced non-small-cell lung cancer (TA438) (TERMINATED APPRAISAL)	29/03/2017	Alectinib - NOT RECOMMENDED for anaplastic lymphoma kinase-positive advanced non-small-cell lung cancer previously treated with crizotinib as no evidence submission was received from Roche (TERMINATED APPRAISAL)		х	13/04/2017	15	Not on Trust formulary. Not recommended by NICE MMC deemed compliant with non-use (13/04/17).
Ibrutinib with bendamustine and rituximab for treating relapsed or refractory chronic lymphocytic leukaemia after systemic therapy (TA437) (TERMINATED APPRAISAL)	22/03/2017	Ibrutinib with bendamustine and rituximab - NOT RECOMMENDED for treating relapsed or refractory chronic lymphocytic leukaemia after systemic therapy because no evidence submission was received from Janssen-Cilag (TERMINATED APPRAISAL)		х	13/04/2017	22	Not on Trust formulary for this indication. Not recommended by NICE MMC deemed compliant with non-use (13/04/17).
Bevacizumab for treating EGFR mutation- positive non-small-cell lung cancer (TA436) (TERMINATED APPRAISAL)	22/03/2017	Bevacizumab - NOT RECOMMENDED for treating epidermal growth factor receptor (EGFR) mutation-positive non-small-cell lung cancer as no evidence submission was received from Roche (TERMINATED APPRAISAL)		х	13/04/2017	22	Not on Trust formulary for this indication. Not recommended by NICE MMC deemed compliant with non-use (13/04/17).
Tenofovir alafenamide for treating chronic hepatitis B (TA435) (TERMINATED APPRAISAL)	22/03/2017	<b>Tenofovir alafenamide - NOT RECOMMENDED</b> for treating chronic hepatitis B as no evidence submission received from Gilead <b>(TERMINATED APPRAISAL)</b>		х	13/04/2017	22	Not on Trust formulary for this indication. Not recommended by NICE MMC deemed compliant with non-use (13/04/17).
Elotuzumab for previously treated multiple myeloma (TA434) (TERMINATED APPRAISAL)	22/03/2017	Elotuzumab - <b>NOT RECOMMENDED</b> for treatment of multiple myeloma as no evidence submission received from Bristol–Myers Squibb <b>(TERMINATED APPRAISAL)</b> .		х	13/04/2017	22	Not on Trust formulary. Not recommended by NICE MMC deemed compliant with non-use (13/04/17).
Apremilast for treating active psoriatic arthritis (TA433)	22/02/2017	Apremilast alone or in combination with DMARDs -recommended as an option for treating active psoriatic arthritis in adults.	х		09/03/2017		Not on Trust formulary for this indication. Rheumatology Consultants submitted fast track application and confirmed compliance (22/02/17). MMC added to formulary (09/03/17).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	Adherence of local formulary to NICE					
			Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	<b>Notes</b> (e.g. rationale, method of making available)	
Everolimus for advanced renal cell carcinoma after previous treatment (TA432)	22/02/2017	<b>Everolimus</b> - recommended as an option for treating advanced renal cell carcinoma that has progressed during or after treatment with vascular endothelial growth factor targeted therapy.	х		09/03/2017	15	Not on Trust formulary for this indication. Renal Consultants confirmed as not applicable, patients with solid tumours are referred to the Christie Hospital (01/03/17). MMC added to formulary (09/03/17).	
Mepolizumab for treating severe refractory eosinophilic asthma (TA431)	25/01/2017	<b>Mepolizumab</b> - as an add-on to optimised standard therapy, is recommended as an option for treating severe refractory eosinophilic asthma in adults.	х		09/03/2017	43	Not on Trust formulary. Respiratory Consultants submitted fast track application and confirmed compliance (27/02/17). MMC added to formulary (09/03/17).	
Sofosbuvir–velpatasvir for treating chronic hepatitis C ( <b>TA430</b> )	25/01/2017	Sofosbuvir-velpatasvir - recommended as an option for treating chronic hepatitis C in adults.	х		09/02/2017	15	Not on Trust formulary. Gastroenterology Consultants submitted fast track application and confirmed compliance (25/01/17). MMC added to formulary (09/02/17).	
Ibrutinib for previously treated chronic lymphocytic leukaemia and untreated chronic lymphocytic leukaemia with 17p deletion or TP53 mutation (TA429)	25/01/2017	Ibrutinib - recommended as an option for treating chronic lymphocytic leukaemia and untreated chronic lymphocytic leukaemia with 17p deletion or TP53 mutation in adults.	х		09/02/2017	15	On Trust formulary (11/06/15). Haematology Consultants confirmed compliance (13/01/17). MMC deemed compliant with use (09/02/17).	
Pembrolizumab for treating PD-L1-positive non- small-cell lung cancer after chemotherapy (TA428)	11/01/2017	Pembrolizumab - recommended as an option for treating locally advanced or metastatic PD L1 positive NSCLC in adults who have had at least one chemotherapy (and targeted treatment if they have an epidermal growth factor receptor [EGFR]- or anaplastic lymphoma kinase [ALK] positive tumour)	x		12/01/2017	1	Not on Trust formulary. Respiratory Consultants confirmed patients would be referred to Christie for treatment (11/01/17). MMC deemed compliant with use and added to formulary (not stocked) (09/02/17)	
Pomalidomide for multiple myeloma previously treated with lenalidomide and bortezomib (replaces TA338) (TA427)	11/01/2017	Pomalidomide in combination with low dose dexamethasone - recommended as an option for treating multiple myeloma in adults at third or subsequent relapse; that is, after 3 previous treatments including both lenalidomide and bortezomib.	x		09/02/2017	29	On Trust formulary (14/11/13). Haematology Consultants confirmed compliance (13/01/17). MMC deemed compliant with use (09/02/17).	
Dasatinib, nilotinib and imatinib for untreated chronic myeloid leukaemia (replaces TA251 partially replaces TA70) (TA426)	22/12/2016	Imatinib - recommended as an option for untreated, chronic-phase Philadelphia-chromosome-positive chronic myeloid leukaemia (CML) in adults.  Dasatinib and nilotinib - recommended as options for untreated chronic-phase Philadelphia-chromosome-positive CML in adults. The drugs are recommended only if the companies provide them with the discounts agreed in the relevant PAS.	х		12/01/2017	21	On Trust formulary (06/2007; 01/2009 & 11/2001 respectively). Haematology Consultants confirmed compliance (23/12/17). MMC deemed compliant with use (12/01/17).	

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	Adherence of local formulary to NICE						
			Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	<b>Notes</b> (e.g. rationale, method of making available)		
Dasatinib, nilotinib and high-dose imatinib for treating imatinib-resistant or intolerant chronic myeloid leukaemia (replaces TA241 partially replaces TA70) (TA425)	22/12/2016	Dasatinib and nilotinib - recommended as options for treating only chronic- or accelerated-phase Philadelphia-chromosome-positive chronic myeloid leukaemia (CML) in adults, if they cannot have imatinib, or their disease is imatinib-resistant and the companies provide the drugs with the discounts agreed in the relevant PAS.  High-dose imatinib (600 mg in the chronic phase or 800 mg in the accelerated and blast-crisis phases) - NOT RECOMMENDED for treating Philadelphia-chromosome-positive CML in adults whose disease is imatinib-resistant.	х		12/01/2017		On Trust formulary (06/2007; 01/2009 & 11/2001 respectively). Haematology Consultants confirmed compliance (23/12/17). MMC deemed compliant with use (12/01/17).		
Pertuzumab for the neoadjuvant treatment of HER2-positive breast cancer (TA424)	22/12/2016	Pertuzumab in combination with trastuzumab and chemotherapy - recommended as an option for the neoadjuvant treatment of adults with human epidermal growth factor receptor 2 (HER2) positive breast cancer; that is, in patients with HER2-positive, locally advanced, inflammatory or early-stage breast cancer at high risk of recurrence. Only recommended if the company provides pertuzumab with the discount agreed in the PAS.	х		12/01/2017		Not on Trust formulary. Oncology Consultants confirmed patients would be referred to UHSM or Christie for treatment (22/12/16). MMC deemed compliant with use and added to formulary (not stocked) (12/01/17).		
Eribulin for treating locally advanced or metastatic breast cancer after 2 or more chemotherapy regimens (TA423)	22/12/2016	<b>Eribulin</b> - recommended as an option for treating locally advanced or metastatic breast cancer in adults, only when it has progressed after at least 2 chemotherapy regimens (which may include an anthracycline or a taxane, and capecitabine AND the company provides eribulin with the discount agreed in the PAS.	x		12/01/2017		Not on Trust formulary. Oncology Consultants confirmed patients would be referred to UHSM or Christie for treatment (22/12/16). MMC deemed compliant with use and added to formulary (not stocked) (12/01/17).		
Crizotinib for previously treated anaplastic lymphoma kinase-positive advanced non-small-cell lung cancer (TA422)	22/12/2016	<b>Crizotinib</b> - recommended as an option for previously treated anaplastic lymphoma kinase-positive advanced non-small-cell lung cancer in adults. Only recommended if the company provides it with the discount agreed in the PAS.	х		12/01/2017		Not on Trust formulary for this indication. Respiratory Consultants confirmed patients would be referred to Christie for treatment (05/01/17). MMC deemed compliant with use and added to formulary (not stocked) (12/01/17).		
Everolimus with exemestane for treating advanced breast cancer after endocrine therapy (TA421)	22/12/2016	<b>Everolimus</b> , in combination with <b>exemestane</b> - recommended as an option for treating advanced human epidermal growth factor receptor 2 (HER2)-negative, hormone-receptor-positive breast cancer in postmenopausal women without symptomatic visceral disease that has recurred or progressed after a non-steroidal aromatase inhibitor. Only recommended if the company provides it with the discount agreed in the PAS.	x		12/01/2017		Not on Trust formulary. Oncology Consultants confirmed patients would be referred to UHSM or Christie for treatment (22/12/16). MMC deemed compliant with use and added to formulary (not stocked) (12/01/17).		
Ticagrelor for preventing atherothrombotic events after myocardial infarction ( <b>TA420</b> )	14/12/2016	<b>Ticagrelor</b> - in combination with <b>aspirin</b> - <b>r</b> ecommended as an option for preventing atherothrombotic events in adults who had a myocardial infarction and who are at high risk of a further event. Treatment should be stopped when clinically indicated or at a maximum of 3 years.	х		09/02/2017		Not on Trust formulary for this indication. Cardiology Consultants submitted fast track application and confirmed compliance (??/??/17). MMC added to formulary (09/02/17).		

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	Adherence of local formulary to NICE						
" T	10.00		Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	<b>Notes</b> (e.g. rationale, method of making available)		
Apremilast for treating moderate to severe plaque psoriasis (replaces TA368) (TA419)	23/11/2016	Apremilast - recommended as an option for treating chronic plaque psoriasis in adults whose disease has not responded to other systemic therapies, including ciclosporin, methotrexate and PUVA (psoralen and ultraviolet A light), or when these treatments are contraindicated or not tolerated.	x		08/12/2016	15	Not on Trust formulary. Dermatology Consultants submitted fast track application and confirmed compliance (07/12/16). MMC approved and added to formulary (08/12/16).		
Dapagliflozin in triple therapy for treating type 2 diabetes (TA418)	23/11/2016	Dapagliflozin (triple therapy) - recommended as an option for treating type 2 diabetes in adults, only in combination with metformin and a sulfonylurea.	х		08/12/2016	15	Not on Trust formulary for this indication. Diabetes Consultants submitted fast track application and confirmed compliance (08/12/16). MMC added to formulary (08/12/16).		
Nivolumab for previously treated advanced renal cell carcinoma (TA417)	23/11/2016	Nivolumab - recommended as an option for previously treated advanced renal cell carcinoma in adults.	x		08/12/2016	15	Not on Trust formulary for this indication. Renal Medicine Consultants confirmed patients would be referred to Christie for treatment (23/11/16). MMC deemed compliant with use and added to formulary (not stocked) (08/12/16).		
Osimertinib for treating locally advanced or metastatic EGFR T790M mutation-positive non-small-cell lung cancer (TA416)	26/10/2016	Osimertinib - recommended as an option for use within the CDF for treating locally advanced or metastatic epidermal growth factor receptor (EGFR) T790M mutation-positive NSCLC in adults whose disease has progressed.	x		10/11/2016	15	Not on Trust formulary. Respiratory Consultants confirmed patients would be referred to Christie for treatment (01/11/16). MMC deemed compliant with use and added to formulary (not stocked) (10/11/16).		
Certolizumab pegol for treating rheumatoid arthritis after inadequate response to a TNF-alpha inhibitor (TA415)	26/10/2016	Certolizumab pegol with methotrexate - recommended as an option for treating active rheumatoid arthritis in adults whose disease has responded inadequately to or who can't tolerate other DMARDs including at least 1 TNF alpha inhibitor.	х		10/11/2016	15	Not on Trust formulary for this indication. Rheumatology Consultants submitted fast track application and confirmed compliance (03/11/16). MMC added to formulary (10/11/16).		
Cobimetinib in combination with vemurafenib for treating unresectable or metastatic BRAF V600 mutation-positive melanoma ( <b>TA414</b> )	26/10/2016	Cobimetinib - in combination with vemurafenib - NOT RECOMMENDED for treating unresectable or metastatic melanoma in adults with a BRAF V600 mutation.		х	01/11/2016	6	Not on Trust formulary. Dermatology Consultants confirmed compliance with non-use (01/11/16). MMC deemed compliant with non-use (10/11/16)		
Elbasvir–grazoprevir for treating chronic hepatitis C (TA413)	26/10/2016	Elbasvir–grazoprevir - recommended as an option for treating genotype 1 or 4 chronic hepatitis C in adults	х		10/11/2016	15	Not on Trust formulary. Gastroenterology Consultants submitted fast track application and confirmed compliance (08/11/16). MMC added to formulary (10/11/16).		
Radium-223 dichloride for treating hormone- relapsed prostate cancer with bone metastases (TA412)	28/09/2016	Radium 223 dichloride - recommended as an option for treating hormone-relapsed prostate cancer, symptomatic bone metastases and no known visceral metastases in adults, only if:  • they have already had docetaxel or • docetaxel is contraindicated or is not suitable.	x		08/10/2016	10	Not on Trust formulary. Urology Consultants confirmed patients would be referred to Christie for treatment (08/10/16). MMC deemed compliant with use and added to formulary (not stocked) (13/10/16).		
Necitumumab for untreated advanced or metastatic squamous non-small-cell lung cancer (TA411)	28/09/2016	Necitumumab - in combination with gemcitabine & cisplatin - NOT RECOMMENDED for adults with locally advanced or metastatic epidermal growth factor receptor (EGFR)-expressing squamous non-small-cell lung cancer that hasn't been treated with chemotherapy.		х	30/09/2016	2	Not on Trust formulary. Respiratory Consultants confirmed compliance with non-use (30/09/16). MMC deemed compliant with non-use (13/10/16).		

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release		Adherence of local formulary to NICE						
			Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)		
Talimogene laherparepvec for treating unresectable metastatic melanoma ( <b>TA410</b> )	28/09/2016	Talimogene laherparepvec - recommended, in adults, as an option for treating unresectable, regionally or distantly metastatic (Stage IIIB, IIIC or IVM1a) melanoma that has not spread to bone, brain, lung or other internal organs.	x		08/10/2016	10	Not on Trust formulary. Dermatology Consultants confirmed patients would be referred to Christie for treatment (08/10/16). MMC deemed compliant with use and added to formulary (13/10/16).		
Aflibercept for treating visual impairment caused by macular oedema after branch retinal vein occlusion (TA409)	28/09/2016	Aflibercept - recommended as an option for treating visual impairment in adults caused by macular oedema after branch retinal vein occlusion.	х		10/10/2016	12	Not on Trust formulary for this indication. MREH Consultants submitted application & confirmed compliance with NICE (10/10/16). MMC deemed compliant with use and added to formulary (13/10/16).		
Pegaspargase for treating acute lymphoblastic leukaemia (TA408)	28/09/2016	Pegaspargase - as part of antineoplastic combination therapy, is recommended as an option for treating acute lymphoblastic leukaemia in children, young people and adults only when they have untreated newly diagnosed disease.	x		11/10/2016	13	On Trust formulary for this indication. Haematology Consultants confirmed compliance (11/10/16). MMC deemed compliant with use (13/10/16)		
Secukinumab for active ankylosing spondylitis after treatment with non-steroidal anti-inflammatory drugs or TNF-alpha inhibitors (TA407)	28/09/2016	<b>Secukinumab</b> - recommended as an option for treating active ankylosing spondylitis in adults whose disease has responded inadequately to conventional therapy (non-steroidal anti-inflammatory drugs or TNF alpha inhibitors).	x		12/10/2016	14	Not on Trust formulary. Rheumatology Consultants confirmed (12/10/16). MMC deemed compliant with use and added to formulary (13/10/16).		
Crizotinib for untreated anaplastic lymphoma kinase-positive advanced non-small-cell lung cancer (TA406)	28/09/2016	Crizotinib - recommended as an option for untreated anaplastic lymphoma kinase-positive advanced non-small-cell lung cancer in adults.		х	28/09/2016	0	Not on Trust formulary. Respiratory Consultants confirmed patients would be referred to Christie for treatment (28/09/16). MMC deemed compliant with use and added to formulary (13/10/16)		
Trifluridine—tipiracil for previously treated metastatic colorectal cancer (TA405)	24/08/2016	Trifluridine—tipiracil - recommended as an option for treating metastatic colorectal cancer, in adults who have had previous treatment with available therapies including fluoropyrimidine-, oxaliplatin- or irinotecan-based chemotherapies, anti-vascular endothelial growth factor (VEGF) agents and anti-epidermal growth factor receptor (EGFR) agents, or when these therapies are not suitable.		х	01/09/2016	8	Not on Trust formulary. Colorectal Consultants confirmed patients would be referred to Christie for treatment (01/09/16). MMC deemed compliant with use and added to formulary (13/10/16)		
Degarelix for treating advanced hormone- dependent prostate cancer (TA404)	24/08/2016	<b>Degarelix - r</b> ecommended as an option for treating advanced hormone-dependent prostate cancer in people with spinal metastases.	х		10/11/2016	78	Not on Trust formulary for this indication. Urology Consultants submitted fast track application and confirmed compliance (04/11/16). MMC added to formulary (10/11/16).		
Ramucirumab for previously treated locally advanced or metastatic non-small-cell lung cancer (TA403)	24/08/2016	Ramucirumab in combination with docetaxel - NOT RECOMMENDED for treating locally advanced or metastatic non-small-cell lung cancer in adults whose disease has progressed after platinum-based chemotherapy.		x	13/10/2016	50	Not on Trust formulary. Respiratory Consultants confirmed compliance (01/09/16). MMC deemed compliant with non-use (13/10/16)		
Pemetrexed maintenance treatment for non-squamous non-small-cell lung cancer after pemetrexed and cisplatin (TA402)	24/08/2016	Pemetrexed - recommended as an option for the maintenance treatment of locally advanced or metastatic non squamous NSCLC in adults.		х	13/10/2016	50	Not on Trust formulary. Respiratory Consultants confirmed patients would be referred to Christie for treatment (01/09/16). MMC deemed compliant with use and added to formulary (13/10/16)		

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	rmulary to NICE
	Neleuse	marcated by MCL	Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	<b>Notes</b> (e.g. rationale, method of making available)
Bosutinib for previously treated chronic myeloid leukaemia (TA401)	24/08/2016	<b>Bosutinib</b> - recommended as an option for chronic, accelerated and blast phase Philadelphia chromosome positive CML in adults, when they have previously had 1 or more tyrosine kinase inhibitor and imatinib, nilotinib and dasatinib are not appropriate.	x		13/10/2016	50	Not on trust formulary. Haematology submitted fast track application and confirmed compliance (26/08/16). MMC deemed compliant with use in line with NICE and added to formulary (13/10/16).
Nivolumab in combination with ipilimumab for treating advanced melanoma ( <b>TA400</b> )	27/07/2016	<b>Nivolumab</b> - in combination with ipilimumab is recommended as an option for treating advanced (unresectable or metastatic) melanoma in adults.	х		05/08/2016		Dermatology Consultants confirmed patients would be referred to Christie for treatment (05/08/16). MMC deemed applicable & compliant with use and added to formulary (11/08/16).
Azacitidine for treating acute myeloid leukaemia with more than 30% bone marrow blasts ( <b>TA399</b> )	27/07/2016	Azacitidine - NOT RECOMMENDED for treating acute myeloid leukaemia with more than 30% bone marrow blasts in people of 65 years or older who are not eligible for haematopoietic stem cell transplant.		х	27/07/2016		Not on Trust formulary for this indication. Haematology Consultants confirmed compliance (27/07/16). MMC deemed compliant with non-use (11/08/16)
Lumacaftor—ivacaftor for treating cystic fibrosis homozygous for the F508del mutation ( <b>TA398</b> )	27/07/2016	Lumacaftor – ivacaftor - NOT RECOMMENDED for treating cystic fibrosis in people 12 years and older who are homozygous for the F508del mutation in the cystic fibrosis transmembrane conductance regulator (CFTR) gene.		x	29/07/2016	2	Not on Trust formulary. Paediatric Respiratory Consultants confirmed compliance (29/07/16). MMC deemed compliant with non-use (11/08/16)
Belimumab for treating active autoantibody- positive systemic lupus erythematosus (TA397)	22/06/2016	<b>Belimumab</b> - recommended as an option as add-on treatment for active autoantibody-positive systemic lupus erythematosus in adults.	х		23/06/2016	1	On Trust formulary. Rheumatology Consultants confirmed compliance (23/06/16). MMC deemed compliant with use (14/07/16).
Trametinib in combination with dabrafenib for treating unresectable or metastatic melanoma (TA396)	22/06/2016	<b>Trametinib</b> - in combination with dabrafenib is recommended as an option for treating unresectable or metastatic melanoma in adults with a BRAF V600 mutation		×	23/06/2016	1	Not on Trust formulary. Dermatology Consultants confirmed patients would be referred to Christie for treatment (23/06/16). MMC deemed compliant with use and added to formulary (14/07/16)
Ceritinib for previously treated anaplastic lymphoma kinase positive non-small-cell lung cancer (TA395)	22/06/2016	Ceritinib - recommended as an option for treating advanced anaplastic lymphoma kinase positive non small cell lung cancer in adults who have previously had crizotinib.		x	28/06/2016	6	Not on Trust formulary. Respiratory Consultants confirmed patients would be referred to Christie for treatment (28/06/16). MMC deemed compliant with use and added to formulary (14/07/16)
Evolocumab for treating primary hypercholesterolaemia and mixed dyslipidaemia (TA394)	22/06/2016	<b>Evolocumab</b> - recommended as an option for treating primary hypercholesterolaemia or mixed dyslipidaemia.	х		12/07/2016	20	Not on Trust formulary. MMC application submitted. Lipid Clinic Consultants confirmed compliance (12/07/16). MMC approved in line with NICE for this indication and added to the formulary (14/07/16).
Alirocumab for treating primary hypercholesterolaemia and mixed dyslipidaemia (TA393)	22/06/2016	Alirocumab - recommended as an option for treating primary hypercholesterolaemia or mixed dyslipidaemia	х		12/07/2016	20	Not on Trust formulary. MMC application submitted. Lipid Clinic Consultants confirmed compliance (12/07/16). MMC approved in line with NICE for this indication and added to the formulary (14/07/16).
Adalimumab for treating moderate to severe hidradenitis suppurativa (TA392)	22/06/2016	Adalimumab - recommended as an option for treating active moderate to severe hidradenitis suppurativa in adults whose disease has not responded to conventional systemic therapy.	х		01/07/2016	9	Not on Trust formulary for this indication. MMC application submitted. Dermatology Consultants confirmed compliance (01/07/16). MMC approved in line with NICE for this indication and added to the formulary (14/07/16).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	ormulary to NICE
	nereuse		Yes (mark 'x' if applicable)	N/A (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Cabazitaxel for hormone-relapsed metastatic prostate cancer treated with docetaxel (TA391)	26/05/2016	Cabazitaxel - in combination with prednisone or prednisolone is recommended as an option for treating metastatic hormone relapsed prostate cancer in people whose disease has progressed during or after docetaxel chemotherapy.		х	29/05/2016	3	Not on Trust formulary. Urology Consultants confirmed patients would be referred to Christie for treatment (29/05/16). MMC deemed compliant with use and added to formulary (09/06/16)
Canagliflozin, dapagliflozin and empagliflozin as monotherapies for treating type 2 diabetes (TA390)	26/05/2016	Canagliflozin, dapagliflozin & empagliflozin (monotherapies) - recommended as options for treating type 2 diabetes in adults for whom metformin is contraindicated or not tolerated and when diet and exercise alone do not provide adequate glycaemic control.	х		09/06/2016	14	4 Not on Trust formulary for this indication. MMC application submitted. Diabetes Consultants confirmed compliance (23/06/16). MMC approved in line with NICE for this indication and added to the formulary (09/06/16).
Topotecan, pegylated liposomal doxorubicin hydrochloride, paclitaxel, trabectedin and gemcitabine for treating recurrent ovarian cancer (TA389)	27/04/2016	Paclitaxel - in combination with platinum or as monotherapy is recommended as an option for treating recurrent ovarian cancer.  Pegylated liposomal doxorubicin hydrochloride (PLDH) - as monotherapy is recommended as an option for treating recurrent ovarian cancer.  PLDH - in combination with platinum is recommended as an option for treating recurrent ovarian cancer.		x	04/05/2016	;	Not on Trust formulary for this indication. Haematology Consultants confirmed patients would be referred to Christie for treatment (04/05/16). MMC deemed compliant with use and added to formulary (12/05/16)
Sacubitril valsartan for treating symptomatic chronic heart failure with reduced ejection fraction (TA388)	27/04/2016	Sacubitril valsartan - recommended as an option for treating symptomatic chronic heart failure with reduced ejection fraction, only in eligible people.	х		04/05/2016	:	Not on Trust formulary. MMC application submitted Cardiology Consultants confirmed compliance (04/05/16). MMC approved in line with NICE for this indication and added to the formulary (12/05/16).
Abiraterone for treating metastatic hormone- relapsed prostate cancer before chemotherapy is indicated (TA387)	27/04/2016	Abiraterone - in combination with prednisone or prednisolone is recommended as an option for treating metastatic hormone-relapsed prostate cancer.		х	04/05/2016	:	7 Urology Consultants confirmed patients would be referred to Christie for treatment (04/05/16). MMC deemed applicable & compliant with use and added to formulary (12/05/16)
			34	13		Average	1
			% "Yes"	% "N/A"	-	implement time(days)	
Adherence statistics for 2016-17			72%	28%		17	



**NHS Foundation Trust** 

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	ocal formulary to NICE		
	neieuse	marcated by NICL	Yes (mark 'x' if applicable)	N/A (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)		
2015-16									
Ruxolitinib for treating disease-related splenomegaly or symptoms in adults with myelofibrosis (TA386)	23/03/2016	<b>Ruxolitinib</b> - recommended as an option for treating disease-related splenomegaly or symptoms in adults with primary myelofibrosis (also known as chronic idiopathic myelofibrosis), post polycythaemia vera myelofibrosis or post essential thrombocythaemia myelofibrosis.	x		14/04/2016	22	Not on Trust formulary. MMC application submitted (04/04/16). MMC approved in line with NICE for this indication and added to the formulary (14/04/16).		
Ezetimibe for treating primary heterozygous- familial and non-familial hypercholesterolaemia (TA385)	24/02/2016	Ezetimibe (monotherapy) - recommended as an option for treating primary (heterozygous familial or non familial) hypercholesterolaemia in adults in whom initial statin therapy is contraindicated or not tolerated.  Ezetimibe (co administered with a statin) - recommended as an option for treating primary (heterozygous familial or non familial) hypercholesterolaemia in adults	х		10/03/2016	15	On Trust formulary (09/09/03). Lipid Clinic Consultants confirmed compliance (05/03/16). MMC deemed applicable & compliant with use and added to formulary for extra indications (10/03/16).		
Nivolumab for treating advanced (unresectable or metastatic) melanoma (TA384)	24/02/2016	Nivolumab (monotherapy) - recommended as an option for treating advanced (unresectable or metastatic) melanoma in adults.		х	10/03/2016		Not on Trust formulary. Dermatology Consultants confirmed patients would be referred to Christie for treatment (26/02/16). MMC deemed applicable & compliant with use and added to formulary (10/03/16).		
TNF-alpha inhibitors for ankylosing spondylitis and non-radiographic axial spondyloarthritis (TA383)	24/02/2016	Adalimumab, certolizumab pegol, etanercept, golimumab and infliximab - recommended as options for treating severe active ankylosing spondylitis in adults whose disease has responded inadequately to, or who cannot tolerate NSAIDs. Infliximab is recommended only if treatment is started with the least expensive infliximab product.	х		10/03/2016	15	Not on Trust formulary (except golimumab 13/10/11). MMC application submitted. MMC approved in line with NICE for this indication and added to the formulary (10/03/16).		
Eltrombopag for treating severe aplastic anaemia refractory to immunosuppressive therapy (TERMINATED APPRAISAL) (TA382)	26/01/2016	<b>Eltrombopag - NOT RECOMMENDED</b> for treatment of severe aplastic anaemia refractory to immunosuppressive therapy <b>(terminated appraisal)</b> .		х	11/02/2016	16	Not on Trust formulary for this indication. Haematology Consultants confirmed compliance (08/02/16). MMC deemed not applicable & compliant with non-use (11/02/16).		
Olaparib for maintenance treatment of relapsed, platinum-sensitive, BRCA mutation-positive ovarian, fallopian tube & peritoneal cancer after response to 2 <sup>nd</sup> line or subsequent platinum-based chemotherapy ( <b>TA381</b> )	26/01/2016	Olaparib - recommended as an option for treating adults with relapsed, platinum sensitive ovarian, fallopian tube or peritoneal cancer who have BRCA1 or BRCA2 mutations and whose disease has responded to platinum based chemotherapy.	х		11/02/2016	16	Not on Trust formulary. SMH Consultants confirmed patients would be referred to Christie for treatment (03/02/16). MMC deemed applicable & compliant with use (11/02/16).		
Panobinostat for treating multiple myeloma after at least 2 previous treatments ( <b>TA380</b> )	26/01/2016	Panobinostat in combination with bortezomib & dexamethasone) - recommended as an option for adult patients with relapsed and/or refractory multiple myeloma who have received at least 2 prior regimens including bortezomib and an immunomodulatory agent.	Х		11/02/2016	16	Not on Trust formulary. MMC application submitted (08/02/16). MMC approved in line with NICE for this indication and added to the formulary (11/02/16).		

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	tion, as Adherence of local formulary to NICE					
0	nereuse	marcated by their	Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)	
Nintedanib for treating idiopathic pulmonary fibrosis (TA379)	26/01/2016	Nintedanib - recommended as an option for treating idiopathic pulmonary fibrosis.	х		11/02/2016	16	Not on Trust formulary. Respiratory Consultants confirmed patients would be referred to specialist centre at South Manchester for Treatment (09/02/16). MMC deemed applicable & compliant with use (11/02/16).	
Ramucirumab for treating advanced gastric cancer or gastro—oesophageal junction adenocarcinoma previously treated with chemotherapy (TA378)	26/01/2016	Ramucirumab (alone or with paclitaxel) - NOT RECOMMENDED for advanced gastric cancer or gastro—oesophageal junction adenocarcinoma previously treated with chemotherapy.		х	11/02/2016	16	Not on Trust formulary. Not recommended by NICE. MMC deemed not applicable & compliant with non-use (11/02/16).	
Enzalutamide for treating metastatic hormone- relapsed prostate cancer before chemotherapy is indicated (TA377)	26/01/2016	Enzalutamide - recommended as an option for treating metastatic hormone relapsed prostate cancer.		х	05/02/2016	10	Not on Trust formulary. Urology Consultants confirmed patients would be referred to Christie for treatment (05/02/16). MMC deemed compliant with use and added to formulary (11/02/16)	
Radium-223 dichloride for treating hormone- relapsed prostate cancer with bone metastases (TA376)	26/01/2016	<b>Radium 223 dichloride</b> - recommended as an option for treating adults with hormone relapsed prostate cancer, symptomatic bone metastases and no known visceral metastases.		х	05/02/2016	10	Not on Trust formulary. Urology Consultants confirmed patients would be referred to Christie for treatment (05/02/16). MMC deemed compliant with use and added to formulary (11/02/16)	
Adalimumab, etanercept, infliximab, certolizumab pegol, golimumab, tocilizumab and abatacept for rheumatoid arthritis not previously treated with DMARDs or after conventional DMARDs only have failed (TA375)	26/01/2016	Adalimumab, etanercept, infliximab, certolizumab pegol, golimumab, tocilizumab and abatacept, all in combination with methotrexate - recommended as options for treating rheumatoid arthritis	х		26/01/2016	C	On Trust formulary for this indication. Rheumatology Consultants confirmed compliance (26/01/16). MMC deemed compliant with use (11/02/16).	
Erlotinib and gefitinib for treating non-small-cell lung cancer that has progressed after prior chemotherapy (TA374)	16/12/2015	Erlotinib - recommended as an option for treating locally advanced or metastatic non-small-cell lung cancer that has progressed in people who have had non-targeted chemotherapy because of delayed confirmation that their tumour is epidermal growth factor receptor tyrosine kinase (EGFR-TK) mutation-positive.  Erlotinib - recommended as an option for treating locally advanced or metastatic non-small-cell lung cancer that has progressed after non-targeted chemotherapy in people with tumours of unknown EGFR-TK mutation status		х	14/01/2016	29	Not on Trust formulary. Respiratory Consultants confirmed patients would be referred to Christie for treatment (18/12/15). MMC deemed compliant with use and added to formulary (14/01/16)	
Abatacept, adalimumab, etanercept and tocilizumab for treating juvenile idiopathic arthritis (TA373)	16/12/2015	Abatacept, adalimumab, etanercept & tocilizumab - recommended as options for treating polyarticular juvenile idiopathic arthritis (JIA), including polyarticular-onset, polyarticular-course & extended oligoarticular JIA.	x		14/01/2016	29	On Trust formulary for this indication (06/06/14). Rheumatology Consultants confirmed compliance (21/12/15). MMC deemed compliant with use (14/01/16).	
Apremilast for treating active psoriatic arthritis (TA372)	16/12/2015	Apremilast (alone or in combination with disease-modifying antirheumatic drug (DMARD) therapy) - NOT RECOMMENDED for treating adults with active psoriatic arthritis that has not responded to prior DMARD therapy, or such therapy is not tolerated.		х	14/01/2016	29	Not on Trust formulary. Not recommended by NICE. MMC deemed not applicable & compliant with non-use (14/01/16)	

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	Adherence of local formulary to NICE						
			Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	<b>Notes</b> (e.g. rationale, method of making available)		
Trastuzumab emtansine for treating HER2- positive, unresectable locally advanced or metastatic breast cancer after treatment with trastuzumab and a taxane (TA371)	16/12/2015	<b>Trastuzumab emtansine - NOT RECOMMENDED</b> for treating adults with human epidermal growth factor 2 (HER2) positive, unresectable locally advanced or metastatic breast cancer previously treated with trastuzumab and a taxane.		х	14/01/2016	29	Not on Trust formulary for this indication. Not recommended by NICE. MMC deemed not applicable & compliant with non-use (14/01/16)		
Bortezomib for previously untreated mantle cell lymphoma (TA370)	16/12/2015	<b>Bortezomib</b> - recommended as an option for previously untreated mantle cell lymphoma in adults for whom haematopoietic stem cell transplantation is unsuitable.	x		14/01/2016	29	Not on Trust formulary. MMC application submitted (21/12/15). MMC approved in line with NICE for this indication and added to the formulary (14/01/16).		
Ciclosporin for treating dry eye disease that has not improved despite treatment with artificial tears (TA369)	16/12/2015	<b>Ciclosporin</b> - recommended as an option for treating severe keratitis in adult patients with dry eye disease that has not improved despite treatment with tear substitutes.	х		10/12/2015	-6	On Trust formulary for this indication (10/12/15). MREH Consultants confirmed compliance (30/12/15). MMC deemed compliant with use (14/01/16).		
Apremilast for treating moderate to severe plaque psoriasis (TA368)	25/11/2015	Apremilast - NOT RECOMMENDED for treating adults with moderate to severe chronic plaque psoriasis that has not responded to systemic therapy, or systemic therapy is contraindicated or not tolerated.		х	30/11/2015	5	NICE rejected for this indication. Dermatology Consultants confirmed compliance (30/11/15). MMC deemed compliant with non-use (10/12/15).		
Vortioxetine for treating major depressive episodes (TA367)	25/11/2015	<b>Vortioxetine</b> - recommended as an option for treating major depressive episodes in adults whose condition has responded inadequately to 2 antidepressants within the current episode.	х		10/12/2015	15	Not on Trust formulary. MMC application submitted. MMC approved in line with NICE for this indication and added to the formulary (10/12/15).		
Pembrolizumab for advanced melanoma not previously treated with ipilimumab (TA366)	25/11/2015	Pembrolizumab - recommended as an option for treating advanced (unresectable or metastatic) melanoma in adults that has not been previously treated with ipilimumab.		х	26/11/2015	1	Dermatology Consultants confirmed patients would be referred to Christie for treatment (26/11/15). MMC deemed applicable & compliant with use and added to formulary (10/12/16).		
Ombitasvir–paritaprevir–ritonavir with or without dasabuvir for treating chronic hepatitis C (TA365)	25/11/2015	Ombitasvir–paritaprevir–ritonavir (with or without dasabuvir) - recommended as an option for treating genotype 1 or 4 chronic hepatitis C in adults.	х		30/11/2015	5	On Trust formulary for this indication. Gastroenterology Consultants confirmed compliance (30/11/15). MMC deemed compliant with use (10/12/15).		
Daclatasvir for treating chronic hepatitis C (TA364)	25/11/2015	Daclatasvir - recommended as an option for treating chronic hepatitis C in adults	х		30/11/2015	5	On Trust formulary for this indication. Gastroenterology Consultants confirmed compliance (30/11/15). MMC deemed compliant with use (10/12/15).		
Ledipasvir–sofosbuvir for treating chronic hepatitis C (TA363)	25/11/2015	<b>Ledipasvir–sofosbuvir</b> - recommended as an option for treating chronic hepatitis C in adults.	х		30/11/2015	5	On Trust formulary for this indication. Gastroenterology Consultants confirmed compliance (30/11/15). MMC deemed compliant with use (10/12/15).		
Paclitaxel as albumin-bound nanoparticles with carboplatin for untreated non-small-cell lung cancer (TERMINATED APPRAISAL) (TA362)	27/10/2015	Paclitaxel - as albumin-bound nanoparticles with carboplatin - NOT RECOMMENDED for untreated non-small-cell lung cancer (TERMINATED APPRAISAL).		х	12/11/2015	16	Not on Trust formulary for this indication. Not recommended by NICE. MMC deemed not applicable & compliant with non-use (12/11/15).		
Simeprevir in combination with sofosbuvir for treating genotype 1 or 4 chronic hepatitis C (TERMINATED APPRAISAL) (TA361)	27/10/2015	Simeprevir (in combination with sofosbuvir) - NOT RECOMMENDED for treating genotype 1 or 4 chronic hepatitis C (TERMINATED APPRAISAL).		х	12/11/2015	16	Not on Trust formulary for this indication. Not recommended by NICE. MMC deemed not applicable & compliant with non-use (12/11/15).		

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE		rmulary to NICE			
°	nereuse		Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	<b>Notes</b> (e.g. rationale, method of making available)
Paclitaxel as albumin-bound nanoparticles in combination with gemcitabine for previously untreated metastatic pancreatic cancer (TA360)	27/10/2015	Paclitaxel (in combination with gemcitabine) - NOT RECOMMENDED for adults with previously untreated metastatic adenocarcinoma of the pancreas.		x	03/11/2015	7	Not on Trust formulary for this indication. Not recommended by NICE. MMC deemed not applicable & compliant with non-use (12/11/15)
Idelalisib for treating chronic lymphocytic leukaemia (TA359)	27/10/2015	<b>Idelalisib</b> (in combination with rituximab) - recommended for untreated CLL in adults with a 17p deletion or TP53 mutation or for CLL in adults when the disease has been treated but has relapsed within 24 months.	х		07/11/2015	11	Not on Trust formulary. MMC application submitted (07/11/15). MMC approved in line with NICE for this indication and added to the formulary (12/11/15).
Tolvaptan for treating autosomal dominant polycystic kidney disease (TA358)	27/10/2015	<b>Tolvaptan</b> - recommended as an option for treating autosomal dominant polycystic kidney disease in adults to slow the progression of cyst development and renal insufficiency.	х		12/11/2015	16	Not on Trust formulary for this indication. MMC application submitted. MMC approved in line with NICE for this indication and added to the formulary (12/11/15).
Pembrolizumab for treating advanced melanoma after disease progression with ipilimumab (TA357)	27/10/2015	Pembrolizumab - recommended as an option for treating advanced (unresectable or metastatic) melanoma in adults.		х	30/10/2015	3	Not on Trust formulary. Dermatology Consultants confirmed patients would be referred to Christie for treatment (30/10/15). MMC deemed compliant with use and added to formulary (12/11/15)
Ruxolitinib for treating polycythaemia vera (TERMINATED APPRAISAL) (TA356)	23/09/2015	<b>Ruxolitinib</b> - NICE is unable to make a recommendation about the use of ruxolitinib for treating polycythaemia vera that is resistant to hydroxycarbamide or for people who cannot tolerate hydroxycarbamide because no evidence submission was received from Novartis.		x	08/10/2015	15	Not on Trust formulary for this indication. Not recommended by NICE. MMC deemed not applicable & compliant with non-use (08/10/15)
Edoxaban for preventing stroke and systemic embolism in people with non valvular atrial fibrillation (TA355)	23/09/2015	Edoxaban - recommended as an option for preventing stroke and systemic embolism in adults with non valvular atrial fibrillation with one or more risk factors, including: congestive heart failure; hypertension; diabetes; prior stroke or transient ischaemic attack or aged 75 years or older.	х		08/10/2015	15	Not on Trust formulary. MMC application submitted. MMC approved in line with NICE for this indication and added to the formulary (08/10/15).
Edoxaban for treating and for preventing deep vein thrombosis and pulmonary embolism (TA354)	26/08/2015	Edoxaban - recommended as an option for treating and for preventing recurrent deep vein thrombosis and pulmonary embolism in adults.	х		10/09/2015	15	Not on Trust formulary. MMC application submitted. MMC approved in line with NICE for this indication and added to the formulary (10/09/15).
Bevacizumab for treating relapsed, platinum resistant epithelial ovarian, fallopian tube or primary peritoneal cancer (TERMINATED APPRAISAL) (TA353)	26/08/2015	<b>Bevacizumab</b> - NICE is unable to make a recommendation about the use of bevacizumab for treating relapsed, platinum resistant epithelial ovarian, fallopian tube or primary peritoneal cancer because no evidence submission was received from Roche Products for the technology.		х	10/09/2015	15	Not on Trust formulary for this indication. Not recommended by NICE. MMC deemed not applicable & compliant with non-use (10/09/15).
Vedolizumab for treating moderately to severely active Crohn's disease after prior therapy (TA352)	26/08/2015	Vedolizumab - recommended as an option for treating moderately to severely active Crohn's disease.	x		10/09/2015	15	MMC application submitted (06/15). MMC approved in line with NICE for this indication and added to the formulary (10/09/15).
Cangrelor for reducing atherothrombotic events in people undergoing percutaneous coronary intervention or awaiting surgery requiring interruption of anti-platelet therapy (TERMINATED APPRAISAL) (TASS1)	22/07/2015	Cangrelor - NICE is unable to make a recommendation about the use of cangrelor for reducing atherothrombotic events in people undergoing percutaneous coronary intervention or awaiting surgery requiring interruption of anti platelet therapy because no evidence submission was received from The Medicines Company.	х		13/08/2015	22	Not on Trust formulary. Not recommended by NICE. MMC deemed not applicable & compliant with non-use (13/08/15).

Technology appraisal (TA) Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE		rmulary to NICE			
			Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	<b>Notes</b> (e.g. rationale, method of making available)
Secukinumab for treating moderate to severe plaque psoriasis (TA350)	22/07/2015	<b>Secukinumab</b> - recommended as an option for treating adults with plaque psoriasis.	х		13/08/2015	22	Not on Trust formulary. MMC application submitted. MMC approved in line with NICE for this indication and added to the formulary (13/08/15).
Dexamethasone intravitreal implant for treating diabetic macular oedema ( <b>TA349</b> )	22/07/2015	<b>Dexamethasone</b> intravitreal implant - recommended as an option for treating diabetic macular oedema.	х		05/08/2015	14	On Trust formulary. MMC aplication for this indication submitted (05/08/15). MMC approved in line with NICE for this indication and added to the formulary (13/08/15).
Everolimus for preventing organ rejection in liver transplantation (TA348)	22/07/2015	<b>Everolimus - NOT RECOMMENDED</b> for preventing organ rejection in people having a liver transplant.		х	13/08/2015	22	Not on Trust formulary for this indication. Not recommended by NICE. MMC deemed not applicable & compliant with non-use (13/08/15)
Nintedanib for previously treated locally advanced, metastatic, or locally recurrent non small cell lung cancer (TA347)	22/07/2015	<b>Nintedanib</b> in combination with <b>docetaxel</b> - recommended as an option for locally advanced, metastatic or locally recurrent non small cell lung cancer of adenocarcinoma histology that has progressed after 1 <sup>st L</sup> ine chemotherapy.		х	27/07/2015	5	Not on Trust formulary for this indication. Respiratory Consultants confirmed patients would be referred to Christie for treatment (27/07/15). MMC deemed applicable & compliant with use and added to formulary (13/08/15)
Aflibercept for treating diabetic macular oedema (TA346)	22/07/2015	Affibercept - recommended as an option for treating visual impairment caused by diabetic macular oedema	x		14/05/2015	-69	On Trust formulary. MMC application submitted (05/15). MMC approved in line with NICE for this indication and added to the formulary (13/08/15).
Naloxegol for treating opioid induced constipation (TA345)	22/07/2015	Naloxegol - recommended as an option for treating opioid induced constipation in adults whose constipation has not adequately responded to laxatives.	х		13/08/2015	22	Not on Trust formulary. MMC application submitted. MMC approved in line with NICE for this indication and added to the formulary (13/08/15).
Ofatumumab in combination with chlorambucil or bendamustine for untreated chronic lymphocytic leukaemia (TA344)	02/06/2015	Ofatumumab in combination with chlorambucil -recommended as an option for untreated chronic lymphocytic leukaemia.	х		09/06/2015	7	Not on Trust formulary. MMC application submitted (09/06/15). MMC approved in line with NICE for this indication and added to the formulary (09/07/15).
Obinutuzumab in combination with chlorambucil for untreated chronic lymphocytic leukaemia (TA343)	02/06/2015	<b>Obinutuzumab</b> in combination with <b>chlorambucil</b> -recommended as an option for adults with untreated chronic lymphocytic leukaemia who have comorbidities that make full-dose fludarabine-based therapy unsuitable for them.	х		09/07/2015	37	Not on Trust formulary. MMC application submitted (09/06/15). MMC approved in line with NICE for this indication and added to the formulary (09/07/15).
Vedolizumab for treating moderately to severely active ulcerative colitis (TA342)	02/06/2015	<b>Vedolizumab</b> - recommended as an option for treating moderately to severely active ulcerative colitis in adults.	х		11/06/2015	9	MMC approved as per NICE for this indication and added to the formulary (11/06/15).
Apixaban for the treatment and secondary prevention of deep vein thrombosis and/or pulmonary embolism (TA341)	02/06/2015	Apixaban - recommended as an option for treating and for preventing recurrent deep vein thrombosis and pulmonary embolism in adults.	x		11/06/2015	9	On Trust formulary. MMC approved in line with NICE for this indication and added to the formulary (11/06/15).
Ustekinumab for treating active psoriatic arthritis (rapid review of TA313) (TA340)	02/06/2015	<b>Ustekinumab</b> - recommended as an option, alone or in combination with methotrexate, for treating active psoriatic arthritis in adults	х		11/06/2015	9	On Trust formulary. MMC approved in line with NICE for this indication (11/06/15). Compliant response from Dermatology (11/07/15).

Technology appraisal (TA)	Date of TA	Availability of medicine for NHS patients with this medical condition, as	Adherence of local formulary to NICE					
Titles are hyperlinks to full guidance	Release	indicated by NICE						
			Yes	N/A	Date of local	Time to	Notes (e.g. rationale, method of making available)	
			(mark 'x' if	(mark 'x' if	decision	implement		
			applicable)	applicable)	(DD/MM/YY)	(days)		
Omalizumab for previously treated chronic	02/06/2015	Omalizumab - recommended as an option (add-on) therapy to treat severe			11/06/2015	9	On Trust formulary. MMC approved in line with NICE	
spontaneous urticaria (TA339)		chronic spontaneous urticaria in adults & young people aged 12 years and over.	¥				for this indication (11/06/15).	
			^					
			30	18				
						Average		
			% "Yes"	% "N/A"	_	implement		
						time(days)		
Adherence statistics for 2015-16				38%		13		



**NHS Foundation Trust** 

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	Adherence of local formulary to NICE						
0	nereuse		Yes (mark 'x' if applicable)	N/A (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)		
2014-15									
Pomalidomide for relapsed and refractory multiple myeloma previously treated with lenalidomide and bortezomib (TA338)	25/03/2015	<b>Pomalidomide</b> in combination with <b>dexamethasone</b> - not recommended to treating relapsed and refractory multiple myeloma in adults who have had at least 2 previous treatments, including lenalidomide and bortezomib, and whose disease has progressed on the last therapy.	x		30/03/2015		On Trust formulary for this indication, MMC approved 14/11/13. Haematology Consultants confirmed compliance (30/03/15) patient access through CDF.		
Rifaximin for preventing episodes of overt hepatic encephalopathy (TA337)	25/03/2015	Rifaximin - recommended as an option for reducing the recurrence of episodes of overt hepatic encephalopathy in people aged 18 years or older.	х		14/06/2012		On Trust formulary for this indication, MMC approved 14/06/12. Gastroenterology Consultants confirmed compliance (01/04/15).		
Empagliflozin in combination therapy for treating type 2 diabetes (TA336)	25/03/2015	<b>Empagliflozin</b> - recommended as an option in a dual therapy regimen in combination with metformin for treating type 2 diabetes (T2DM); in a triple therapy regimen to treat T2DM in combination with metformin & a sulfonylurea or metformin & a thiazolidinedione; in combination with insulin with or without other antidiabetic drugs to treat T2DM.	х		09/04/2015		MMC application submitted (13/11/14). MMC approved in line with NICE for this indication and added to the formulary (09/04/15).		
Rivaroxaban for preventing adverse outcomes after acute management of acute coronary syndrome (TA335)	25/03/2015	<b>Rivaroxaban</b> - recommended as an option in combination with aspirin plus clopidogrel or aspirin alone, for preventing atherothrombotic events in people who have had an acute coronary syndrome with elevated cardiac biomarkers.	х		06/05/2015		Not on Trust formulary for this indication. Cardiology Consultants confirmed compliance (06/05/15). MMC deemed applicable & compliant with use and added to formulary (14/05/15)		
Regorafenib for metastatic colorectal cancer after treatment for metastatic disease (TERMINATED APPRAISAL) (TA334)	25/02/2015	Regorafenib - NICE unable to make a recommendation about the use of Regorafenib for metastatic colorectal cancer because Bayer considered that the number of people in the trial who had care equivalent to standard care in the UK was too small to form the basis of a submission for this appraisal.		х	11/03/2015		Not on Trust formulary for this indication. Not recommended by NICE. MMC deemed not applicable & compliant with non-use (11/03/15).		
Axitinib for treating advanced renal cell carcinoma after failure of prior systemic treatment (TA333)	25/02/2015	<b>Axitinib</b> - recommended as an option for treating adults with advanced renal cell carcinoma after failure of treatment with a first-line tyrosine kinase inhibitor or a cytokine.	x		27/02/2015		Not on Trust formulary for this indication. Haematology Consultants confirmed patients would be referred to Christie for treatment (27/02/15). MMC deemed applicable & compliant with use and added to formulary (11/03/15)		
Sipuleucel-T for treating asymptomatic or minimally symptomatic metastatic hormone-relapsed prostate cancer (TA332)	25/02/2015	<b>Sipuleucel-T</b> - <b>NOT RECOMMENDED</b> to treat adults who have asymptomatic or minimally symptomatic metastatic non-visceral hormone-relapsed prostate cancer for which chemotherapy is not yet clinically indicated.		х	11/03/2015		Not on Trust formulary for this indication. Not recommended by NICE. MMC deemed not applicable & compliant with non-use (11/03/15).		
Simeprevir in combination with peginterferon alfa and ribavirin for treating genotypes 1 and 4 chronic hepatitis C (TA331)	25/02/2015	Simeprevir in combination with peginterferon alfa & ribavirin - recommended as an option for treating genotype 1 and 4 chronic hepatitis C in adults.	х		12/06/2014	-258	On Trust formulary for this indication, MMC approved 12/06/14. Gastroenterology Consultants confirmed compliance (27/02/15). MMC deemed applicable & compliant with use (12/03/15)		

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	rmulary to NICE
	Nereuse	marcated by MCL	Yes (mark 'x' if applicable)	N/A (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	<b>Notes</b> (e.g. rationale, method of making available)
Sofosbuvir for treating chronic hepatitis C (TA330)	25/02/2015	Sofosbuvir - recommended as an option for treating chronic hepatitis C in adults.	х		12/06/2014	-258	On Trust formulary for this indication, MMC approved 12/06/14. Gastroenterology Consultants confirmed compliance (27/02/15). MMC deemed applicable & compliant with use (12/03/15)
Infliximab, adalimumab & golimumab for treating moderately to severely active ulcerative colitis after the failure of conventional therapy (review of TA140 and TA262) (TA329)	25/02/2015	<b>Infliximab, adalimumab</b> and <b>golimumab</b> - recommended as treatment options for moderate to severe active ulcerative colitis in adults whose disease has responded inadequately to conventional therapy or who cannot tolerate, or have medical contraindications for, such therapies.	х		12/03/2015	15	MMC application submitted (adalimumab 12/06/14). MMC approved in line with NICE for this indication and added to the formulary (12/03/15).
Idelalisib for treating follicular lymphoma that is refractory to 2 prior treatments (TERMINATED APPRAISAL) (TA328)	17/12/2014	<b>Idelalisib</b> - NICE unable to make a recommendation about the use of idelalisib for follicular lymphoma that is refractory to 2 prior lines of treatment because no evidence submission was received from Gilead Sciences.		x	15/01/2015	29	Not on Trust formulary. Not recommended by NICE. MMC deemed not applicable & compliant with non-use (15/01/15).
Dabigatran etexilate for the treatment and secondary prevention of deep vein thrombosis and/or pulmonary embolism (TA327)	17/12/2014	Dabigatran etexilate - recommended as an option for treating and for preventing recurrent deep vein thrombosis and pulmonary embolism in adults.	х		15/01/2015	29	Not on Trust formulary for this indication. MMC deemed applicable & added to the formulary for this indication in line with NICE (15/01/15).
Imatinib for the adjuvant treatment of gastrointestinal stromal tumours (review of TA196) ( <b>TA326</b> )	26/11/2014	Imatinib - recommended as an option as adjuvant treatment for up to 3 years for adults who are at high risk of relapse after surgery for KIT (CD117)-positive gastrointestinal stromal tumours.		x	11/12/2014	15	Not on Trust formulary for this indication. MMC deemed applicable & added to the formulary for this indication in line with NICE (11/12/14).
Nalmefene for reducing alcohol consumption in people with alcohol dependence (TA325)	26/11/2014	Nalmefene - recommended as an option for reducing alcohol consumption, for people with alcohol dependence.	х		11/12/2014	15	Not on Trust formulary. MMC deemed applicable & added to the formulary for this indication in line with NICE (11/12/14).
Dual-chamber pacemakers for symptomatic bradycardia due to sick sinus syndrome without atrioventricular block (part review of TA88) (TA324)	26/11/2014	<b>Dual-chamber pacemakers</b> - recommended as an option for treating symptomatic bradycardia due to sick sinus syndrome without atrioventricular block.	х		11/12/2014		Not on Trust formulary. MMC deemed applicable & added to the formulary for this indication in line with NICE (11/12/14).
Erythropoiesis-stimulating agents (epoetin & darbepoetin) for treating anaemia in people with cancer having chemotherapy (review of TA142) (TA323)		<b>Epoetin alfa, beta, theta</b> & <b>zeta</b> , and <b>darbepoetin alfa</b> - recommended as options for treating anaemia in people with cancer who are having chemotherapy	х		11/12/2014	15	Not on Trust formulary for this indication. MMC deemed applicable & added to the formulary for this indication in line with NICE (11/12/14).
Lenalidomide for treating myelodysplastic syndromes associated with an isolated deletion 5q cytogenetic abnormality (TA322)		<b>Lenalidomide</b> - recommended as an option for treating transfusion-dependent anaemia caused by low or intermediate-1 risk myelodysplastic syndromes associated with an isolated deletion 5q cytogenetic abnormality when other therapeutic options are insufficient or inadequate	х		08/10/2014	14	Not on Trust formulary for this indication. MMC deemed applicable & added to the formulary for this indication in line with NICE (08/10/14).
Dabrafenib for treating unresectable or metastatic BRAF V600 mutation-positive melanoma (TA321)	22/10/2014	Dabrafenib - recommended as an option for treating unresectable or metastatic BRAF V600 mutation-positive melanoma	х		22/10/2014		Not on Trust formulary for this indication. Dermatology Consultants confirmed compliance (22/10/14). MMC deemed applicable & added to the formulary for this indication in line with NICE (13/11/14).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	ion, as Adherence of local formulary to NICE					
			Yes (mark 'x' if applicable)	N/A (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	<b>Notes</b> (e.g. rationale, method of making available)	
Dimethyl fumarate for treating relapsing- remitting multiple sclerosis (TA320)	27/08/2014	Dimethyl fumarate - recommended as an option for treating adults with active relapsing-remitting multiple sclerosis (normally defined as 2 clinically significant relapses in the previous 2 years)		х	11/09/2014		MMC approved as per NICE (11/09/14). Neurology Consultants confirmed treatment would not be offered at CMFT, prescribed @ Disease Modifying Treatment Clinic SRFT (//14)	
Ipilimumab for previously untreated advanced (unresectable or metastatic) melanoma (TA319)	23/07/2014	<b>Ipilimumab</b> - recommended as an option for treating adults with previously untreated advanced (unresectable or metastatic) melanoma, only if the manufacturer provides ipilimumab with the discount agreed in the patient access scheme.	х		13/08/2014		Not on Trust formulary for this indication (Adults). Dermatology Consultants confirmed patients would be referred to Christie for treatment (13/08/14). MMC deemed applicable & compliant with use, added to formulary for this indication in line with NICE (14/08/14)	
Lubiprostone for treating chronic idiopathic constipation (TA318)	23/07/2014	<b>Lubiprostone</b> - recommended as an option for treating chronic idiopathic constipation in adults in whom treatment with at least 2 laxatives from different classes, at the highest tolerated recommended doses for at least 6 months, has failed to provide adequate relief and for whom invasive treatment for constipation is being considered.	x		24/07/2014		MMC approved as per NICE (14/08/14). Gastroenterology consultants confirmed use would be in line with NICE (24/07/14)	
Prasugrel with percutaneous coronary intervention for treating acute coronary syndromes (review of TA182) (TA317)	23/07/2014	Prasugrel in combination with aspirin - recommended as an option for preventing atherothrombotic events in adults with acute coronary syndrome (unstable angina [UA], non-ST segment elevation myocardial infarction [NSTEMI] or ST segment elevation myocardial infarction [STEMI]) having primary or delayed percutaneous coronary intervention.	х		12/11/2009	-1714	MMC approved for this indication (12/11/09). Cardiology consultants confirmed compliance (31/10/14). MMC deemed applicable & compliant with use (14/08/14)	
Enzalutamide for metastatic hormone-relapsed prostate cancer previously treated with a docetaxel-containing regimen (TA316)	23/07/2014	<b>Enzalutamide</b> - recommended as an option for treating metastatic hormone-relapsed prostate cancer in adults whose disease has progressed during or after docetaxel-containing chemotherapy, only if the manufacturer provides enzalutamide with the discount agreed in the patient access scheme		x	04/08/2014		Not on Trust formulary for this indication (Adults). Urology Consultants confirmed patients would be referred to Christie for treatment (04/08/14). MMC deemed applicable & compliant with use, added to formulary for this indication in line with NICE#	
Diabetes (type 2) - canagliflozin ( <b>TA315</b> )	25/06/2014	Canagliflozin dual therapy regimen with metformin is recommended as an option for treating type 2 diabetes. Triple therapy regimen with metformin and a sulfonylurea or metformin and a thiazolidinedione is recommended as an option for treating type 2 diabetes. Canagliflozin in combination with insulin with or without other antidiabetic drugs is recommended as an option for treating type 2 diabetes.	x		10/07/2014	15	MMC approved as per NICE (10/07/14). Diabetes Consultants confirmed treatment would be in line with NICE (09/09/14).	
Arrhythmias - ICDs & Heart failure - cardiac resynchronisation ( <b>TA314</b> )	25/06/2014	Implantable cardioverter defibrillators (ICDs), cardiac resynchronisation therapy (CRT) with defibrillator (CRT-D) or CRT with pacing (CRT-P) are recommended as treatment options	х		10/07/2014	15	MMC approved as per NICE (10/07/14)	

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	rmulary to NICE
		, , ,	Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	<b>Notes</b> (e.g. rationale, method of making available)
Psoriatic arthritis (active) - ustekinumab (TA313)	28/05/2014	<b>Ustekinumab</b> - <b>NOT RECOMMENDED</b> for treating active psoriatic arthritis, that is, alone or in combination with methotrexate in adults when the response to previous non-biological disease modifying antirheumatic drug (DMARD) therapy has been inadequate.	х		19/08/2014	83	Not on Trust formulary for this indication (Adults). Rheumatology Consultants confirmed compliance with non-use in patients for this indication (19/08/14). MMC deemed applicable & compliant with non-use (12/06/14)
Multiple sclerosis (relapsing-remitting) - alemtuzumab (TA312)	28/05/2014	<b>Alemtuzumab</b> - recommended as an option for treatment of adults with active relapsing–remitting multiple sclerosis.	х		02/06/2014		MMC approved as per NICE (12/06/14). Neurology Consultants confirmed treatment would not be offered at CMFT, prescribed @ Disease Modifying Treatment Clinic SRFT (02/06/14)
Multiple myeloma - bortezomib (induction therapy) (TA311)	23/04/2014	<b>Bortezomib</b> - recommended as an option in combination with dexamethasone, or with dexamethasone and thalidomide, for the induction treatment of adults with previously untreated multiple myeloma, who are eligible for high-dose chemotherapy with haematopoietic stem cell transplantation.	х		10/01/2007	-2660	On Trust formulary for this indication (10/01/07). Haematology Consultants confirmed compliance (24/04/14). MMC deemed applicable & compliant with use (08/05/14).
Lung cancer (non small cell, EGFR mutation positive) - afatinib ( <b>TA310</b> )	23/04/2014	Afatinib - recommended as an option for treating adults with locally advanced or metastatic non-small-cell lung cancer.		х	28/04/2014		Not on Trust formulary for this indication (Adults). Respiratory Consultants confirmed patients would be referred to Christie for treatment (28/04/14). MMC deemed applicable & compliant with use. Added to the formulary for this indication in line with NICE (08/05/14)
Lung cancer (non small cell, non squamous) - pemetrexed (TA309)	23/04/2014	Pemetrexed - NOT RECOMMENDED for the maintenance treatment of locally advanced or metastatic non-squamous non-small-cell lung cancer (NSCLC) in people whose disease has not progressed immediately following induction therapy with pemetrexed and cisplatin.		х	28/04/2014		Not on Trust formulary for this indication (Adults). Respiratory Consultants confirmed compliance with use (28/04/14). MMC deemed applicable & compliant with non-use (08/05/14)
			22	8			
			% "Yes"	% "N/A"	-	Average implement time(days)	
Adherence statistics for 2014-15			73%	27%		-183	



**NHS Foundation Trust** 

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	ence of local fo	ormulary to NICE
The strengerman to the guidance	Release	maicatea by NICE	Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
2013-14							
Vasculitis (anti-neutrophil cytoplasmic antibody-associated) - rituximab (with glucocorticoids) ( <b>TA308</b> )	26/03/2014	<b>Rituximab</b> - in combination with glucocorticoids - recommended as an option for inducing remission in adults with anti-neutrophil cytoplasmic antibody [ANCA]-associated vasculitis (severely active granulomatosis with polyangiitis (Wegener's) and microscopic polyangiitis)	х		01/04/2014	6	Not on Trust formulary for this indication. Fast track TA form completed (01/04/14) Consultants confirmed compliance with use (01/04/14). MMC approved and deemed compliant with non-use (10/04/14).
Colorectal cancer (metastatic) - aflibercept (TA307)	26/03/2014	Affibercept - in combination with irinotecan and fluorouracil-based therapy - NOT RECOMMENDED for treating metastatic colorectal cancer that is resistant to or has progressed after an oxaliplatin containing regimen.	х		31/03/2014	5	Not on Trust formulary for this indication. Colorectal Surgeons confirmed non-use that patients are referred to the Christie hospital for chemotherapy (31/03/14). MMC approved and deemed compliant with non-use (10/04/14).
Lymphoma (non Hodgkin's, relapsed, refractory) - pixantrone monotherapy ( <b>TA306</b> )	26/02/2014	<b>Pixantrone</b> - monotherapy is recommended as an option for treating adults with multiply relapsed or refractory aggressive non-Hodgkin's B-cell lymphoma.	х		03/03/2014	5	Not on Trust formulary for this indication. Fast track TA form completed (03/03/14). MMC approved and deemed compliant with use in line with NICE (10/04/14)
Macular oedema (central retinal vein occlusion) - aflibercept solution for injection (TA305)	26/02/2014	Aflibercept - recommended as an option for treating visual impairment caused by macular oedema secondary to central retinal vein occlusion.	х		10/04/2014	43	Not on Trust formulary for this indication. Fast track TA form completed (07/04/14). MMC approved and deemed compliant with use in line with NICE (10/04/14)
Arthritis of the hip (end stage) - hip replacement (total) & resurfacing arthroplasty (Rev TA2, TA44) ( <b>TA304</b> )	26/02/2014	Prostheses for total hip replacement and resurfacing arthroplasty are recommended as treatment options for people with end-stage arthritis of the hip only if the prostheses have rates (or projected rates) of revision of 5% or less at 10 years.	x		13/03/2014	15	MMC approved as per NICE (13/03/14). Orthopaedic Consultants confirmed applicable and compliant with guidance (06/05/14)
Multiple sclerosis (relapsing) - teriflunomide (TA303)	22/01/2014	<b>Teriflunomide</b> - recommended for treating adults with active relapsing–remitting multiple sclerosis (normally defined as 2 clinically significant relapses in the previous 2 years).	х		06/02/2014	15	MMC approved as per NICE (13/02/14). Neurology Consultants confirmed treatment would not be offered at CMFT, prescribed @ Disease Modifying Treatment Clinic SRFT (06/02/14)
Juvenile idiopathic arthritis (systemic) - canakinumab (TERMINATED APPRAISAL) (TA302)	27/11/2013	Canakinumab - NOT RECOMMENDED for systemic juvenile idiopathic arthritis because no evidence submission was received from the manufacturer.	x		12/12/2013	15	Not on Trust formulary for this indication. MMC deemed not applicable and compliant with non-use (12/12/13)
Diabetic macular oedema - fluocinolone acetonide intravitreal implant (rapid review of TA271) ( <b>TA301</b> )	27/11/2013	<b>Fluocinolone acetonide</b> - recommended as an option for treating chronic diabetic macular oedema that is insufficiently responsive to available therapies only if the implant is to be used in an eye with an intraocular (pseudophakic) lens & the manufacturer provides the implant with the discount agreed in the patient access scheme.	x		31/01/2014	65	Not on Trust formulary for this indication. Fast track TA form completed (31/01/14). MMC deemed compliant with use subject to agreeing funding with commissioners (13/02/14)

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	ence of local fo	ormulary to NICE
n C	nereuse		Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Hepatitis C (children and young people) - peginterferon alfa & ribavirin ( <b>TA300</b> )	27/11/2013	Peginterferon alfa in combination with Ribavirin - recommended as an option for treating chronic hepatitis C in children and young people.	х		12/12/2013	15	Paediatric Consultants confirmed compliance, treatment initiated at CMFT in conjunction with the Liver unit at Leeds (12/12/13). MMC deemed compliant with use (12/12/13)
Leukaemia (chronic myeloid) - bosutinib (TA299)	27/11/2013	Bosutinib - NOT RECOMMENDED for treating Philadelphia-chromosome-positive chronic myeloid leukaemia (CML).	х		28/11/2013	1	Not on Trust formulary for this indication. Haematology Consultants confirmed compliance with non-use (28/11/13). MMC deemed not applicable and compliant with non-use (12/12/13)
Choroidal neovascularisation (pathological myopia) - ranibizumab ( <b>TA298</b> )	27/11/2013	Ranibizumab - recommended as an option for treating visual impairment due to choroidal neovascularisation secondary to pathological myopia.	х		31/01/2014	65	Not on Trust formulary for this indication. Fast track TA form completed (31/01/14). MMC deemed compliant with use subject to agreeing funding with commissioners (13/02/14)
Vitreomacular traction - ocriplasmin ( <b>TA297</b> )	23/10/2013	Ocriplasmin - recommended as an option for treating vitreomacular traction in adults, only if:  • an epiretinal membrane is not present and  • they have a stage II full-thickness macular hole with a diameter of 400 micrometres or less and/or  • they have severe symptoms.	x		30/10/2013	7	Not on Trust formulary for this indication. Fast track TA form completed (30/10/13). MMC deemed compliant with use subject to agreeing funding with commissioners (14/11/13)
Lung cancer (non-small-cell, anaplastic lymphoma kinase fusion gene, previously treated) - crizotinib (TA296)	25/09/2013	Crizotinib - NOT RECOMMENDED wfor treating adults with previously treated anaplastic-lymphoma kinase-positive advanced non-small-cell lung cancer.	х		02/10/2013	7	Not on Trust formulary for this indication (Adults (14/02/13). Respiratory Consultants confirmed compliance with non-use (02/10/13). MMC deemed applicable & compliant with non-use (10/10/13)
Breast cancer (HER2 negative, oestrogen receptor positive, locally advanced or metastatic) - everolimus (with an aromatase inhibitor) (TA295)	28/08/2013	Everolimus with exemestane - not recommended within its marketing authorisation for treating postmenopausal women with advanced human epidermal growth factor receptor 2 (HER2) negative hormone-receptorpositive breast cancer that has recurred or progressed following treatment with a non-steroidal aromatase inhibitor	х		12/09/2013	15	Not on Trust formulary for this indication. Consultants confirmed that patients would receive treatment at UHSM if recommended (28/08/13). MMC deemed compliant with non-use (12/09/13)
Macular degeneration (wet age-related) - aflibercept (1 <sup>st</sup> line) ( <b>TA294</b> )	24/07/2013	Aflibercept - recommended as an option for treating wet age-related macular degeneration only if:  • it is used in accordance with the recommendations for ranibizumab in NICE technology appraisal guidance 155 (re-issued May 2012) and  • the manufacturer provides aflibercept solution for injection with the discount agreed in the patient access scheme.	x		14/02/2013	-160	On Trust formulary for this indication (Adults (14/02/13). MREH Consultants confirmed compliance (24/07/13). MMC deemed applicable & compliant with use (08/08/13)

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			rmulary to NICE		
	7.00		Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	<b>Notes</b> (e.g. rationale, method of making available)
Thrombocytopenic purpura - eltrombopag (TA293)	24/07/2013	Eltrombopag - recommended as an option for treating adults with chronic immune (idiopathic) thrombocytopenic purpura in adults who have had a splenectomy and whose condition is refractory to other treatments, or 2 <sup>nd</sup> line in adults who have not had a splenectomy because surgery is contraindicated), only if:  • their condition is refractory to standard active treatments and rescue therapies, or • they have severe disease and a high risk of bleeding that needs frequent courses of rescue therapies and • the manufacturer provides eltrombopag with the discount agreed in the patient access scheme.	x		14/08/2008	-1,805	On Trust formulary for this indication (Adults (14/08/08) Paeds (01/05/10). CAMHS Consultants confirmed compliance (24/07/13). MMC deemed applicable & compliant with use (08/08/13)
Bipolar disorder (children) - aripiprazole (TA292)	24/07/2013	Aripiprazole - recommended as an option for treating moderate to severe manic episodes in adolescents with bipolar I disorder, that is, up to 12 weeks of treatment for moderate to severe manic episodes in bipolar I disorder in adolescents aged 13 and older).	х		01/07/2009	-1,484	On Trust formulary for this indication (Paeds 01/07/09). CAMHS Consultants confirmed compliance (24/07/13). MMC deemed applicable & compliant with use (08/08/13)
Gout (tophaceous, severe debilitating, chronic) - pegloticase (TA291)	26/06/2013	<b>Pegloticase - NOT RECOMMENDED</b> for treating severe debilitating chronic tophaceous gout in adults who may also have erosive joint involvement and in whom xanthine oxidase inhibitors at the maximum dose have failed to normalise serum uric acid, or for whom these medicines are contraindicated.	х		18/07/2013	22	Not on Trust formulary. MMC deemed not applicable and compliant with non-use (18/07/13). Rheumatology Consultants confirmed compliance with non-use (07/13)
Overactive bladder - mirabegron (TA290)	26/06/2013	<b>Mirabegron</b> - recommended as an option for treating the symptoms of OAB only for people in whom antimuscarinic drugs are contraindicated or clinically ineffective, or have unacceptable side effects.	х		09/07/2013	13	Not on Trust formulary for this indication. Fast track TA form completed (09/07/13). Urology Consultants confirmed compliance (09/07/13). MMC deemed applicable & compliant with use (18/07/13)
Myelofibrosis (splenomegaly, symptoms) - ruxolitinib (TA289)	26/06/2013	<b>Ruxolitinib</b> - <b>NOT RECOMMENDED</b> for the treatment of disease-related splenomegaly or symptoms in adult patients with primary myelofibrosis (aka chronic idiopathic myelofibrosis), post polycythaemia vera myelofibrosis or post essential thrombocythaemia myelofibrosis.	х		08/08/2013	43	On Trust formulary for this indication (08/08/13).  Not recommended by NICE. On National Cancer Drugs Fund. MMC approved (08/08/13).
Type 2 diabetes - Dapagliflozin combination therapy (TA288)	26/06/2013	Dapagliflozin - dual therapy with metformin - recommended as an option for treating T2DM, only if it is used as described for DPP-4 inhibitors in T2DM: the management of type 2 diabetes (NICE CG87).  Dapagliflozin in combination with insulin with or without other antidiabetic drugs is recommended as an option for treating T2DM.  Dapagliflozin - NOT RECOMMENDED for triple therapy - with metformin and a sulfonylurea to treat T2DM, except as part of a clinical trial.	x		18/07/2013	22	On Trust formulary for this indication (18/07/13). Diabetes Consultants confirmed compliance (25/07/13). MMC deemed applicable & compliant with use (18/07/13)

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	ence of local fo	rmulary to NICE
			Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	<b>Notes</b> (e.g. rationale, method of making available)
Pulmonary embolism and recurrent venous thromboembolism - rivaroxaban (TA287)	26/06/2013	<b>Rivaroxaban</b> - recommended as an option for treating pulmonary embolism and preventing recurrent deep vein thrombosis & pulmonary embolism in adults.	х		18/07/2013		Not on Trust formulary for this indication. Fast track TA form completed (10/07/13). Haematology . Cardiology / Obs & Gynaecology Consultants confirmed compliance (10/07/13). MMC deemed applicable & compliant with use (18/07/13)
Schizophrenia or bipolar disorder - loxapine inhalation (TERMINATED APPRAISAL) (TA286)	22/05/2013	<b>Loxapine</b> - <b>NOT RECOMMENDED</b> for the treatment of acute agitation and disturbed behaviours associated with schizophrenia and bipolar disorder because no evidence submission was received from the manufacturer of the technology.	х		13/06/2013	22	Not on Trust formulary for this indication. MMC deemed not applicable and compliant with non-use (13/06/13)
Ovarian, fallopian tube and primary peritoneal cancer (recurrent advanced, platinum-sensitive or partially platinum-sensitive) - bevacizumab (TA285)	22/05/2013	<b>Bevacizumab</b> with <b>gemcitabine</b> and <b>carboplatin</b> - <b>NOT RECOMMENDED</b> to treat people with the 1 <sup>st</sup> recurrence of platinum-sensitive advanced ovarian cancer (including fallopian tube & primary peritoneal cancer) who haven't received prior therapy with bevacizumab or other VEGF inhibitors or VEGF receptor-targeted agents.	х		23/05/2013		Not on Trust formulary for this indication, chemotherapy would be offered at the Christie hospital. Lead Clinical Pharmacist for Obstetrics & Gynaecology confirmed patients undergo surgery & then receive chemotherapy at the Christie (23/05/13). MMC deemed not applicable and compliant with non-use (13/06/13)
Bevacizumab in combination with paclitaxel and carboplatin for first-line treatment of advanced ovarian cancer (TA284)	22/05/2013	Bevacizumab with paclitaxel and carboplatin - NOT RECOMMENDED for 1 <sup>st</sup> -line treatment of advanced ovarian cancer (International Federation of Gynaecology and Obstetrics [FIGO] stages IIIB, IIIC and IV epithelial ovarian, fallopian tube or primary peritoneal cancer).	х		23/05/2013		Not on Trust formulary for this indication, chemotherapy would be offered at the Christie hospital. Lead Clinical Pharmacist for Obstetrics & Gynaecology confirmed patients undergo surgery & then receive chemotherapy at the Christie (23/05/13). MMC deemed not applicable and compliant with non-use (13/06/13)
Macular oedema (retinal vein occlusion) - ranibizumab ( <b>TA283</b> )	22/05/2013	Ranibizumab - recommended as an option for treating visual impairment caused by macular oedema:  ● following central retinal vein occlusion or  ● following branch retinal vein occlusion only if treatment with laser photocoagulation has not been beneficial, or when laser photocoagulation is not	х		13/06/2013		Not on Trust formulary for this indication. Fast track TA form completed (08/07/13). MREH Consultants confirmed compliance (13/06/13). MMC deemed applicable & compliant with use (13/06/13)
Idiopathic pulmonary fibrosis - pirfenidone (TA282)	24/04/2013	Pirfenidone - recommended as an option for treating idiopathic pulmonary fibrosis only if:  • the person has a forced vital capacity (FVC) between 50% and 80% predicted and  • the manufacturer provides pirfenidone with the discount agreed in the patient access scheme.	х		16/05/2013		Not on Trust formulary for this indication. Respiratory Consultants confirmed compliance - patients referred to centre at UHSM for treatment. MMC deemed applicable & compliant (16/05/13)
Gout - canakinumab (TERMINATED APPRAISAL) (TA281)	24/04/2013	Canakinumab - NOT RECOMMENDED for use in the NHS for treating gouty arthritis attacks and reducing the frequency of subsequent attacks because no evidence submission was received from the manufacturer of the technology.	x		16/05/2013	22	Not on Trust formulary for this indication. MMC deemed not applicable as compliant with non-use (16/05/13)
Rheumatoid arthritis - abatacept (2 <sup>nd</sup> line) (rapid review of TA234) ( <b>TA280</b> )	24/04/2013	Abatacept with methotrexate - recommended as a treatment option for rheumatoid arthritis in adults whose disease has responded inadequately to 2 conventional disease-modifying anti rheumatic drugs (DMARDs), including methotrexate	х		09/12/2010		On Trust formulary for this indication (09/12/10). Rheumatology Consultants confirmed compliance (04/05/13). MMC deemed applicable & compliant with (13/06/13)

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	Adherence of local formulary to NICE					
			Yes (mark 'x' if applicable)	N/A (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)	
Vertebral fractures - vertebroplasty and kyphoplasty (TA279)		Percutaneous vertebroplasty & percutaneous balloon kyphoplasty without stenting - recommended as treatment options for osteoporotic vertebral compression fractures		x	07/06/2013		Surgical treatment for this condition is offered at specialist centre. (07/06/13)	
Asthma (severe, persistent, patients aged 6+, adults) - omalizumab (review of TA133, TA201) (TA278)		Omalizumab - recommended as an option for treating severe persistent confirmed allergic IgE-mediated asthma as an add-on to optimised standard therapy in people aged 6 years and older who need continuous or frequent treatment with oral corticosteroids (defined as 4 or more courses in the previous year)			05/03/2008		On Trust formulary for this indication (Paeds - 05/03/08; Adults - 08/10/09). Respiratory Consultants (adults) confirmed compliance (23/05/13); Paed's (06/13). MMC deemed applicable & compliant with use (13/06/13)	
			30	1				
			% "Yes"	% "N/A"	-	Average implement time(days)		
Adherence statistics for 2013-14			97%	3%		-182		



**NHS Foundation Trust** 

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	herence of local formulary to NICE			
	nereuse	maidated 2) mez	Yes (mark 'x' if applicable)	N/A (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)		
2012-13									
Methylnaltrexone for treating opioid-induced bowel dysfunction in people with advanced illness receiving palliative care (TERMINATED APPRAISAL) (TA277)	27/03/2013	<b>Methylnaltrexone</b> - unable to recommend NHS use. TA terminated due to lack of evidence submission for treating opioid induced bowel dysfunction in people with advanced illness receiving palliative care.	х		22/04/2013	26	On Trust formulary for this indication (Palliative Care only). Palliative Care Consultants confirmed not regularly prescribed except for palliative patients who suffer from severe refractory opioid induced constipation that does not respond to conventional laxatives. MMC deemed compliant with non-use (11/04/13)		
Cystic fibrosis (pseudomonas lung infection) - colistimethate sodium and tobramycin (TA276)	27/03/2013	<b>Tobramycin DPI &amp; Colistimethate sodium DPI</b> - recommended as options for treating chronic pulmonary infection caused by <i>Pseudomonas aeruginosa</i> in people with cystic fibrosis	х		11/04/2013	15	Not on Trust formulary for this indication. Fast track TA form to be completed. Adult Respiratory Consultants stated not applicable CF patients care provided by SMUHT. MMC deemed not applicable & compliant with guidance (11/04/13)		
Stroke and systemic embolism (prevention, non-valvular atrial fibrillation) - apixaban (TA275)	27/02/2013	Apixaban - recommended as an option to prevent stroke and systemic embolism in people with nonvalvular atrial fibrillation.	х		14/03/2013	15	Not on Trust formulary for this indication. Fast track TA form completed (28/05/13). Cardiology Consultants confirmed compliance (28/05/13). MMC deemed applicable & compliant with guidance (14/03/13)		
Macular oedema (diabetic) - ranibizumab (TA274)	27/02/2013	Ranibizumab - recommended as an option to treat visual impairment due to diabetic macular oedema.	х		27/02/2013	O	On Trust formulary for this indication. Fast track TA form completed (12/04/13). MREH Consultants confirmed compliance (27/02/13). MMC deemed applicable & compliant with (14/03/13)		
Hyperplasia (benign prostatic) - tadalafil (TERMINATED APPRAISAL) (TA273)	23/01/2013	<b>Tadalafil</b> - Unable to recommend NHS use. TA terminated due to lack of evidence submission.	х		23/01/2013		Not on Trust formulary for this indication. Urology Consultants confirmed compliance (03/02/13). MMC deemed not applicable as compliant with non-use (14/02/13)		
Urothelial tract carcinoma (transitional cell, advanced, metastatic) - vinflunine (TA272)	23/01/2013	<b>Vinflunine - NOT RECOMMENDED</b> for the treatment of advanced or metastatic transitional cell carcinoma of the urothelial tract that has progressed after treatment with platinum-based chemotherapy.	x		03/02/2013	11	Not on Trust formulary for this indication. Urology Consultants confirmed compliance (03/02/13). MMC deemed not applicable as compliant with non-use (14/02/13)		
Diabetic macular oedema - fluocinolone acetonide intravitreal implant ( <b>TA271</b> )	23/01/2013	Fluocinolone acetonide intravitreal implant - not recommended for the treatment of chronic diabetic macular oedema.	х		06/02/2013		Not on Trust formulary for this indication. MREH Consultants confirmed compliance (06/02/13). MMC deemed not applicable as compliant with non-use (14/02/13)		
Leukaemia (acute myeloid ) - decitabine (terminated appraisal) (TA270)		<b>Decitabine</b> - Unable to recommend NHS use. TA terminated due to lack of evidence submission.	x		10/01/2013		Not on Trust formulary for this indication. MMC deemed not applicable as compliant with non-use (10/01/13)		
Melanoma (BRAF V600 mutation positive, unresectable metastatic) - vemurafenib (TA269)		<b>Vemurafenib</b> - recommended as an option for treating BRAF V600 mutation positive unresectable or metastatic melanoma.		х	17/12/2012		Not on Trust formulary for this indication, chemotherapy would be offered at the Christie hospital. MMC deemed not applicable (10/01/13)		
Melanoma (stage III or IV) - ipilimumab (TA268)	14/12/2012	<b>Ipilimumab</b> - recommended as an option for treating advanced (unresectable or metastatic) melanoma in people who have received prior therapy.		х	17/12/2012	3	Not on Trust formulary for this indication, chemotherapy would be offered at the Christie hospital. MMC deemed not applicable (10/01/13)		

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	rmulary to NICE
			Yes (mark 'x' if applicable)	<b>N/A</b> (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	<b>Notes</b> (e.g. rationale, method of making available)
Chronic heart failure - ivabradine (TA267)	28/11/2012	Ivabradine - recommended as an option for treating chronic heart failure.	х		12/06/2008	-1630	Approved by Trust MMC for this indication 12/06/2008. MMC approved NICE guidelines (13/12/12)
Cystic fibrosis - mannitol dry powder for inhalation (TA266)	28/11/2012	Mannitol dry powder for inhalation - is recommended as an option for treating cystic fibrosis in adults		x	29/11/2012		Not on Trust formulary for this indication, Respiratory Consultants confirmed they do not provide / supervise adult CF treatment (29/11/12). MMC deemed not applicable (13/12/12)
Bone metastases from solid tumours - denosumab (TA265)	24/10/2012	<b>Denosumab</b> - recommended as an option for preventing skeletal-related events in adults with bone metastases from breast cancer and from solid tumours other than prostate	х		12/08/2010	-804	Approved by Trust MMC for this indication 12/08/2010
Stroke (acute, ischaemic) - alteplase (TA264)	27/09/2012	Alteplase - recommended for treating acute ischaemic stroke in adults.	х		11/03/2004	-3122	Alteplase MMC approved (11/03/04). MMC approved NICE guidelines (18/10/12)
Bevacizumab in combination with capecitabine for the 1 <sup>st</sup> -line treatment of metastatic breast cancer ( <b>TA263</b> )	22/08/2012	Bevacizumab in combination with capecitabine - NOT RECOMMENDED for the $1^{\text{st}}$ -line treatment of metastatic breast cancer.	x		13/09/2012		Not on Trust formulary for this indication, chemotherapy would be offered at the Christie hospital. MMC deemed not applicable (13/09/12)
Venous thromboembolism (treatment and long term secondary prevention) - rivaroxaban (TA261)	23/07/2012	<b>Rivaroxaban</b> – recommended as a possible treatment for DVT, and to help prevent a pulmonary embolism or another DVT.	х		12/01/2012	-193	Approved by Trust MMC for this indication 12/01/2012
Ulcerative colitis (moderate to severe, 2Nd line) - adalimumab (TERMINATED APPRAISAL) (TA262)	26/07/2012	Adalimumab – NOT RECOMMENDED . TA terminated due to lack of evidence submission.	х		09/08/2012	14	Not on Trust formulary for this indication, however an application for this indication is expected
Breast cancer (metastatic hormone-receptor) - lapatinib and trastuzumab (with aromatase inhibitor) (TA257)	04/07/2012	<b>Lapatinib &amp; trastuzumab</b> - <b>NOT RECOMMENDED</b> with an aromatase inhibitor for post-menopausal women with HER2 & hormone receptor + metastatic breast cancer.	x		12/07/2012		Not on Trust formulary for this indication, chemotherapy would be offered at the Christie hospital
Migraine (chronic) - botulinum toxin type A (TA260)	26/06/2012	<b>Botulinum toxin</b> – recommended as a possible treatment for preventing headaches in some adults with chronic migraine.		х	02/07/2012	6	Not on Trust formulary for this indication, this treatment would be offered at Salford Royal hospital
Prostate cancer (metastatic, castration resistant) - abiraterone (following cytoxic therapy) ( <b>TA259</b> )	20/06/2012	<b>Abiraterone</b> c recommended as possible treatment for metastatic prostate cancer after testosterone reduction therapy and docetaxel.		x	28/06/2012		Not on Trust formulary for this indication, chemotherapy would be offered at the Christie hospital
Lung cancer (non small cell, EGFR-TK mutation positive) - erlotinib (1st line) ( <b>TA258</b> )	15/06/2012	<b>Erlotinib</b> – recommended as a possible first-line treatment in locally advanced or metastatic non-small-cell lung cancer.		х	27/06/2012	12	Not on Trust formulary for this indication, chemotherapy would be offered at the Christie hospital
Atrial fibrillation (stroke prevention) - rivaroxaban (TA256)	24/05/2012	<b>Rivaroxaban</b> – recommended as an option for AF patients with risk factors.	х		08/03/2012	-77	Approved by Trust MMC for this indication 08/03/12
Prostate cancer - cabazitazel (TA255)	15/05/2012	Cabazitaxel – NOT RECOMMENDED for patients who have had docetaxel.	х		28/06/2012		Not on Trust formulary for this indication, chemotherapy if recommended would be offered at the Christie hospital
Hepatitis C (genotype 1) - telaprevir (TA252)	14/05/2012	<b>Telaprevir</b> — recommended with peginterferon and ribavirin for previously untreated patients, or those not responding enough to peginterferon.	x		13/10/2011	-214	Approved by Trust MMC for this indication 13/10/11
		1					<u> </u>

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA	Availability of medicine for NHS patients with this medical condition, as			Adhere	nce of local fo	rmulary to NICE
rides are hyperiniks to full guidance	Release	indicated by NICE	Yes (mark 'x' if applicable)	N/A (mark 'x' if applicable)	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Hepatitis C (genotype 1) - boceprevir (TA253)		<b>Boceprevir</b> – recommended with peginterferon and ribavirin in compensated liver disease in untreated patients, or those unresponsive to previous treatment.	х		13/10/2011	-214	Approved by Trust MMC for this indication 13/10/11
Multiple sclerosis (relapsing-remitting) - fingolimod (TA254)	27/04/2012	Fingolimod – recommended for patients not responding sufficiently to beta interferon.		х	26/04/2012		Not on Trust formulary for this indication, this treatment would be offered at Salford Royal hospital (26/04/12). MMC deemed not applicable (10/05/12)
Leukaemia (chronic myeloid, first line) - dasatanib, nilotinib and standard-dose imatinib (TA251)		Imatinib – recommended as an option. Nilotinib – only under a patient access scheme. Dasatinib – not recommended.	х		08/11/2001		Imatinib approved by MMC 08/11/01, Nilotinib 08/01/09, Dasatinib 14/06/07. Compliance with guidance not received from Haem Consultants
Breast cancer (advanced) - eribulin (TA250)		Eribulin – NOT RECOMMENDED if cancer has progressed despite two chemotherapy regimens.	х		27/04/2012		Not on Trust formulary for this indication, chemotherapy if recommended would be offered at the Christie hospital
			21	7			
			% "Yes"	% "N/A"	-	Average implement time(days)	
Adherence statistics for 2012-13			75%	25%		-351	



**NHS Foundation Trust** 

<b>Technology appraisal (TA)</b> Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	rmulary to NICE
			Yes	N/A	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
2011-12							
Atrial fibrillation - dabigatran etexilate (TA249)	01/03/2012	Dabigatran – recommended as an option for AF patients with risk factors to prevent stroke and embolism.	х		10/11/2011	-112	Approved by Trust MMC for this indication 10/11/11
Rheumatoid arthritis - tocilizumab ( <b>TA247</b> update to TA198)	01/02/2012	<b>Tocilizumab</b> – recommended with methotrexate as an option for rheumatoid arthritis after other treatments have failed or not been tolerated.	х		14/10/2010	-475	Approved by Trust MMC for this indication 14/10/10
Diabetes (type 2) - exenatide (prolonged release) (TA248)	01/02/2012	Exenatide prolonged release – recommended in combination with oral drugs as an option for selected patients with type 2 diabetes	х		10/11/2011	-83	Approved by Trust MMC for this indication 10/11/11
Venom anaphylaxis - immunotherapy pharmalgen ( <b>TA246</b> )	01/02/2012	Pharmalgen – recommended treatment for bee or wasp venom allergy after a severe reaction, or moderate reaction in certain circumstances.	х		22/02/2012	21	Immunology consultants confirmed compliance 22/02/12
Venous thromboembolism (hip and knee surgery) - apixaban (TA245)	01/01/2012	Apixaban – recommended option to reduce thromboembolism after knee/hip replacement.	х		09/02/2012	39	No application received by MMC for this indication, discussed at MMC 09/02/12 and deemed not applicable.
Chronic obstructive pulmonary disease - roflumilast (TA244)	01/01/2012	Roflumilast – only recommended as part of a clinical trial.		х	08/02/2012	38	Not on Trust formulary for this indication, Respiratory Consultants do not intend applying for it (08/02/12)
Colorectal cancer (metastatic) 2nd line - cetuximab, bevacizumab and panitumumab (TA242)	01/01/2012	Cetuximab – not recommended.  not recommended with fluoropyrimidines.  Panitumumab - not recommended.		х	09/02/2012	39	Not on Trust formulary for this indication, chemotherapy would be offered at the Christie hospital for this indication
Follicular lymphoma - rituximab (TA243)	01/01/2012	<b>Rituximab</b> – recommended in combination for first line treatment of stage III–IV disease.	х		09/02/2012		Approved by Trust MMC for this indication 09/02/2012. Haematology Consultants confirmed compliance (08/10/12)
Leukaemia (chronic myeloid) - dasatinib, nilotinib, imatinib (intolerant, resistant) (TA241)	01/01/2012	Dasatinib – not recommended. Nilotinib – recommended for Philadelphia-chromosome-positive CML if imatinib unsuccessful or unsuitable.  Imatinib - not recommend if imatinib-resistant.	x		09/02/2012		Imatinib approved by MMC 08/11/01, Nilotinib 08/01/09, Dasatinib 14/06/07. Compliance with guidance not received from Haem Consultants
Arthritis (juvenile idiopathic, systemic) - tocilizumab ( <b>TA238</b> )	01/12/2011	Tocilizumab – recommended if NSAIDs, steroids and methotrexate have failed.	х		07/09/2011	-85	Approved on urgent Clinical need basis 07/09/11. Paed Rheumatology consultants confirmed compliance 02/07/12
Breast cancer (metastatic) - fulvestrant (TA239)	01/12/2011	<b>Fulvestrant</b> – not recommend post-menopause in metastatic disease if oestrogen-dependent, or if it returned/worsened after anti-oestrogens.		х	12/01/2012		Not on Trust formulary for this indication, chemotherapy if recommended would be offered at the Christie hospital

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	rmulary to NICE
			Yes	N/A	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Colorectal cancer (metastatic) - panitumumab (terminated appraisal) ( <b>TA240</b> )	01/12/2011	Panitumumab - Unable to recommend NHS use. TA terminated due to lack of evidence submission.		х	12/01/2012	42	Not on Trust formulary for this indication, chemotherapy if recommended would be offered at the Christie hospital
Macular oedema (diabetic) - ranibizumab (TA237)	30/11/2011	Ranibizumab – not recommend for people with diabetic macular oedema.		х	08/12/2011	8	Not on Trust formulary for this indication, deemed not applicable by MMC 08/12/2011.
Osteosarcoma - mifamurtide ( <b>TA235</b> )	01/10/2011	<b>Mifamurtide</b> – recommended as a treatment for specified children, adolescents and young adults with osteosarcoma.	х		14/12/2011	74	Not on Trust formulary for this indication, Paediatric Oncology confirmed compliance 14/12/2011.
Acute coronary syndromes - ticagrelor (TA236)	01/10/2011	<b>Ticagrelor</b> – recommended combined with low-dose aspirin for up to a year as a treatment for specified people with acute coronary syndromes.	х		21/10/2011	20	Approved in principle prior to full logistical organisation across GMMMG & GMCCSN networks. Fully approved by MMC 12/07/12
Ankylosing spondylitis - golimumab (TA233)	24/08/2011	<b>Golimumab</b> – a recommended option for severe, active ankylosing spondylitis in the same circumstances as TA143 when NSAIDs unsuccessful.	x		08/10/2011	45	Approved by Trust MMC for this indication 13/10/11. Rheumatology Consultants confirmed compliance 08/10/11
Rheumatoid arthritis - abatacept (2nd line) (TA234)	24/08/2011	Abatacept – not recommended with methotrexate in moderate to severe RA if DMARDs ineffective.	x		06/09/2011	13	Approved by Trust MMC for this indication 13/10/11. Rheumatology Consultants confirmed compliance 06/09/11
Macular oedema (retinal vein occlusion) - dexamethasone ( <b>TA229</b> )	01/07/2011	<b>Dexamethasone intravitreal implant</b> – recommended for specified people with macular oedema due to retinal vein occlusion.	x		09/06/2011	-22	Approved by Trust MMC for this indication 09/06/11. Rheumatology Consultants confirmed compliance 14/10/11
Depression - agomelatine (TERMINATED APPRAISAL) (TA231)	01/07/2011	<b>Agomelatine</b> - Unable to recommend NHS use for major depressive episodes. TA terminated due to lack of evidence submission.		х	11/08/2011	41	No application received by MMC for this indication, discussed at MMC 11/08/11 and deemed not applicable
Epilepsy (partial) - retigabine (adjuvant) (TA232)	01/07/2011	Retigabine – recommended adjunctive option for partial onset seizures with or without secondary generalisation in some people with epilepsy.		x	28/07/2011	27	Not on Trust formulary for this indication, this treatment would be offered at Salford Royal hospital. Neurology consultants stated SRFT prescribing 28/07/11
Multiple myeloma (first line) - bortezomib and thalidomide (TA228)	01/07/2011	<b>Thalidomide</b> – recommended 1st-line option for specified people with multiple myeloma. <b>Bortezomib</b> – recommended 2nd-line if thalidomide not tolerated or suitable.	х		27/07/2011	26	Bortezomib MMC approved for this indication (11/01/07). Haematology consultants confirmed compliance (27/07/11)
Myocardial infarction (persistent ST-segment elevation) - bivalirudin (TA230)	01/07/2011	<b>Bivalirudin</b> - recommended as a possible treatment for adults with STEMI having percutaneous coronary intervention.	х		08/10/2009	-631	MMC approved for this indication (08/10/09). Cardiology consultants confirmed compliance (30/09/11)
Lung cancer (non-small-cell, advanced or metastatic maintenance treatment) - erlotinib (monotherapy) (TA227)	01/06/2011	<b>Erlotinib</b> – not recommended as maintenance after platinum-chemotherapy in locally advanced or metastatic non-small-cell lung cancer.		х	01/07/2011	30	Not on Trust formulary, Respiratory Consultants confirmed chemotherapy if recommended would be offered at the Christie hospital for this indication (01/07/11)
Lymphoma (follicular non-Hodgkin's) - rituximab ( <b>TA226</b> )	01/06/2011	Rituximab – recommended as a possible treatment to maintain remission in follicular non-Hodgkin's lymphoma.	х		09/09/2011	100	Not on Trust formulary for this indication, Haematology Consultants confirmed compliance 09/09/11
Rheumatoid arthritis (after failure of previous anti-rheumatic drugs) - golimumab (TA225)	22/06/2011	<b>Golimumab</b> – recommended with methotrexate as a possible treatment for rheumatoid arthritis in the same circumstances as TA130.	х		13/10/2011	113	MMC approved for this indication (13/10/11), Rheumatology consultants conformed compliance (08/11/11)

Technology appraisal (TA) Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	Adherence of local formulary to NICE				
			Yes	N/A	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Rheumatoid arthritis (methotrexate-naïve) - golimumab (TERMINATED APPRAISAL) (TA224)		Golimumab – Unable to recommend NHS use. TA terminated due to lack of evidence submission.		х	14/07/2011	22	Not on Trust formulary for this indication, discussed at MMC 14/07/11 and deemed not applicable.
Peripheral arterial disease - cilostazol, naftidrofyryl oxalate, pentoxifylline and inositol nicotinate (TA223)		Naftidrofuryl oxalate – recommended as an option for intermittent claudication in people with peripheral arterial disease. Cilostazol, pentoxifylline and inositol nicotinate – NOT RECOMMENDED.	x		12/09/2011	111	Naftidrofuryl oxylate approved for this indication. Vascular surgeons confrimed compliance (12/09/11)
Thrombocytopenic purpura - romiplostim (TA221)	27/04/2011	Romiplostim – recommended for chronic, severe, and refractory ITP	x		11/03/2010		MMC approved for this indication (11/03/10). Haematology consultants conformed compliance 17/06/11
Ovarian cancer (relapsed) - trabectedin (TA222)		Trabectedin – NOT RECOMMENDED with pegylated liposomal doxorubicin for relapsed platinum-sensitive ovarian cancer.		х	12/05/2011		Not on Trust formulary for this indication, chemotherapy if recommended would be offered at the Christie hospital, deemed not applicable by MMC (12/05/11)
Psoriatic arthritis - golimumab (TA220)		<b>Golimumab</b> – recommended as a possible treatment after trying other DMARDs in the same circumstances as TA199.	х		13/10/2011	195	MMC approved for this indication (13/10/11), Rheumatology consultants conformed compliance (08/11/11)
Everolimus for the second-line treatment of advanced renal cell carcinoma ( <b>TA219</b> )	01/04/2011	<b>Everolimus – NOT RECOMMENDED</b> 2 <sup>nd</sup> line for advanced renal cell carcinoma.		х	20/04/2011		Not on Trust formulary for this indication, chemotherapy if recommended would be offered at the Christie hospital, deemed not applicable by MMC (12/05/11)
·		·	20	11			
			% "Yes"	% "N/A"	-	Average implement time (days)	
Adherence statistics for 2011-12			65%	35%		-21	



**NHS Foundation Trust** 

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	rmulary to NICE
			Yes	N/A	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
2010-11							
Alzheimer's disease - donepezil, galantamine, rivastigmine and memantine (TA217)	23/03/2011	<b>Donepezil, galantamine, rivastigmine</b> – recommended for mild and moderate disease. <b>Memantine</b> – recommended for moderate disease if people cannot take AChE inhibitors, and for managing severe disease.	x		14/04/2011	22	Donepezil approved 12/03/98 and rivastigmine 12/11/98. All drugs are on formulary for this indication. Management of these patients is under Manchester Health & Social Care Trust. Discussed at MMC 14/04/11
Myelodysplastic syndromes - azacitidine (TA218)	23/03/2011	Azacitidine – recommended as an option for specified adults not eligible for haematopoietic stem cell transplantation.	х		08/04/2010	-349	MMC approved for this indication (08/04/10). Haematology consultants confirmed compliance (06/06/11)
Renal cell carcinoma (first line metastatic) - pazopanib (TA215)	23/02/2011	Pazopanib – recommended as a possible treatment for some people with renal cell carcinoma.	х		10/03/2011	15	Not on Trust formulary for this indication, Renal confirmed chemo at the Christie, discussed at MMC 10/03/11 and deemed not applicable.
Breast cancer - bevacizumab (in combination with a taxane) (TA214)	01/02/2011	<b>Bevacizumab</b> – not recommended with a taxane first line for metastatic breast cancer.	х		10/03/2011		Not on Trust formulary for this indication, chemotherapy if recommended would be offered at the Christie hospital, deemed not applicable by MMC (10/03/11)
Leukaemia (lymphocytic) - bendamustine (TA216)	01/02/2011	<b>Bendamustine</b> – recommended for untreated chronic lymphocytic leukaemia of Binet stage B or C where fludarabine cannot be used.	х		10/03/2011	37	MMC approved for this indication (10/03/11). Haematology consultants confirmed compliance (14/03/11)
Schizophrenia - aripiprazole (TA213)	26/01/2011	Aripiprazole – recommended in 15 to 17 year olds with schizophrenia if risperidone unresponsive/ unsuitable.	x		01/07/2009	-574	MMC approved for this indication (01/07/09). RMCH Psychiatry Consultants confirmed compliance (30/03/12)
Osteoporosis - primary prevention (TA160)	26/01/2011	To prevent fractures in postmenopausal women with osteoporosis but no fractures:  Alendronate – recommended.  Risedronate, etidronate – recommended if alendronate not suitable.  Strontium ranelate – recommended if bisphosphonates not suitable.  Raloxifene – NOT RECOMMENDED	x		08/07/2009		Risedronate MMC approved for this indication (08/06/00), Raloxifene approved (12/11/98), Strontium ranelate (13/01/05). Consultant with specialist interest in this field confirmed compliance with original guidance (08/07/09)
Osteoporosis - secondary prevention including strontium ranelate ( <b>TA161</b> )	26/01/2011	To prevent fractures in postmenopausal women with osteoporosis who have had fractures:  Alendronate – recommended.  Risedronate, etidronate – recommended if alendronate not suitable.  Strontium ranelate, raloxifene – recommended if bisphosphonates not suitable.  Teriparatide – If above options not suitable, or fracture sustained while on bisphosphonates.	x		08/07/2009		Risedronate MMC approved for this indication (08/06/00), Raloxifene approved (12/11/98), Strontium ranelate (13/01/05) and Teriparatide (10/02/05). Consultant with specialist interest in this field confirmed compliance with original guidance (08/07/09)

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	Adherence of local formulary to NICE				
			Yes	N/A	Date of local decision (DD/MM/YY)	Time to implement (days)	<b>Notes</b> (e.g. rationale, method of making available)			
Constipation (women) - prucalopride (TA211)	15/12/2010	<b>Prucalopride</b> – recommended as option for women with chronic constipation after failure of high dose laxatives.	х		12/08/2010		MMC approved for this indication (12/08/10). Consultant who applied to MMC for this indication, confirmed compliance 11/01/11			
Vascular disease - clopidogrel and dipyridamole ( <b>TA210</b> )	15/12/2010	To prevent occlusive vascular events: Clopidogrel – recommended after ischaemic stroke; in peripheral arterial/ multivascular disease; after MI only if aspirin not suitable. Dipyridamole m/r with aspirin – recommended after a TIA; or after an ischaemic stroke only if clopidogrel unsuitable.  Dipyridamole m/r alone – recommended after an ischaemic stroke if aspirin and clopidogrel unsuitable, or after a TIA if aspirin unsuitable.	x		14/03/2002		Clopidogrel MMC approved for this indication (14/03/02), Dipyridamole m/r approved (14/03/02). Stroke Consultants conformed compliance (17/08/11)			
Colorectal cancer (metastatic) - bevacizumab (TA212)	15/12/2010	Bevacizumab – not recommended with oxaliplatin and either fluorouracil plus folinic acid, or capecitabine for metastatic colorectal cancer.	х		13/01/2011		Not on Trust formulary for this indication, chemotherapy if recommended would be offered at the Christie hospital, deemed not applicable by MMC (13/01/11)			
Gastric cancer (HER2-positive metastatic) - trastuzumab ( <b>TA208</b> )	24/11/2010	<b>Trastuzumab</b> – recommended as possible treatment for specified types of HER2-positive metastatic gastric adenocarcinoma.	х		09/12/2010		Not on Trust formulary for this indication, chemotherapy if recommended would be offered at the Christie hospital, deemed not applicable by MMC (09/12/10)			
Gastrointestinal stromal tumours (unresectable/metastatic) - imatinib (TA209)	24/11/2010	Imatinib – not recommended at higher doses if unresectable and/or metastatic GISTs get worse despite imatinib 400 mg a day. See also TA86.	х		09/12/2010	15	Not on Trust formulary for this indication, Treatment for solid tumours of this kind offered at the Christie hospital, deemed not applicable by MMC (09/12/10)			
Diabetes (type 2) - liraglutide ( <b>TA203</b> )	27/10/2010	<b>Liraglutide</b> – recommended at a dose of 1.2 mg daily and no more, with specified oral therapy.	х		14/01/2010		MMC approved for this indication (14/01/10). Diabetes consultants confirmed compliance (23/11/10)			
Osteoporotic fractures - denosumab (TA204)	27/10/2010	<b>Denosumab</b> – recommended for primary and secondary prevention of fractures in postmenopausal women with osteoporosis if oral bisphosphonates not suitable.	х		12/08/2010		MMC approved for this indication (12/08/10). Consultant who applied for this indication confirmed compliance (09/11/10)			
Asthma (in children) - omalizumab (TA201)	27/10/2010	Omalizumab – not recommended for children aged 6 to 11 years with severe persistent allergic asthma.	х		11/11/2010		Approved by Paediatric MMC for add-on therapy in asthma patients (05/03/08). Paediatric Respiratory Consultants confirmed compliance (11/11/10)			
Chronic lymphocytic leukaemia - ofatumumab (TA202)	27/10/2010	Ofatumumab – not recommended for chronic lymphocytic leukaemia refractory to fludarabine and alemtuzumab.	х		17/01/2011	82	Not on Trust formulary for this indication, Haematology Consultants confirmed compliance (17/01/11)			
Lymphoma (non-Hodgkin's) - bendamustine (terminated appraisal) ( <b>TA206</b> )	27/10/2010	Bendamustine – Unable to recommend NHS use. TA terminated due to lack of evidence submission.		х	10/03/2011	134	deemed not applicable by MMC (11/11/10). MMC approved for this indication in accordance with North West Interim Cancer Drugs Fund panel document (10/03/11)			
Mantle cell lymphoma (relapsed) - temsirolimus (terminated appraisal) (TA207)	27/10/2010	<b>Temsirolimus</b> – Unable to recommend NHS use. TA terminated due to lack of evidence submission.		х	11/11/2010	15	Not on Trust formulary for this indication, deemed not applicable by MMC (11/11/10)			

Technology appraisal (TA) Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	Adherence of local formulary to NICE				
			Yes	N/A	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Thrombocytopenic purpura - eltrombopag (TA205)	27/10/2010	Eltrombopag – not recommended chronic immune (idiopathic) thrombocytopenic purpura.		х	14/08/2008		MMC approved for this indication (14/08/08) Partial compliance response from Haematology 14/11/2010 (CPC approved 24/11/2010)
Hepatitis C - peginterferon alfa and ribavirin (TA200)	22/09/2010	Combination therapy with <b>peginterferon alfa</b> (2a or 2b) and <b>ribavirin</b> is recommended as a treatment option for adults with chronic hepatitis C	х		11/09/2003	-2568	MMC approved for this indication (11/09/03) Compliant response from Gastro Consultants (27/9/10).
Rheumatoid arthritis - drugs for treatment after failure of a TNF inhibitor ( <b>TA195</b> )	25/08/2010	Rituximab in combination with methotrexate -recommended as an treatment option for adults with severe active rheumatoid arthritis who have had an inadequate response to, or are intolerant of, other DMARDs, including at least one TNF inhibitor.	х		14/08/2008	-741	MMC approved for this indication (14/08/08). Rheumatology Consultants conformed compliance (02/10/10)
Psoriatic arthritis - etanercept, infliximab and adalimumab (TA199)	25/08/2010	<b>Etanercept, infliximab</b> and <b>adalimumab</b> are recommended for the treatment of adults with active and progressive psoriatic arthritis	х		09/09/2010	15	MMC approved etanercept, infliximab & adalimumab for this indication (09/09/10). Rheumatology Consultants conformed compliance (14/01/11)
Atrial fibrillation - dronedarone (TA197)	25/08/2010	<b>Dronedarone</b> – recommended as an option for the treatment of non-permanent atrial fibrillation.	х		09/09/2010	15	No prior application received by MMC for this indication, discussed at MMC 09/09/102 and added to the formulary.
Gastrointestinal stromal tumours - imatinib (adjuvant) (TA196)	25/08/2010	Imatinib – not recommended for the adjuvant treatment of GISTs after surgery	x		09/09/2010	15	Not on Trust formulary for this indication, deemed not applicable by MMC (09/09/10)
Lung cancer (non-small-cell, first line) - gefitinib (TA192)	28/07/2010	Gefitinib – recommended as an option for 1st-line treatment of people with locally advanced or metastatic non-small-cell lung cancer (NSCLC)		х	12/08/2010	15	Not on Trust formulary, chemotherapy if recommended would be offered at the Christie hospital. deemed not applicable by MMC (12/08/10)
Bone loss (therapy-induced) in non-metastatic prostate cancer - denosumab (terminated appraisal) (TA194)	28/07/2010	<b>Denosumab</b> – unable to recommend NHS use. TA terminated due to lack of evidence submission.	х		12/08/2010	15	Not on Trust formulary for this indication, deemed not applicable by MMC (12/08/10)
Gastric cancer (advanced) - capecitabine (TA191)	28/07/2010	<b>Capecitabine</b> in combination with a platinum-based regimen is recommended for the 1t-line treatment of inoperable advanced gastric cancer.		×	12/08/2010	15	Not on Trust formulary, chemotherapy if recommended would be offered at the Christie hospital. deemed not applicable by MMC (12/08/10)
Leukaemia (chronic lymphocytic, relapsed) - rituximab ( <b>TA193</b> )	28/07/2010	<b>Rituximab</b> in combination with fludarabine & cyclophosphamide – recommended as a treatment option for people with relapsed or refractory CLL	х		17/01/2011	173	Compliant response from Haematology Consultants (17/01/11)
Lung cancer (non-small-cell) - pemetrexed (maintenance) ( <b>TA190</b> )	23/06/2010	Pemetrexed – recommended as an option for the maintenance treatment of people with locally advanced or metastatic non-small-cell lung cancer		х	08/07/2010	15	Not on Trust formulary, chemotherapy if recommended would be offered at the Christie hospital. deemed not applicable by MMC (08/07/10)
Human growth hormone (somatropin) for the treatment of growth failure in children (review) (TA188)	26/05/2010	Somatropin – recommended as a treatment option for children with growth failure	х		06/07/2010	41	On Trust formulary for this indication. Compliance confirmed by Paediatric Endocrinology Consultants (06/07/10)
Hepatocellular carcinoma (advanced and metastatic) - sorafenib (first line) (TA189)	26/05/2010	Sorafenib – not recommended for the treatment of advanced hepatocellular carcinoma in patients for whom surgical or locoregional therapies have failed or are not suitable	х		11/06/2010	16	Not on Trust formulary, Compliant response from Hepatology Consultants (11/06/10)

Technology appraisal (TA) Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	Adherence of local formulary to NICE				
			Yes	N/A	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Crohn's disease - infliximab (review) and adalimumab (review of TA40) ( <b>TA187</b> )	26/05/2010	Infliximab and adalimumab – recommended as treatment options for adults with severe active Crohn's disease	х		10/06/2010		On Trust formulary for this indication. MMC approved inline with NICE guidance 10/06/10. Compliance confirmed by Gastro Consultants (13/07/10)
			27	6			
			% "Yes"	% "N/A"	_	Average implement time (days)	
Adherence statistics for 2010-11			82%	18%		-275	



**NHS Foundation Trust** 

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release				Adhere	rence of local formulary to NICE
			Yes	N/A	Date of local decision (DD/MM/YY)	implement
2009-10						
Rheumatoid arthritis - certolizumab pegol (TA186)	24/02/2010	Certolizumab pegol – recommended as an option for the treatment of people with Rheumatoid Arthritis.	x		13/05/2010	Rheumatology consultants confirmed compliance (10/06/10)
Soft tissue sarcoma - trabectedin (TA185)	24/02/2010	Trabectedin – recommended as a treatment option for people with advanced soft tissue sarcoma if:  • treatment with anthracyclines & ifosfamide has failed or  • they are intolerant of or have contraindications for treatment with anthracyclines & ifosfamide.		x	11/03/2010	0 15 Not on Trust formulary, chemotherapy if recommended would be offered at the Christie hospital, deemed not applicable by MMC (11/03/10
Lung cancer (small-cell) - topotecan (TA184)	25/11/2009	Topotecan (oral) – recommended as an option only for people with relapsed small-cell lung cancer for whom:  • re-treatment with the 1 <sup>st</sup> -line regimen is not appropriate and  • the combination of cyclophosphamide, doxorubicin & vincristine (CAV) is contraindicated  Topotecan (I.V.) – not recommended for people with relapsed small-cell lung cancer.		x	10/12/2009	9 15 Not on Trust formulary, chemotherapy if recommended would be offered at the Christic hospital, deemed not applicable by MMC (10/12/09)
Cervical cancer (recurrent) - topotecan (TA183)	28/10/2009	<b>Topotecan</b> with <b>cisplatin</b> – recommended as a treatment option for women with recurrent or stage IVB cervical cancer only if they have not previously received cisplatin.		х	12/11/2009	Not on Trust formulary, chemotherapy if recommended would be offered at the Christie hospital, deemed not applicable by MMC (12/11/09)
Acute coronary syndrome - prasugrel (TA182)	28/10/2009	Prasugrel with aspirin — recommended as an option for preventing atherothrombotic events in people with ACS having PCI, only when:  ■ immediate primary PCI for ST-segment-elevation myocardial infarction is necessary or  ■ stent thrombosis has occurred during clopidogrel treatment or  ■ the patient has diabetes mellitus.	х		12/11/2009	9 15 MMC approved for this indication (12/11/09), Cardiology Consultants confirmed compliance (21/07/10)
Lung cancer (non-small-cell, first line treatment) - pemetrexed (TA181)	23/09/2009	$ \begin{tabular}{ll} \textbf{Pemetrexed} & with \ \textbf{cisplatin} - \text{recommended as an option for the $1^{st}$-line treatment} \\ \text{of patients with locally advanced or metastatic non-small-cell lung cancer (NSCLC)}. \\ \end{tabular} $		х	26/01/2010	Not on Trust formulary, chemotherapy if recommended would be offered at the Christie hospital, Respiratory Consultants confirmed not applicable (26/01/10)
Gastrointestinal stromal tumours - sunitinib (TA179)	23/09/2009	Sunitinib – recommended as a treatment option for people with unresectable and/or metastatic malignant gastrointestinal stromal tumours if:  • imatinib treatment has failed because of resistance or intolerance, and  • the drug cost of sunitinib for the first treatment cycle will be met by the manufacturer.		х	08/10/2009	9 15 Not on Trust formulary, chemotherapy if recommended would be offered at the Christie hospital. MMC deemed not applicable (08/10/09) Consultants confirmed solid tumours dealt with a Christie & not applicable (20/01/10)

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	ormulary to NICE
			Yes	N/A	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Psoriasis - ustekinumab ( <b>TA180</b> )	23/09/2009	Ustekinumab — recommended as a treatment option for adults with plaque psoriasis when:  • The disease is severe, total Psoriasis Area Severity Index (PASI) score≥10 & a Dermatology Life Quality Index (DLQI) score >10.  • The psoriasis has not responded to standard systemic therapies, including ciclosporin, methotrexate and PUVA (psoralen and long-wave ultraviolet radiation), or the person is intolerant of or has a contraindication to these treatments.  • The manufacturer provides the 90mg dose (two 45mg vials) for people who weigh more ≥100 kg at the same total cost as for a single 45mg vial.		х	22/10/2009		Not on Trust formulary, no application received or pending. Rheumatology Consultants said unlikely to be prescribed at Trust (22/10/09)
Colorectal cancer (first line) - cetuximab (TA176)	26/08/2009	Cetuximab with 5-fluorouracil (5-FU), folinic acid and oxaliplatin (FOLFOX) — recommended for the 1 <sup>st</sup> -line treatment of metastatic colorectal cancer only when:  • The primary colorectal tumour has been resected or is potentially operable.  • The metastatic disease is confined to the liver and is unresectable.  • The patient is fit enough to undergo surgery to resect the primary colorectal tumour and to undergo liver surgery if the metastases become resectable after treatment with cetuximab.  • The manufacturer rebates 16% of the amount of cetuximab used on a per patient basis.		x	10/09/2009	15	Not on Trust formulary, chemotherapy if recommended would be offered at the Christie hospital. MMC deemed not applicable (10/09/09). Consultants confirmed colorectal cancer chemo dealt with at Christie & not applicable (13/09/09)
Eczema (chronic) - alitretinoin (TA177)	26/08/2009	Alitretinoin – recommended as a treatment option for adults with severe chronic hand eczema that has not responded to potent topical corticosteroids if the person has:  • severe disease, as defined by the physician's global assessment (PGA) and  • a dermatology life quality index (DLQI) score of 15 or more.	x		03/09/2009	8	MMC approved for this indication (10/09/09), Consultants confirmed compliance (03/09/09)
Renal cell carcinoma (TA178)	26/08/2009	<b>Bevacizumab</b> , <b>sorafenib</b> & <b>temsirolimus</b> – not recommended as 1 <sup>st</sup> -line treatment options for people with advanced &/or metastatic renal cell carcinoma. <b>Sorafenib</b> & <b>sunitinib</b> – not recommended as 2 <sup>nd</sup> -line treatment options for people with advanced &/or metastatic renal cell carcinoma.	x		28/08/2009	2	None of the drugs are on Trust formulary for this indication, chemotherapy if recommended would be offered at the Christie hospital, deemed not applicable by MMC (10/09/09). Renal team confirmed not applicable - chemo at Christie (28/08/09)
Hepatitis B - tenofovir disoproxil fumarate (TA173)	22/07/2009	<b>Tenofovir disoproxil</b> – recommended as an option for the treatment of people with chronic HBeAg-positive or HBeAg-negative hepatitis B in whom antiviral treatment is indicated.	x		11/12/2008	-223	MMC approved for this indication (11/12/08), Gastroenterology Consultants confirmed compliance (05/08/09)
Leukaemia (chronic lymphocytic, first line) - rituximab ( <b>TA174</b> )	22/07/2009	Rituximab with fludarabine & cyclophosphamide — recommended as an option for the $1^{\text{st}}$ -line treatment of chronic lymphocytic leukaemia in people for whom fludarabine in combination with cyclophosphamide is considered appropriate. Rituximab in combination with chemotherapy agents other than fludarabine and cyclophosphamide — not recommended for the $1^{\text{st}}$ -line treatment of CLL.	x		13/08/2009	22	MMC approved for this indication (13/08/09). Haematology consultants confirmed compliance (15/01/10)

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE		rmulary to NICE			
			Yes	N/A	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Lung cancer (non-small-cell, second line) - gefitinib (terminated appraisal) ( <b>TA175</b> )	22/07/2009	NICE is unable to recommend the use in the NHS of gefitinib for the second-line treatment of locally advanced or metastatic non-small-cell lung cancer because no evidence submission was received from the manufacturer or sponsor of the technology	х		13/08/2009		Not on Trust formulary, chemotherapy if recommended would be offered at the Christie hospital. MMC deemed not applicable (13/08/09).
Head and neck cancer (squamous cell carcinoma) - cetuximab ( <b>TA172</b> )	24/06/2009	<b>Cetuximab</b> with platinum-based chemotherapy — not recommended for the treatment of recurrent and/or metastatic squamous cell cancer of the head & neck.	х		09/07/2009		Not on Trust formulary, chemotherapy if recommended would be offered at the Christie hospital. MMC deemed not applicable (09/07/09).
Multiple myeloma - lenalidomide (TA171)		<b>Lenalidomide</b> with <b>dexamethasone</b> – recommended as an option for the treatment of multiple myeloma only in people who have received two or more prior therapies.	х		08/05/2008		MMC approved for this indication (08/05/08). Haematology consultants confirmed compliance (26/06/09)
Venous thromboembolism - rivaroxaban (TA170)		<b>Rivaroxaban</b> – recommended as an option for the prevention of venous thromboembolism in adults having elective total hip replacement surgery or elective total knee replacement surgery.	х		10/09/2009	141	MMC approved for this indication (10/09/09).
			10	7			
	•		% "Yes"	% "N/A"	-	Average implement time (days)	
Adherence statistics for 2009-10			59%	41%		-6	



**NHS Foundation Trust** 

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	rmulary to NICE
			Yes	N/A	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
2008-09							
Renal cell carcinoma - sunitinib (TA169)	25/03/2009	Sunitinib – recommended as 1 <sup>st</sup> -line treatment option for people with advanced and/or metastatic renal cell carcinoma who are suitable for immunotherapy and have an Eastern Cooperative Oncology Group (ECOG) performance status of 0 or 1.		х	09/04/2009	15	Not on Trust formulary, chemotherapy if recommended would be offered at the Christie hospital. MMC deemed not applicable (09/04/09). Consultants confirmed solid tumours dealt with at Christie & not applicable (03/09/09)
Influenza - zanamivir, amantadine and oseltamivir (review) (TA168)	25/02/2009	Oseltamivir & zanamivir – recommended for the treatment of influenza in adults & children as per licensed indications.  Amantadine – is not recommended for the treatment of influenza.	х		12/03/2009	15	MMC approved for this indication (12/03/09)
Hyperuricaemia - febuxostat ( <b>TA164</b> )	24/12/2008	Febuxostat – recommended as an option for the management of chronic hyperuricaemia in gout only for people who are intolerant of allopurinol or for whom allopurinol is contraindicated.	x		08/01/2009	15	MMC approved for this indication (12/08/10). Deemed applicable by MMC, prior to receiving application form (08/01/09)
Ulcerative colitis (acute exacerbations) - infliximab ( <b>TA163</b> )	24/12/2008	Infliximab – recommended as an option for the treatment of acute exacerbations of severely active ulcerative colitis only in patients in whom ciclosporin is contraindicated or clinically inappropriate.	x		08/01/2009	15	MMC approved for this indication as per NICE (08/01/09). Gastro Consultants confirmed compliance (25/02/09)
Lung cancer (non-small-cell) - erlotinib ( <b>TA162</b> )		<b>Erlotinib</b> – recommended as an alternative to docetaxel as 2 <sup>nd</sup> line treatment option for patients with non-small-cell lung cancer (NSCLC). <b>Erlotinib</b> – not recommended for the 2 <sup>nd</sup> -line treatment of locally advanced or metastatic NSCLC in patients for whom docetaxel is unsuitable (that is, where there is intolerance of or contraindications to docetaxel) or for 3 <sup>rd</sup> line treatment after docetaxel therapy.		x	11/12/2008	15	Not on Trust formulary, chemotherapy if recommended would be offered at the Christie hospital. MMC deemed not applicable (11/12/08).
Pain (chronic neuropathic or ischaemic) - spinal cord stimulation (TA159)	22/10/2008	Spinal cord stimulation – recommended as a treatment option for adults with chronic pain of neuropathic origin who:  ■ continue to experience chronic pain (measuring at least 50 mm on a 0–100 mm visual analogue scale) for at least 6 months despite appropriate conventional medical management, and  ■ who have had a successful trial of stimulation as part of the assessment.  Spinal cord stimulation – not recommended as a treatment option for adults with chronic pain of ischaemic origin except in the context of research as part of a clinical trial.		х	13/01/2009	83	The Trust does not have a Chronic Pain Team. Consultants confirmed not applicable (13/01/09). Guidance does not involve medicines and is not a service we offer to patients.

Technology appraisal (TA) Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	rmulary to NICE
			Yes	N/A	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Influenza (prophylaxis) - amantadine, oseltamivir and zanamivir ( <b>TA158</b> )		Oseltamivir & zanamivir – recommended for the post-exposure prophylaxis of influenza.  Oseltamivir & zanamivir – not recommended for seasonal prophylaxis of influenza.  Amantadine – not recommended for the prophylaxis of influenza.	x		09/10/2008	15	MMC approved for this indication (09/10/08)
Venous thromboembolism - dabigatran ( <b>TA157</b> )	24/09/2008	Dabigatran etexilate – recommended as an option for the primary prevention of venous thromboembolic events in adults who have undergone elective total hip replacement surgery or elective total knee replacement surgery	x		09/10/2008	15	MMC approved for this indication (09/10/08)
Macular degeneration (age-related) - ranibizumab and pegaptanib ( <b>TA155</b> )	27/08/2008	Ranibizumab – recommended as an option for the treatment of wet age-related macular degeneration.  Pegaptanib – not recommended for the treatment of wet age-related macular degeneration.	х		08/03/2007	-538	MMC approved for this indication (08/03/07). Compliance confirmed by MREH Consultants (30/04/09)
Pregnancy (rhesus negative women) - routine anti-D (review) ( <b>TA156</b> )		Routine antenatal anti-D prophylaxis – recommended as a treatment option for all pregnant women who are rhesus D (RhD) negative and who are not known to be sensitised to the RhD antigen.	x		08/03/2007	-538	MMC approved for this indication (08/03/07).
Hepatitis B - telbivudine ( <b>TA154</b> )	27/08/2008	Telbivudine – not recommended for the treatment of chronic hepatitis B	х		13/10/2008	47	Not on Trust formulary. Gastroenterology consultants confirmed compliance (13/10/08)
Hepatitis B - entecavir ( <b>TA153</b> )	27/08/2008	Entecavir – recommended as an option for the treatment of people with chronic HBeAg-positive or HBeAg-negative hepatitis B in whom antiviral treatment is indicated.	х		13/09/2007	-349	MMC approved for this indication (13/09/07). Gastroenterology consultants confirmed compliance (13/10/08)
Head and neck cancer - cetuximab ( <b>TA145</b> )		<b>Cetuximab</b> with radiotherapy – recommended as a treatment option only for patients with locally advanced squamous cell cancer of the head and neck whose Karnofsky performance-status score is 90% or greater and for whom all forms of platinum-based chemoradiotherapy treatment are contraindicated.		х	10/07/2008	15	Not on Trust formulary, chemotherapy if recommended would be offered at the Christie hospital. MMC deemed not applicable (10/07/08).
Psoriasis - adalimumab ( <b>TA146</b> )	25/06/2008	Adalimumab — recommended as a treatment option for adults with plaque psoriasis for whom anti-tumour necrosis factor (TNF) treatment is being considere. Adalimumab should be discontinued in people whose psoriasis has not responded adequately at 16 weeks.	х		10/07/2008	15	MMC approved for this indication (10/07/08). However, Dermatology Consultants confirmed that they do not prescribe these drugs (08/09/08)
Glioma (recurrent) - carmustine implants (terminated appraisal) ( <b>TA149</b> )	25/06/2008	NICE is unable to recommend the use in the NHS of carmustine implants as an adjunct to surgery in patients with recurrent glioblastoma multiforme for whom surgical resection is indicated because no evidence submission was received from the manufacturer or sponsor of the technology	х		10/07/2008	15	Appraisal terminated, guidance not applicable. MMC deemed not applicable (10/07/08).
Lung cancer (non-small-cell) - bevacizumab (terminated appraisal) (TA148)	25/06/2008	NICE is unable to recommend the use in the NHS of bevacizumab in addition to platinum-based chemotherapy for the 1 <sup>st</sup> -line treatment of patients with unresectable advanced, metastatic or recurrent NSCLC (other than predominantly squamous cell histology) because no evidence submission was received from the manufacturer	x		10/07/2008	15	Appraisal terminated, guidance not applicable. MMC deemed not applicable (10/07/08).

Technology appraisal (TA) Titles are hyperlinks to full guidance	Date of TA			Adherence of local formulary to NICE						
			Yes	N/A	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)			
Anaemia (cancer-treatment induced) - erythropoietin (alpha and beta) and darbepoetin ( <b>TA142</b> )		Erythropoietin analogues – not recommended for routine use in the management of cancer treatment-induced anaemia, except:  • in combination with I.V. iron as an option for the management of cancer treatment-induced anaemia in women receiving platinum-based chemotherapy for ovarian cancer who have symptomatic anaemia with a haemoglobin level of 8g/100ml or lower.  • The use of erythropoietin analogues does not preclude the use of existing approaches to the management of anaemia, including blood transfusion where necessary.  Erythropoietin analogues with I.V. iron may be considered for people who cannot be given blood transfusions and who have profound cancer treatment-related anaemia that is likely to have an impact on survival.	x		25/06/2008	28	Haematology Consultants confirmed that they do not prescribe these drugs, except in the case of patients who cannot be given blood transfusions. 25/06/2008			
Ankylosing spondylitis - adalimumab, etanercept and infliximab ( <b>TA143</b> )	28/05/2008	Adalimumab or etanercept – recommended as treatment options for adults with severe active ankylosing spondylitis.	x		12/06/2008	15	MMC approved for this indication (12/06/08).			
Ulcerative colitis (subacute manifestations) - infliximab ( <b>TA140</b> )	23/04/2008	Infliximab – not recommended for the treatment of subacute manifestations of moderately to severely active ulcerative colitis.	x		08/05/2008	15	Not on Trust formulary for this indication. Gastro consultants compliance confirmed (//). MMC deemed compliant and not applicable due to not on Trust formulary (08/05/08)			
			15 % "Yes"	4 % "N/A"	-	Average implement time (days)				
Adherence statistics for 2008-09			79%	21%		-56				



**NHS Foundation Trust** 

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	ence of local fo	rmulary to NICE
			Yes	N/A	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
2007-08							
Asthma (in adults) - corticosteroids ( <b>TA138</b> )	26/03/2008	For adults and children aged 12 years and older with chronic asthma in whom treatment with an inhaled corticosteroid (ICS) is considered appropriate, the least costly product that is suitable for an individual is recommended.  For adults and children aged 12 years and older with chronic asthma in whom treatment with an ICS and long-acting beta-2 agonist (LABA) is considered appropriate	x		10/04/2008	15	MMC approved for this indication as per NICE (10/04/08). Respiratory Consultants not yet confirmed compliance
Lymphoma (follicular non-Hodgkin's) - rituximab ( <b>TA137</b> )	27/02/2008	Rituximab with chemotherapy – recommended as an option for the induction of remission in people with relapsed stage III or IV follicular non-Hodgkin's lymphoma. Rituximab monotherapy as maintenance therapy – recommended as an option for the treatment of people with relapsed stage III or IV follicular non-Hodgkin's lymphoma in remission induced with chemotherapy with or without rituximab. Rituximab monotherapy – recommended as an option for the treatment of people with relapsed or refractory stage III or IV follicular non-Hodgkin's lymphoma, when all alternative treatment options have been exhausted.	x		13/03/2008	15	MMC approved for this indication as per NICE (13/03/08). Haematology Consultants not yet confirmed compliance
Mesothelioma - pemetrexed disodium (TA135)	23/01/2008	Pemetrexed – recommended as a treatment option for malignant pleural mesothelioma only in people who have a World Health Organization (WHO) performance status of 0 or 1, who are considered to have advanced disease and for whom surgical resection is considered inappropriate.		х	14/02/2008	22	Not on Trust formulary, chemotherapy if recommended would be offered at the Christie hospital. MMC deemed not applicable (14/02/08). Consultants confirmed treatment dealt with at Christie & not applicable (//)
Psoriasis - infliximab (TA134)	23/01/2008	Infliximab – recommended as a treatment option for adults with plaque psoriasis. Infliximab – should be continued beyond 10 weeks only in people whose psoriasis has shown an adequate response to treatment within 10 weeks.	x		14/02/2008	22	MMC approved for this indication (14/02/08). However, Dermatology Consultants confirmed that they do not prescribe these drugs (08/09/08)
Asthma (in children) - corticosteroids ( <b>TA131</b> )	28/11/2007	For children under the age of 12 years with chronic asthma in whom treatment with an inhaled corticosteroid (ICS) is considered appropriate, the least costly product that is suitable for an individual child is recommended.  For children under the age of 12 years with chronic asthma in whom treatment with an ICS and long-acting beta-2 agonist (LABA) is considered appropriate	х		12/12/2007	14	MMC approved for this indication as per NICE (13/12/07). Paediatric Respiratory Consultants not yet confirmed compliance.

Technology appraisal (TA) Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE		rmulary to NICE			
			Yes	N/A	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Asthma (uncontrolled) - omalizumab (TA133)	28/11/2007	Omalizumab – recommended as an option for the treatment of severe persistent allergic (IgE mediated) asthma as add-on therapy to optimised standard therapy, only in adults and adolescents (12 years and older) who have been identified as having severe unstable disease.  Omalizumab add-on therapy should be discontinued at 16 weeks in patients who have not shown an adequate response to therapy.	х		13/12/2007	15	MMC approved for this indication as per NICE (13/12/07), MMC application approved (05/03/08). Paediatric Respiratory Consultants confirmed compliance (14/02/10)
Hypercholesterolaemia - ezetimibe (TA132)	28/11/2007		х		11/09/2003	-1539	MMC application approved for this indication (11/09/03), MMC approved as per NICE (13/12/07). Lipid clinic Consultants not yet confirmed compliance.
Multiple myeloma - bortezomib (TA129)	24/10/2007	<b>Bortezomib</b> monotherapy – recommended as an option for the treatment of progressive multiple myeloma in people who are at 1st relapse having received 1 prior therapy and who have undergone, or are unsuitable for, BMT.	x		11/01/2007		MMC application approved for this indication (11/01/07), MMC approved as per NICE (08/11/07). Haematology Consultants confirmed compliance (25/08/09).
Rheumatoid arthritis - adalimumab, etanercept and infliximab (TA130)	24/10/2007	adalimumab, etanercept & infliximab – recommended as options for the treatment of adults who have both:  • Active rheumatoid arthritis as measured by disease activity score (DAS28) greater than 5.1 confirmed on at least two occasions, 1 month apart.  • Have undergone trials of two DMARDs, including methotrexate (unless contraindicated). A trial of a DMARD is defined as being normally of 6 months, with 2 months at standard dose, unless significant toxicity has limited the dose or duration of treatment.  TNF-α inhibitors should normally be used in combination with methotrexate. Where a patient is intolerant of methotrexate or where methotrexate treatment is considered to be inappropriate, adalimumab & etanercept may be given as monotherapy.	x		08/11/2007		MMC approved for this indication as per NICE (08/11/07). Rheumatology Consultants not yet confirmed compliance
Alzheimer's disease - donepezil, galantamine, rivastigmine (review) and memantine (TA111)	26/09/2007	<b>Donepezil, galantamine</b> & <b>rivastigmine</b> – recommended for mild to moderately severe Alzheimer's disease <b>Memantine</b> – recommended for moderately severe to severe Alzheimer's disease.	х		12/03/1998		Donepezil approved 12/03/98 and rivastigmine 12/11/98. All drugs are on formulary for this indication. Management of these patients is under Manchester Health & Social Care Trust. Discussed at MMC 11/10/07
Lung cancer (non-small-cell) - pemetrexed (TA124)	22/08/2007	Pemetrexed – not recommended for the treatment of locally advanced or metastatic non-small-cell lung cancer.	x		13/09/2007		Not on Trust formulary, chemotherapy if recommended would be offered at the Christie hospital. MMC deemed not applicable (13/09/07).

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	rmulary to NICE
			Yes	N/A	Date of local decision (DD/MM/YY)	Time to implement (days)	<b>Notes</b> (e.g. rationale, method of making available)
Multiple sclerosis - natalizumab ( <b>TA127</b> )		Natalizumab — recommended as an option for the treatment only of rapidly evolving severe relapsing—remitting multiple sclerosis (RES). RES is defined by two or more disabling relapses in 1 year, and one or more gadolinium-enhancing lesions on brain MRI or a significant increase in T2 lesion load compared with a previous MRI.		х	13/09/2007	22	Not MMC approved for this indication. MMC approved as per NICE (13/09/07). Neurology Consultants confirmed treatment would not be offered at CMFT, prescribed @ Disease Modifying Treatment Clinic SRFT (13/08/09)
Smoking cessation - varenicline (TA123)	25/07/2007	Varenicline – recommended as an option for smokers who have expressed a desire to quit smoking. Varenicline should normally be prescribed only as part of a programme of behavioural support.		х	13/08/2007	19	Not MMC approved for this indication. MMC approved as per NICE (13/08/07).
Glioma (newly diagnosed and high grade) - carmustine implants and temozolomide (TA121)	27/06/2007	<b>Temozolomide</b> – recommended as an option for the treatment of newly diagnosed glioblastoma multiforme (GBM) in patients with a World Health Organization (WHO) performance status of 0 or 1. <b>Carmustine</b> implants – recommended as an option for the treatment of newly diagnosed high-grade glioma only for patients in whom 90% or more of the tumour has been resected.  Carmustine implants – not recommended for the treatment of newly diagnosed high-grade glioma for patients in whom less than 90% of the tumour has been resected.		х	08/07/2007	11	Not MMC approved for this indication. MMC deemed not applicable (08/07/07). chemotherapy if recommended would be offered at the Christie hospital.
schaemic stroke (acute) - alteplase ( <b>TA122</b> )		Alteplase – recommended for the treatment of acute ischaemic stroke when used by physicians trained and experienced in the management of acute stroke. It should only be administered in centres with facilities that enable it to be used in full accordance with its marketing authorisation.	х		11/03/2004		MMC application approved for this indication (11/03/04), MMC approved as per NICE (08/07/07) Stroke Consultants confirmed compliance (27/08/09)
			11	4			
			% "Yes"	% "N/A"	-	Average implement time (days)	
Adherence statistics for 2007-08			73%	27%		-421	



**NHS Foundation Trust** 

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			rmulary to NICE		
			Yes	N/A	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
2006-07							
Leukaemia (lymphocytic) - fludarabine ( <b>TA119</b> )	28/02/2007	<b>Fludarabine</b> monotherapy – not recommended for the 1 <sup>st</sup> -line treatment of chronic lymphocytic leukaemia.	х		08/03/2007	8	On Trust formulary, no MMC application received. Chemotherapy if recommended would most likely be offered at the Christie hospital
Breast cancer - gemcitabine ( <b>TA116</b> )	24/01/2007	<b>Gemcitabine</b> with <b>paclitaxel</b> – recommended as an option for the treatment of metastatic breast cancer only when docetaxel monotherapy or docetaxel plus capecitabine are also considered appropriate.	х		08/02/2007	15	On Trust formulary, chemotherapy if recommended would be offered at the Christie hospital. Deemed not applicable by MMC (08/02/07)
Colorectal cancer (metastatic) - bevacizumab and cetuximab (TA118) (partially updated by TA242)	24/01/2007	<b>Bevacizumab</b> with 5-fluorouracil plus folinic acid, with or without irinotecan – not recommended for the 1st-line treatment of metastatic colorectal cancer. <b>Cetuximab</b> in combination with irinotecan – not recommended for the 2 <sup>nd</sup> -line or subsequent treatment of metastatic colorectal cancer after the failure of an irinotecan containing chemotherapy regimen.	х		08/02/2007	15	Not on Trust formulary for this indication, chemotherapy if recommended would be offered at the Christie hospital (08/02/07)
Hyperparathyroidism - cinacalcet (TA117)	24/01/2007	$ \begin{array}{llllllllllllllllllllllllllllllllllll$	х		08/07/2004	-930	MMC approved for this indication (08/07/04) as per NICE (08/02/07). Renal Consultants not yet confirmed compliance
Drug misuse - methadone and buprenorphine (TA114)	24/01/2007	Methadone & buprenorphine (oral), using flexible dosing regimens – recommended as options for maintenance therapy in the management of opioid dependence.  Methadone & buprenorphine should be administered daily, under supervision, for at least the first 3 months. Supervision should be relaxed only when the patient's compliance is assured. Both drugs should be given as part of a programme of supportive care.	х		08/02/2007	15	MMC approved for this indication as per NICE (08/02/07).
Drug misuse - naltrexone (TA115)	24/01/2007	Naltrexone – recommended as a treatment option in detoxified formerly opioid-dependent people who are highly motivated to remain in an abstinence programme.	х		08/02/2007	15	MMC approved for this indication as per NICE (08/02/07).
Breast cancer (early) - hormonal treatments (TA112)	22/11/2006	Anastrozole – recommended for $1^{\text{RY}}$ adjuvant therapy. Exemestane – recommended for adjuvant therapy following 2-3 years of adjuvant tamoxifen therapy. Letrozole – recommended for $1^{\text{RY}}$ adjuvant therapy and extended adjuvant therapy following standard tamoxifen therapy.	х		14/12/2006	22	On Trust formulary, chemotherapy if recommended would be offered at the Christie hospital (14/12/06)

Technology appraisal (TA) Titles are hyperlinks to full guidance	Date of TA Release				Adhere	nce of local fo	rmulary to NICE
			Yes	N/A	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
Breast cancer (early) - paclitaxel (TA108)	27/09/2006	Paclitaxel – not recommended for the treatment of women with early node-positive breast cancer.	x		12/10/2006	15	Not on Trust formulary, chemotherapy if recommended would be offered at the Christie hospital. Deemed not applicable by MMC (12/10/06)
Breast cancer (early) - docetaxel ( <b>TA109</b> )	27/09/2006	<b>Docetaxel</b> with <b>doxorubicin</b> & <b>cyclophosphamide</b> – recommended as an option for the adjuvant treatment of women with early node-positive breast cancer.		х	12/10/2006	15	Not on Trust formulary, chemotherapy if recommended would be offered at the Christie hospital. Deemed not applicable by MMC (12/10/06)
Breast cancer (early) - trastuzumab ( <b>TA107</b> )	23/08/2006	<b>Trastuzumab</b> – given at 3-week intervals for 1 year or until disease recurrence recommended as a treatment option for women with early-stage HER2-positive breast cancer following surgery, chemotherapy (neoadjuvant or adjuvant) & radiotherapy (if applicable).		x	14/09/2006	22	Not on Trust formulary, chemotherapy if recommended would be offered at the Christie hospital. Deemed not applicable by MMC (14/09/06)
Hepatitis C - peginterferon alfa and ribavirin (TA106)	23/08/2006	Peginterferon alfa-2a & ribavirin or peginterferon alfa-2b & ribavirin — recommended for the treatment of mild chronic hepatitis C.  Monotherapy with peginterferon alfa-2a or peginterferon alfa-2b — recommended for the treatment of mild chronic hepatitis C for people who are unable to tolerate ribavirin, or for whom ribavirin is contraindicated.	x		11/09/2003	-1077	MMC approved for this indication (11/09/03) as pe NICE (14/09/06). Gastroenterology Consultants confirmed compliance (14/08/09)
Psoriasis - efalizumab and etanercept ( <b>TA103</b> )	26/07/2006	Etanercept – recommended at a dose not exceeding 25mg twice weekly for the treatment of adults with plaque psoriasis.  Efalizumab – recommended for the treatment of adults with plaque psoriasis, only if psoriasis has not responded to etanercept or they are intolerant of, or have contraindications to etanercept.	x		08/08/2006	13	Etanercept MMC approved for this indication as pe NICE (08/08/06). Efalizumab not on Trust formulary
Prostate cancer (hormone-refractory) - docetaxel ( <b>TA101</b> )	28/06/2006	<b>Docetaxel</b> – recommended as a treatment option for men with hormone-refractory metastatic prostate cancer only if their Karnofsky performance-status score is 60% or more.		х	10/07/2006	12	Not on Trust formulary, chemotherapy if recommended would be offered at the Christie hospital. Deemed not applicable by MMC (10/07/06)
Colon cancer (adjuvant) - capecitabine and oxaliplatin ( <b>TA100</b> )	26/04/2006	Capecitabine monotherapy – recommended as options for the adjuvant treatment of patients with stage III (Dukes' C) colon cancer following surgery.  Oxaliplatin with 5-fluorouracil & folinic acid – recommended as options for the adjuvant treatment of patients with stage III (Dukes' C) colon cancer following surgery		х	08/05/2006	12	Not on Trust formulary, chemotherapy if recommended would be offered at the Christie hospital. Deemed not applicable by MMC (08/05/06 Colorectal Consultants deemed not applicable (13/08/09)

Technology appraisal (TA) Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	rence of local formulary to NICE		
			Yes	N/A	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)	
Renal transplantation - immunosuppressive regimens for children and adolescents ( <b>TA99</b> )		Basiliximab or daclizumab – recommended as options for induction therapy in the prophylaxis of acute organ rejection in children & adolescents undergoing renal transplant. Drug with the lowest acquisition cost should be used, unless contraindicated.  Tacrolimus – recommended as an alternative to ciclosporin when a calcineurin inhibitor is indicated as part of initial or a maintenance regimen for renal transplant in children & adolescents.  Mycophenolate mofetil (MMF) – recommended as an option as part of an regimen for child & adolescent renal transplant recipients o  MMF in corticosteroid reduction or withdrawal strategies for child & adolescent renal transplant recipients – recommended only within the context of randomised clinical trials.  Mycophenolate sodium (MPS) – not recommended for use as part of an regimen in child or adolescent renal transplant recipients.  Sirolimus – not recommended for children or adolescents undergoing renal transplantation except when proven intolerance to calcineurin inhibitors necessitates the withdrawal of these treatments.	11 % "Yes"	4 %"N/A"	09/09/1999	-2421 Average implement time	Basiliximab approved 09/09/99; Daclizumab withdrawn 10/04/08; Tacrolimus MR approved (13/09/07); MMF not MMC approved but on Trust formulary; MPS approved (14/04/05) but not on Trust formulary; Sirolimus approved (08/11/01). All drugs are on formulary for this indication. Paediatric Renal Consultants deemed guidance out of date and not applicable (11/04/12)	
Adherence statistics for 2006-07			73%	27%		(days) -283		



**NHS Foundation Trust** 

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE			Adhere	nce of local fo	rmulary to NICE
			Yes	N/A	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)
2000-06							
Attention deficit hyperactivity disorder (ADHD) - methylphenidate, atomoxetine and dexamfetamine (review) ( <b>TA98</b> )	22/03/2006	Methylphenidate, atomoxetine & dexamfetamine – recommended as options for the management of ADHD in children and adolescents	х		05/06/2002	-1386	Methylphenidate MMC approved (05/06/02); atomoxetine MMC approved (07/04/04). All drugs on Trust formulary for this indication. Compliance confirmed by Paediatric Psychiatry (13/06/12)
Hepatitis B (chronic) - adefovir dipivoxil and pegylated interferon alpha-2a ( <b>TA96</b> )	, ,	Peginterferon alfa-2a and Adefovir dipivoxil – recommended as options for the treatment of adults with chronic hepatitis B (HBeAg-positive or HBeAg-negative)	x		10/07/2003		Peginterferon alfa-2a approved (11/09/03); Adefovir approved (10/07/03). Both drugs on Trust formulary for this indication. Gastroenterology consultants confirmed compliance
Cardiovascular disease - statins (TA94)	25/01/2006	Statin therapy is recommended for adults with clinical evidence of CVD	x		11/09/2003	-867	Rosuvastatin MMC approved (11/09/03). All drugs (simvastatin, atorvastatin, rosuvastatin & pravastatin) are on the formulary for this indication. MMC approved NICE guidelines (09/02/06). NICE compliance confirmed
Ovarian cancer (advanced) - paclitaxel, pegylated liposomal doxorubicin hydrochloride and topotecan (review) (TA91)	25/05/2005	Paclitaxel with carboplatin or cisplatin – recommended as an option for the 2 <sup>nd</sup> line (or subsequent) treatment of women with platinum (Pt) sensitive or partially Pt-sensitive advanced ovarian cancer, except in women who are allergic to Pt based compounds.  Paclitaxel; Pegylated liposomal doxorubicin hydrochloride (PLDH) & Topotecan – recommended as an option for 2 <sup>nd</sup> line (or subsequent) treatment of women with Pt-refractory or Pt-resistant advanced ovarian cancer, and for women who are allergic to Pt-based compounds.		х	09/06/2005	15	All drugs apart from cisplatin are non-formulary. chemotherapy if recommended would be offered at the Christie hospital. Deemed not applicable by MMC (09/06/05)
Gastrointestinal stromal tumours - imatinib (TA86)	22/09/2004	Imatinib – recommended as 1 <sup>st</sup> -line management of people with KIT (CD117)-positive unresectable and/or KIT (CD117)-positive metastatic gastro-intestinal stromal tumours (GISTs).		х	14/10/2004	22	Not MMC approved for this indication. Surgical Team confirmed that tumours referred to Christie Hospital for chemotherapy (20/01/10). MMC deemed not applicable (14/10/04)
Renal transplantation - immuno-suppressive regimens (adults) ( <b>TA85</b> )	22/09/2004	Basiliximab or daclizumab – recommended as options for induction therapy in the prophylaxis of acute organ rejection in adults undergoing renal transplantation.  Tacrolimus, Mycophenolate mofetil & Sirolimus – recommended for adults as an option as part of an immunosuppressive regimen	x		14/10/2004	22	Basiliximab MMC approved 09/09/99; Daclizumab withdrawn 10/04/08; Tacrolimus MR MMC approved (13/09/07); MMF not MMC approved but on Trust formulary; Sirolimus MMC approved (08/11/01). All drugs are on formulary for this indication. MMC approved NICE guidance (14/10/04). Renal Consultants confirmed compliance (18/08/09)

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	Adherence of local formulary to NICE					
			Yes	N/A	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)	
Atopic dermatitis (eczema) - topical steroids (TA81)	25/08/2004	<b>Topical corticosteroids</b> – recommended for once or twice daily application for atopic eczema. Where more than one alternative topical corticosteroid is considered clinically appropriate within a potency class, the drug with the lowest acquisition cost should be prescribed.	x		09/09/2004	15	Trust formulary contains mild, moderate, potent and very potent preparations of Hydrocortisone, Betamethasone & Clobetasone. MMC approved NICE (09/09/04). Dermatology Consultants conformed compliance (19/08/09).	
Atopic dermatitis (eczema) - pimecrolimus and tacrolimus (TA82)	25/08/2004	Tacrolimus & pimecrolimus – not recommended for mild atopic eczema or as 1 <sup>st</sup> line treatments for atopic eczema of any severity.  Tacrolimus – recommended as an option for the 2 <sup>nd</sup> -line treatment of moderate to severe atopic eczema in adults & children aged 2yrs & older that's not been controlled by topical corticosteroids.  Pimecrolimus – recommended as an option for the 2 <sup>nd</sup> -line treatment of moderate atopic eczema on the face & neck in children aged 2 to 16 years that has not been controlled by topical corticosteroids.	x		14/11/2002	-650	Tacrolimus MMC approved (14/11/02); Pimecrolimus MMC approved (13/11/03). MMC approved NICE guidelines (09/09/04). Dermatology Consultants confirmed compliance (19/08/09)	
Acute coronary syndromes - clopidogrel (TA80)	28/07/2004	Clopidogrel with low-dose aspirin – recommended for use in the management of non-STsegment-elevation ACS in people who are at moderate to high risk of MI or death.	х		12/08/2004	15	On Trust formulary for this indication. Clopidogrel first approved in (09/12/99) for stent patients intolerant of aspirin. MMC approved NICE (12/08/04). Cardiology Consultants confirmed compliance (21/08/09)	
Insomnia - newer hypnotic drugs (TA77)	28/04/2004	Hypnotic drug therapy is considered appropriate for the management of severe insomnia interfering with normal daily life, it is recommended that hypnotics should be prescribed for short periods of time only, in strict accordance with their licensed indications.	х		13/05/2004	15	Zopiclone only drug on Trust formulary, however no MMC application received. MMC approved guidelines (13/05/04).	
Hepatitis C - pegylated interferons, ribavirin and alfa interferon (TA75)	28/01/2004	Peginterferon alfa & ribavirin – recommended for the treatment of people aged ≥18yrs with moderate to severe chronic hepatitis C.	х		11/09/2003	-139	Peginterferon alfa-2a approved (11/09/03); Ribavirin approved (11/09/03). Both drugs on Trust formulary for this indication. MMC approved NICE guidance (12/02/04). Gastroenterology consultants confirmed compliance (14/08/09).	
Leukaemia (chronic myeloid) - imatinib ( <b>TA70</b> ) (partially updated by TA241 and TA251)	22/10/2003	Imatinib – recommended 1 <sup>st</sup> -line for Philadelphia-chromosome-positive CML in the chronic phase.  Imatinib – recommended as an option for Philadelphia-chromosome-positive CML who initially present in the accelerated phase or with blast crisis. Additionally, as an option for people who present in the chronic phase & then progress to the accelerated phase or blast crisis if they have not received imatinib previously.	x		08/11/2001	-713	MMC approved for this indication (08/11/01). MMC approved NICE (09/10/03). Haematology consultants yet to confirm compliance.	

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	Adherence of local formulary to NICE					
			Yes	N/A	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)	
Macular degeneration (age-related) - photodynamic therapy ( <b>TA68</b> )	24/09/2003	Photodynamic therapy (PDT) – recommended for the treatment of wet agerelated macular degeneration for individuals who have a confirmed diagnosis of classic with no occult subfoveal choroidal neovascularisation (CNV) and best-corrected visual acuity 6/60 or better.  PDT – not recommended for the treatment of people with predominantly classic subfoveal CNV associated with wet age-related macular degeneration.	х		09/10/2003	15	Verteporfin MMC approved (08/03/01). MREH Consultants stated guidance not applicable. MMC approved NICE guidelines (09/10/03)	
Non-Hodgkin's lymphoma - rituximab ( <b>TA65</b> )		<b>Rituximab</b> recommended in combination with a regimen of <b>cyclophosphamide</b> , <b>doxorubicin</b> , <b>vincristine</b> and <b>prednisolone</b> (CHOP) for the 1 <sup>st</sup> -line treatment of people with CD20-positive diffuse large-B-cell lymphoma at clinical stage II, III or IV. <b>Rituximab</b> is not recommended for use when CHOP is contraindicated.	x		09/10/2003	15	Not MMC approved for this indication. Rituximab is on Trust formulary. MMC approved NICE guidelines (09/10/03). Haematology Consultants confirmed compliance (21/08/09)	
Growth hormone deficiency (adults) - human growth hormone (TA64)	27/08/2003	<b>Recombinant human growth hormone (somatropin)</b> – recommended for the treatment of growth hormone (GH) deficiency.	x		11/09/2003	15	On Trust formulary for this indication, no MMC application received. MMC approved NICE (11/09/03). Paediatric Endocrinology Consultants confirmed compliance (25/08/09)	
Colorectal cancer - capecitabine and tegafur uracil (TA61)	28/05/2003	Capecitabine or tegafur with uracil (in combination with folinic acid) oral therapy is recommended as an option for the $1^{\text{st}}$ -line treatment of metastatic colorectal cancer.		х	12/06/2003	15	Not on Trust formulary for this indication, chemotherapy if recommended would be offered at the Christie hospital, deemed not applicable by MMC (12/06/03). Colorectal Consultants confirmed not applicable (13/08/09)	
Ovarian cancer - paclitaxel (review) ( <b>TA55</b> )		Paclitaxel in combination with cisplatin or carboplatin recommended as alternatives for 1 <sup>st</sup> line chemotherapy (following surgery) to treat ovarian cancer. Paclitaxel - NOT RECOMMENDED as 2 <sup>nd</sup> line (or subsequent) therapy in women with ovarian cancer who have received the drug as part of their 1 <sup>st</sup> line treatment. For women who have not received paclitaxel as part of 1 <sup>st</sup> line treatment, it should be considered as one option alongside other drugs licensed for 2 <sup>nd</sup> line treatment of ovarian cancer.		х	13/02/2003	22	Not on Trust formulary, chemotherapy if recommended would be offered at the Christie hospital. Deemed not applicable by MMC (13/02/03)	
Diabetes (types 1 and 2) - long acting insulin analogues ( <b>TA53</b> )	25/12/2002	Insulin glargine recommended as a treatment option for people with T1DM. Insulin glargine is not recommended for routine use for people with T2DM who require insulin therapy. Insulin glargine treatment should be considered only for those people with T2DM who require insulin therapy and require assistance from a carer or healthcare professional to administer their insulin; those whose lifestyle is significantly restricted by recurrent symptomatic hypoglycaemic episodes; those who would otherwise need twice-daily basal insulin injections in combination with oral antidiabetic drugs.	х		12/09/2002	-104	MMC approved for this indication (12/09/02). MMC approved NICE (09/01/03). Diabetes Centre Consultants confirmed compliance.	

Technology appraisal (TA) Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	Adherence of local formulary to NICE					
			Yes	N/A	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)	
Myocardial infarction - thrombolysis ( <b>TA52</b> )	23/10/2002	The choice of thrombolytic drug (alteplase, reteplase, streptokinase or tenecteplase) should take account of:  • the likely balance of benefit and harm (for example, stroke) to which each of the thrombolytic agents would expose the individual patient.  Where pre-hospital delivery of thrombolytic drugs is considered a beneficial approach as part of an emergency-care pathway for AMI, the practicalities of administering thrombolytic drugs in pre-hospital settings mean that the bolus drugs (reteplase or tenecteplase) are recommended as the preferred option.	х		14/11/2002		Alteplase MMC approved (11/03/04). Alteplase, reteplase, streptokinase & urokinase are on Trust formulary for this indication. MMC approved NICE guidelines (14/11/02)	
Acute coronary syndromes - glycoprotein IIb/IIIa inhibitors (review) ( <b>TA47</b> ) (partially updated by CG94)	25/09/2002	Glycoprotein IIb/IIIa (GP IIb/IIIa) inhibitors should be considered part of the management pathway for unstable angina or NSTEMI (including other pharmacological intervention, early coronary angiography with a view to revascularisation either by PCI or CABG).  IV glycoprotein IIb/IIIa (GP IIb/IIIa) inhibitor (eptifibatide or tirofiban), in addition to aspirin and unfractionated heparin, is recommended as part of the initial medical management of patients with unstable angina or NSTEMI who are at high	х		12/07/2001	-440	Eptifibatide MMC approved (12/07/01). All GP IIb / IIIa inhibitors on Trust formulary for this indication. MMC approve NICE guidelines (10/10/02). Cardiology Consultants confirmed compliance	
Arthritis (juvenile idiopathic) - etanercept (TA35)	27/03/2002	<b>Etanercept</b> is recommended for children aged 4 to 17 years with active polyarticular-course juvenile idiopathic arthritis whose condition has not responded adequately to, or who have proved intolerant of, methotrexate.	x		11/01/2001	-440	Paediatric MMC approved (11/01/01). On Trust formulary for this indication. MMC approved guidelines (11/04/02). Paediatric Rheumatologists confirmed compliance (02/07/12)	
Asthma (older children) - inhaler devices ( <b>TA38</b> )	27/03/2002	It is recommended that in addition to therapeutic need (including drug & dose), the following be taken into account when choosing inhaler devices for individual children with chronic asthma:  • the ability of the child to develop and maintain an effective technique with the specific device  • the suitability of a device for the child's and carer's lifestyles, considering factors such as portability and convenience  • the child's preference for and willingness to use a particular device.	х		11/04/2002	15	MMC approved guidelines (11/04/02). Paediatric Respiratory Consultants confirmed compliance (30/03/12)	
Breast cancer - trastuzumab ( <b>TA34</b> )	27/03/2002	Trastuzumab in combination with paclitaxel is recommended as an option for people with tumours expressing HER2 scored at levels of 3+ who have not received chemotherapy for metastatic breast cancer & in whom anthracycline treatment is inappropriate.  Trastuzumab monotherapy - recommended as an option for people with tumours expressing HER2 scored at levels of 3+ who have received at least two chemotherapy regimens for metastatic breast cancer. Prior chemotherapy must have included at least an anthracycline & a taxane where these treatments are appropriate. It should also have included hormonal therapy in suitable oestrogen		х	11/04/2002	15	Not on Trust formulary, chemotherapy if recommended would be offered at the Christie hospital, deemed not applicable by MMC (11/04/02)	
Multiple sclerosis - beta interferon and glatiramer acetate (TA32)	23/01/2002	<b>Beta interferon</b> and <b>glatiramer acetate</b> - <b>NOT RECOMMENDED</b> for the treatment of Multiple Sclerosis.	х		14/02/2002	22	Not on Trust formulary, Neurology consultants stated if prescribed would be at Disease Modifying Treatment Clinic, SRFT (13/08/09), deemed not applicable by MMC (14/02/02)	

Technology appraisal (TA) Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	Adherence of local formulary to NICE					
			Yes	N/A	Date of local decision (DD/MM/YY)	Time to implement (days)	Notes (e.g. rationale, method of making available)	
Leukaemia (lymphocytic) - fludarabine ( <b>TA29</b> )	26/09/2001	Fludarabine (oral) - recommended as 2 <sup>nd</sup> -line therapy for B-cell CLL for patients who have either failed, or are intolerant of, 1 <sup>st</sup> -line chemotherapy, and who would otherwise have received combination chemotherapy of either:  • cyclophosphamide, doxorubicin, vincristine and prednisolone (CHOP) • cyclophosphamide, doxorubicin and prednisolone (CAP) or • cyclophosphamide, vincristine and prednisolone (CVP)g Oral formulation of fludarabine is preferred to the intravenous formulation on the basis of more favourable cost effectiveness. Intravenous fludarabine should only be used when oral fludarabine is contra-indicated.	x		11/10/2001		On Trust formulary for this indication. No MMC application. MMC approved NICE guidelines (11/10/01). Haematology Consultants confirmed compliance	
Pancreatic cancer - gemcitabine (TA25)	23/05/2001	<b>Gemcitabine</b> - recommended as a treatment option for patients with advanced or metastatic adenocarcinoma of the pancreas and a Karnofsky performance score of 50 or more, where 1 <sup>st</sup> line chemotherapy is to be used. <b>Gemcitabine</b> - not recommended for patients who are suitable for potentially curative surgery, or patients with a Karnofsky score of less than 50. <b>Gemcitabine</b> - not recommended as 2 <sup>nd</sup> -line treatment in patients with pancreatic adenocarcinoma.	х		14/06/2001	22	On Trust formulary. No adult MMC application. MMC approved NICE guidelines (14/06/01). Hepatobiliary Consultants confirmed chemotherapy if recommended would be offered at the Christie hospital (02/09/09).	
Brain cancer - temozolomide (TA23)	25/04/2001	Temozolomide - recommended for patients with recurrent malignant glioma who have failed 1 <sup>st</sup> line chemo treatment with other agents. Such patients must have a histologically proven malignant glioma (WHO grades III and IV, or transformed grade II), Karnofsky performance status ≥70 and a projected life expectancy of 12 weeks or more.  Temozolomide - not recommended for 1 <sup>st</sup> line chemo in patients with malignant glioma who have failed primary therapy (surgery &/or radiotherapy), except in the context of a randomised controlled trial against a standard-treatment comparator.		x	12/04/2001	-13	Not on Trust formulary, chemotherapy if recommended would be offered at the Christie hospital, deemed not applicable by MMC (12/04/01)	
Motor neurone disease - riluzole (TA20)	24/01/2001	Riluzole – recommended for the treatment of individuals with the amyotrophic lateral sclerosis (ALS) form of Motor Neurone Disease (MND).		х	08/02/2001	15	Not MMC approved, not on Trust formulary. MMC approved guidelines (08/02/01). Neurology Consultants confirmed treatment would not be offered at CMFT, prescribed @ Disease Modifying Treatment Clinic SRFT (13/08/09)	
Asthma (children under 5) - inhaler devices (TA10)	23/08/2000	Children under the age of ≤5 yrs with chronic stable asthma both corticosteroids & bronchodilator therapy should be routinely delivered by pressurised metered dose inhaler (pMDI) & spacer system, with a facemask where necessary. Where this combination is not clinically effective for the child & depending on the condition, nebulised therapy may be considered & in the case of children aged 3 to 5 years, a dry powder inhaler (DPI) may also be considered.	x		14/09/2000	22	MMC approved guidelines (14/09/00). Paediatric Respiratory Consultants confirmed compliance (02/09/09)	
			22	7				
			% "Yes"	% "N/A"	-	Average implement time (days)		

Technology appraisal (TA)  Titles are hyperlinks to full guidance	Date of TA Release	Availability of medicine for NHS patients with this medical condition, as indicated by NICE	Adherence of local formulary to NICE					
			Yes	N/A	Date of local	Time to	Notes (e.g. rationale, method of making available)	
					decision	implement		
					(DD/MM/YY)	(days)		
Adherence statistics for 2000-06			76%	24%		-185		