RAG Status proposed by the FMESG at the March 2018 meeting For GM wide consultation				
Product	Decision		Notes on Decision	Cost impact
	Status Assigned	Deferred		
Pitolisant for narcolepsy	Red		FMESG agreed that pitolisant for narcolepsy should be added to the RAG list as a RED drug. Very low numbers of patients requiring this treatment are expected (<10 patients across GM per year) therefore no formal position statement would be issued, as the care of this small group of patients would remain with specialists within the tertiary centre.	The cost of 30 days treatment with pitolisant at a dose of 4.5 mg to 36 mg once daily is £310 to £620 (eMIMS, April 2018, excl VAT). The cost of 30 days' treatment with other medicines used for narcolepsy is £3.76 to £238.68 for stimulants such as modafinil, dexamfetamine or methylphenidate and £540.00 to £1,080.00 for sodium oxybate (Drug Tariff, April 2018, excl VAT).
Metformin for prevention of T2DM	Green		Based on recommendations is the NICE Public Health Guidance on the prevention of T2DM in people at high risk PH38, FMESG recommend that the metformin listing in chapter 6 is revised to include metformin for reduction in the risk or delay of the onset of T2DM in adult, overweight patients with impaired glucose tolerance and/or impaired fasting glucose, and/or increased HbA1c who are: • at high risk for developing overt T2DM and • still progressing towards T2DM despite implementation of intensive lifestyle change for 3 to 6 months The group recommended a GREEN RAG	The resource impact template produced by NICE estimates that the total resource impact of implementing the guidance for the GM STP area based on assumptions made using national data is **£5,445**. The total non-recurrent 5-year saving for the GM STP area is estimated at **£669,959** while total recurrent short term savings each year is estimated at **£7,573**. The above costings are based on the use of **standard release metformin**. The large study included in the evidence review by NICE and on which their recommendation is based used standard release metformin. However, Glucophage SR® was the first licensed metformin product for reduction in

			status (as a second line treatment to intensive lifestyle-intervention).	risk or delay of onset of T2DM, and at least one other modified release metformin product is licensed for this indication. As yet, no standard release metformin product has been granted a license for this indication. **Comparative annual drug acquisition costs of metformin 1.5 to 2 g daily, modified vs standard release:** Glucophage SR = £83.20 to £110.76 Standard release metformin = £28.08 to £37.44 (Prices taken from eMIMS, April 2018)
Sharpsguard 5L sharps bin (Large)	Green		FMESG recommended the addition of the 5L Sharpsguard sharps bin to the formulary as it is the most cost effective of available products. This bin is suitable for regular uses of injectables e.g. insulin & insulin pumps.	The 5L Sharpsguard bin costs £1.21 (£0.24 per litre). Cost of other options ranges between £0.49 to £0.86 per litre.
TA497: Golimumab for treating non-radiographic axial spondyloarthritis	Red		The formulary will be updated to reflect this TA.	MSD agreed a PAS with the DoH which makes the 100 mg dose of golimumab the same cost as the 50 mg dose. Annual cost of 50 – 100 mg SC once a month = £9,156. As golimumab is an option alongside current treatment options which are similarly priced, NICE do not expect the guidance to have a significant impact on resources i.e. it will be less than £9,100 per 100,000 population.
TA499: Glecaprevir–pibrentasvir for treating chronic hepatitis C	Red		The formulary will be updated to reflect this TA.	NHS England commissioned.

TA504: Pirfenidone for treating idiopathic pulmonary fibrosis	Red		The formulary will be updated to reflect this TA.	NHS England commissioned.
TA507: Sofosbuvir–velpatasvir–voxilaprevir for treating chronic hepatitis C	Red		The formulary will be updated to reflect this TA.	NHS England commissioned.
TA508 Autologous chondrocyte implantation using chondrosphere for treating symptomatic articular cartilage defects of the knee	Red		The formulary will be updated to reflect this TA.	NHS England commissioned.
Daclizumab for treating relapsing-remitting multiple sclerosis.	Remove from formulary		The EMA is urgently reviewing daclizumab (Zinbryta®) following cases of serious inflammatory brain disorders. Biogen has also announced its intention to voluntarily withdraw the medicine's marketing authorisations. Until further information is available, EMA advises that new patients should not be started on daclizumab and existing patients should be reviewed and alternative therapy initiated as soon as possible. Patients must not stop their medication without discussing with their doctor, and should speak to their doctor if they have any questions.	
All cytotoxics with a positive NICE Health Technology Appraisal are approved for use in Greater Manchester.				
All links to MHRA drug safety updates will be included as appropriate				