

















NEWSLETTER October – December 2022

For further information about HAPC documents go to: https://www.northernlincolnshireapc.nhs.uk/apc-

documents/

For the Humber Joint Formulary go to:

Humber APC Formulary (apcnlgformulary.nhs.uk)

Traffic Light Classification within HAPC:

RED – specialist prescriber only

AMBER SCF— prescribed in accordance with approved shared care framework AMBER 1 (Guideline or Specialist Led) — prescribed on advice of specialist or in line with national / local guideline

AMBER 2 (Specialist initiation and stabilisation) – initiated and stabilised by specialist GREEN – other items listed on formulary suitable for initiation and prescribing by any prescriber

The Humber APC was formed in April 2022 merging Hull and East Riding Prescribing Committee (HERPC) and Northern Lincolnshire Area Prescribing Committee. The joint formulary alignment is currently ongoing with the joint formulary being hosted on the Northern Lincolnshire APC netformulary website. Further details on the different classifications are at the end of the newsletter.

- Hull and East Riding of Yorkshire joint formulary users should still refer to the HERPC joint formulary first and if then if directed within the formulary check the Humber APC formulary.
- Northern Lincolnshire users can continue to use the netformulary website as normal.

ADDITIONS TO RED LIST

Roxadustat (TA807)	Gefapixant (HUTH cough	Risankizumab (TA803)
	clinic)	
Abrocitinib (TA814)	Tralokinumab (TA814)	Upadacitinib (TA814)
Guselkinumab (TA815)	Brolucizumab (TA820)	Imlifidase (TA809)
Abemaciclib(TA810)	Semelanotide (HST21)	Fenfluramine (TA808)
Asciminib (TA813)	Alpelisib (TA816)	Nivolumab (TA818)
Ipilimumab (TA818)	Sacituzumab (TA819)	Avalglucosidase alfa (TA821)
Posaconazole	Somatrogon (Ngenla®)	Atezolizumab (TA823)
Dexamethasone intravitreal	Avacopan (TA825)	Upadacitinib (TA829)
implant (TA824)		
Pirobrutinib	Tecovirimat	ltuluzax [®]
Pentazocine (HUTH cough	Oraltek (Dog dander)	Oral azacitidine (TA827)
clinic)		
Ozanimod (TA828)	Pembrolizumab (TA830,	Olaparib (TA831)
	TA837)	
Fostamatinib (TA835)	Palbociclib (TA836)	

NEW & UPDATED SCF (Amber SCF)

<u>Dementia SCF</u> Hull and East Riding of Yorkshire – full review and changes in process in Humber (not yet launched within Humber Foundation Trust (CHCP and HUTH live)).

For further information please contact: Jane Morgan, Principal Pharmacist- Formulary, Interface and Medicines Commissioning

Tel. 01482 461519











NEW & UPDATED GUIDELINES/SPECIALIST LED MEDICINES (Amber 1 and Amber 2)

Triptorelin (6 monthly) – new for NEL/NL (Amber 1)	Icosapent Ethyl TA805 (Amber 1)	Octreotide subcutaneous injection (Amber 1) – for palliative care gastro indications only
Relugolix-estradiol- norethisterone TA832 (Amber 2)	Inclisiran (Amber 1)	

Inclisiran guidance

Lipid Guidance

Gastrointestinal infections (Hull and East Riding of Yorkshire only)

GREEN DRUGS

No green drugs approved this quarter

Updated chapters in joint formulary

Chapter 4 - Approved and uploaded to netformulary site; HERPC joint formulary now removed

Chapter 2 - Approved uploaded; HERPC joint formulary not yet removed

Chapter 13 – Approved; not yet uploaded.











Traffic Light Status Information

Status	Description
GREEN	Medicines suitable for routine use within primary care and Secondary care. May be initiated within
	primary care within their licensed indication, in accordance with nationally recognised formularies
AMB 1	Specialist recommendation: These medicines are considered suitable for GP prescribing following specialist recommendation or via an APC approved prescribing guideline.
AMB 2	Specialist initiation: These medicines are considered suitable for GP prescribing following specialist
	initiation, including titration of dose and assessment of efficacy. These medicines may also have
	an APC approved guideline to aid GPs in further prescribing.
AMB SCP	AMBER SHARE CARE PROTOCOL- Specialist initiation with ongoing monitoring: Medicines that must
	be initiated by a specialist, and which require significant monitoring on an ongoing basis. Full
	agreement to share the care of each specific patient must be reached under the shared care
	protocol which must be provided to the GP. If a commissioned shared care is not available in
	CCG/place then these drugs must be treated as red drug (hospital only).
RED	Red-Hospital initiation and continuation only
grey	GREY- NON FORMULARY (As agreed by Area Prescribing Committee)
PURPLE	To be supplied from the appropriate commissioned provider.
R NR	Not routinely commissioned