ALL WALES MEDICINES STRATEGY GROUP MINUTES OF THE AWMSG MEETING HELD ON THURSDAY, 18TH OCTOBER 2007 COMMENCING 10.30 AM AT THE ANGEL HOTEL, ABERGAVENNY, NP7 5EN

MEMBERS PRESENT:			Did not participate in agenda item
1.	Dr Fraser Campbell	LHB Medical Director	
2.	Dr Bruce Ferguson	Trust Medical Director	
3.	Mr Peter Harsant	Industry Representative	
4.	Mr Robert Holcombe	LHB Finance Director	
5.	Dr Dyfrig Hughes	Health Economist	1-6 8-9
6.	Cllr Meurig Hughes	Lay member	
7.	Dr Tom Lau	General Practitioner & Prescribing Lead	
8.	Mr David Morgan	National Public Health Service Wales	
9.	Mrs Susan Murphy	LHB Pharmacist	
10.	Mr Dave Roberts	Chief Pharmacist	
11.	Prof Ceri Phillips	Health Economist	

IN ATTENDANCE:

12. Prof Philip Routledge Acting AWMSG Chairman

13.	Dr Geoffrey Carroll	Medical Director, Health Commission Wales
14.	Dr Martin Duerden	Chairman, New Medicines Group
15.	Mrs Ruth Lang	Liaison Manager, Welsh Medicines Partnership
16.	Mrs Karen Morgan	Pharmaceutical Services Branch
	-	Welsh Assembly Government
17.	Mrs Karen Samuels	Programme Manager, Welsh Medicines Partnership

List of Abbreviations:

ABPI Association of the British Pharmaceutical Industry

ASAR AWMSG Secretariat Assessment Report

AWCDG All Wales Cancer Drugs Group
AWMSG All Wales Medicines Strategy Group
AWPAG All Wales Prescribing Advisory Group

BNF British National Formulary

CR/ASAR Company response to the AWMSG Secretariat

assessment report

CR/FAR Company response to the final appraisal report

CR/PAR Company response to the preliminary appraisal report

CSCG Cancer Services Co-ordinating Group
CHM Commission on Human Medicines
DTB Drug & Therapeutics Bulletin

FAR Final appraisal report HCW Health Commission Wales

HoPMMs Heads of Pharmacy and Medicines Management

HSW Health Solutions Wales LHB Local Health Board

M&TCs Medicines & Therapeutics Committees
MHRA Medicines & Herbals Regulatory Authority

NHSIF NHS Industry Forum

NICE National Institute for Health and Clinical Excellence

NMG New Medicines Group

NPHS National Public Health Service PAR Preliminary appraisal report

PPRS Prescription Price Regulation Scheme
SAFF Service and Financial Framework
SMC Scottish Medicines Consortium
SPC Summary of Product Characteristics

TDA User Group Therapeutic Development Appraisal User Group

T&FG Task and Finish Group

WeMeReC Welsh Medicines Resource Centre WMIC Welsh Medicines Information Centre

WMP Welsh Medicines Partnership

1. Welcome and introduction

The Chairman opened the meeting and welcomed those present. The Chairman welcomed Dr Geoffrey Carroll, Medical Director of Health Commission Wales, as a non-voting member. The Chairman confirmed that Ministerial endorsement of the recently updated AWMSG Constitution which included representation from Health Commission Wales as a voting member is currently awaited.

2. Apologies

Dr Paul Buss, NHS Consultant representative

Mr Brian Hawkins, LHB Pharmacist

Mrs Wendy Warren, Nurse Director representative

Mr Jeff Evans, representing other professions eligible to prescribe Miss Carwen Wynne-Howells, Welsh Assembly Government

3. Declarations of interest

The Chairman asked members to declare any specific, non-specific, personal or non-personal interests.

Professor Ceri Phillips declared he had provided Shire Pharmaceuticals with general advice in relation to health economic information required for AWMSG appraisal for which he received no payment. Mr Paul Cox from Shire Pharmaceuticals confirmed that he had no objection to Professor Phillips participating in the appraisal of agalsidase alfa as a voting member.

4. Chairman's report

Appraisal issues:

The Chairman reported that Ministerial ratification of AWMSG recommendations in relation to the appraisals held at the August meeting had been received. The Chairman confirmed that the final appraisal reports (FARs) of the following products had been posted on the AWMSG website, the manufacturers informed and the Service notified.

Darunavir (Prezista®) Tipranavir (Aptivus®) Sunitinib (Sutent®) Co-careldopa (Duodopa®)

Appraisals for next meeting

The Chairman confirmed that the following drugs will be appraised by NMG in November and AWMSG on Tuesday, 11th December 2007.

Medicine - dasatinib (Sprycel®)

Company - Bristol-Myers Squibb Pharmaceuticals Ltd

Indication - Adults with Philadelphia chromosome positive (PH+) acute lymphoblastic leukaemia (ALL) and lymphoid blast chronic myeloid leukaemia (CML) with resistance or intolerance to prior therapy

Medicine - dasatinib (Sprycel®)

Company - Bristol-Myers Squibb Pharmaceuticals Ltd

Indication - Adults with chronic accelerated or blast phase chronic myeloid leukaemia (CML) with resistance or intolerance to prior therapy including imatinib mesilate

General issues:

Prescribing strategy

The Chairman informed members that the AWMSG sub-groups had been given opportunity to consider the three appendices at their meetings in October. He reported that WMP will amend the appendices in light of comments received and the prescribing strategy document will be brought to AWMSG in December 2007. Clarification of wider consultation was sought. The Chairman noted the request.

Consultation on update to the Code of Practice for Scientific Advisory Committees
The Chairman confirmed he had attended a meeting in London to discuss advisory
committees with organisations across the scientific board. He considered that a main
purpose of the consultation was to promote lay member representation on scientific
advisory committees. As AWMSG and NMG have lay member representation on its
Committee, they are already examples of best practice.

Shared care

The Chairman informed members that the AWMSG template for the shared care of Amiodarone had received the endorsement of the Welsh Cardiovascular Society. A notice and templar have been posted on the AWMSG website and distributed to the Service.

Prescribing Reviews

The Chairman confirmed that members of WMP had met with WeMeReC to discuss the editing process of the prescribing reviews. A paper, clarifying the remit, role and responsibilities, will be prepared for the next AWMSG Steering Committee and presented to AWPAG and NHSIF for comment in January 2008.

Feedback on broadened AWMSG process

The Group were informed that WMP had met with representatives of ABPI Wales, the Welsh Industry Group and with manufacturers who had gone through the new AWMSG appraisal process to gain feedback. Mrs Samuels confirmed that the views of AWMSG, NMG and WMP members had also been sought. It was agreed that WMP would collate the feedback and provide a summary response. The Chairman invited Dr Greville, who was seated in the audience, to address members. He confirmed that a meeting has been arranged by ABPI on 21st November at the All Nations Centre, aimed primarily at the industry, to promote engagement and afford an opportunity to clarify issues relating to the AWMSG appraisal process.

Statin template

The Chairman confirmed that the AWMG template for the prescribing of statins had been updated and re-posted on the AWMSG website. Members were informed that a letter had been issues by Mrs Carolyn Poulter, Head of the Pharmaceutical Services Branch of the Welsh Assembly, clarifying the current national policy regarding lipid management and current targets for total and LDL cholesterol. The Chairman informed members that the footer relating to the review data had been amended to provide clarification of the review date.

AWMSG Agenda

The Chairman informed members that due to the increased number of AWMSG meetings, feedback from NHSIF, AWPAG and independent prescribing would be provided at the next meeting in December when draft minutes from the October sub-group meetings had been approved.

5. Minutes of previous meeting

There were no issues of accuracy.

6. Matters arising:

The Chairman invited comment. Mrs Karen Morgan, Welsh Assembly Government representative, confirmed that the reports to the Minister for Health and Social Services, one setting out a proposal for AWMSG to consider all new medicines and a second defining how AWMSG could link effectively with commissioning groups and clinical networks, are in progress.

Professor Routledge outlined the appraisal proceedings and asked members to declare any interests pertinent to the appraisals being held.

The Chairman reminded members that Professor Ceri Phillips had previously declared he had provided Shire Pharmaceuticals with general advice in relation to health economic

information required for AWMSG appraisal for which he had received no payment. The Chairman confirmed that Mr Paul Cox had no objection to Professor Phillips participating in the appraisal of agalsidase alfa as a voting member.

There were no further declarations of interest from any members of the Group eligible to vote. The Chairman confirmed that the WMP independent review team were not present at the meeting.

Appraisal 1: agalsidase alfa (Replagal®) – start time 11.05 am

Manufacturer -Shire Pharmaceuticals

Indication - Replagal is indicated for long-term enzyme replacement therapy in patients with a confirmed diagnosis of Fabry Disease (α -galactosidase A deficiency).

The Chairman invited Mr Paul Cox, Area Manager UK & Ireland, Shire Pharmaceuticals, to introduce himself.

The Chairman confirmed that AWMSG advice has no impact on the licensed status of the technology and the inherent implications associated with this, and that a negative recommendation would not impact on the clinical freedom of the prescriber. He explained that a positive recommendation by AWMSG, subsequently endorsed by the Minister for Health & Social Services, places an obligation on Trusts and LHBs in Wales to fund accordingly. He reiterated that AWMSG advice is interim to NICE should it be subsequently published.

The Chairman confirmed the sequence of the appraisal and invited Dr Martin Duerden, in his capacity as NMG Chairman, to address the Group.

Dr Duerden set the context of the appraisal and provided a brief overview of the discussions held at the New Medicines Group. Dr Duerden highlighted the relevant issues contained within the PAR - Enclosure 2/AWMSG/0807, confirmed the NMG recommendation and drew members' attention to the proposed restrictions for use outlined in the preliminary appraisal report. He reiterated the factors influencing the decision of NMG.

The Chairman asked members to consider the evidence in relation to the clinical effectiveness. There was a discussion and the lack of robust clinical data was noted. There was a suggestion to review enzyme replacement therapies in three years when the data has matured.

The Chairman asked members to consider the evidence in relation to the cost effectiveness. During the discussion a reference was made to the AWMSG ultra orphan drugs policy and the need for a UK approach.

The Chairman invited comment on the broader society issues and, in particular, the patient interest group submission received from the Society for Mucopolysaccharide Diseases.

The Chairman drew members' attention to the CR/PAR and invited Mr Cox to raise any general or specific issues. Mr Cox clarified issues in relation to pharmacovigilance and collection of safety data, outcome surveys and delivery of treatment via a homecare service.

Prior to closing proceedings, the Chairman asked Mr Cox to confirm he was satisfied that all issues had been adequately discussed and taken into account.

In the light of the discussions the Chairman asked members to make note of their initial recommendation on their aide-memoire for reference at a later stage.

The Chairman closed proceedings at 11.47 am and confirmed that the Committee would retire at the end of the appraisal session to vote in private.

7. Appraisal 2: vinorelbine oral (Navelbine Oral®) – 11.47 am

The Chairman confirmed that as Professor Ceri Phillips had worked with WMP to prepare the assessment report, he would be replaced by Dr Dyfrig Hughes who would be the AWMSG voting member for this appraisal. Professor Phillips joined the audience and Dr Hughes joined members at the table.

Manufacturer -Pierre Fabre Ltd

Indication - Advanced breast cancer stage III and IV relapsing after or refractory to an anthracycline-containing regimen.

The Chairman asked members to declare any interest in the manufacturer or the technology. None were declared.

The Chairman welcomed Mr Martin Grange and Dr Gustavo Villanova from Pierre Fabre Limited.

The Chairman confirmed that no members of WMP who may be involved in any subsequent independent review were in attendance.

The Chairman confirmed that AWMSG advice has no impact on the licensed status of the technology and the inherent implications associated with this, and that a negative recommendation would not impact on the clinical freedom of the prescriber. He explained that a positive recommendation by AWMSG, subsequently endorsed by the Minister for Health & Social Services, places an obligation on Trusts and LHBs in Wales to fund accordingly. He reiterated that AWMSG advice is interim to NICE should it be subsequently published.

Dr Duerden set the context of the appraisal. He provided a synopsis of the discussion held at the NMG meeting and outlined the rationale behind NMG's preliminary recommendation to AWMSG contained in the preliminary appraisal report - Enclosure 3/AWMSG/0807. Dr Duerden confirmed that NMG concentrated their advice in relation to first line therapy.

Dr Duerden informed members that two medical expert opinions had been received which were both supportive of the use of the medicine; it was noted there is currently no unified proposed approach to its use.

Dr Duerden confirmed that two patient interest group submissions had been received, one from Breast Cancer Care and the other from Breakthrough Breast Cancer. Both were supportive of the treatment being recommended for use. Dr Duerden confirmed the NMG's preliminary recommendation and referred to the key factors behind the recommendation contained within Enclosure 3/AWMSG/0807.

The Chairman opened the discussion and asked members to address any outstanding issues in relation to clinical effectiveness. There was discussion and the Chairman confirmed that the manufacturers would have opportunity to respond to the issues raised.

The Chairman asked members to consider the evidence in relation to the cost effectiveness. The Chairman confirmed the role of AWMSG in that the appraisal is being undertaken as a single technology and the decision of the Group will be based on clinical and cost effectiveness.

The Chairman invited comment on the patient interest group submission and the broader societal issues. There were no additional comments.

The Chairman referred members to the issues raised in the company response to the preliminary assessment report and invited comment from the manufacturers. Both Dr Grange and Dr Villanova presented their comments to members.

Mrs Samuels corrected the points of accuracy in relation to the CR/PAR.

The Chairman concluded the appraisal at 12.45 pm and confirmed that the Committee would retire at the end of the appraisal session to vote in private.

9. Yellow Card Centre (YCC Wales) Annual Report

The Chairman invited Mrs Jane Houghton, Senior ADR Pharmacist to present Enclosure 5/AWMSG/1007. Mrs Houghton provided an overview of the paper and the Chairman opened the discussion.

Mr David Morgan asked the Chairman if he could raise the following issues on behalf of NHSIF:

- Potential duplication of reporting of adverse reactions
- Clarification in relation to availability of Welsh data via YCC Wales
- Inclusion of a reference to the Yellow Card Scheme on patient information leaflets, SPCs and promotional information
- Campaigns to increase public awareness of the Yellow Card Scheme
- Clarification of the definition of an adverse drug reaction as opposed to an adverse event

Mrs Houghton confirmed that MHRA are currently working to change the format of patient information leaflets and agreed to raise the issue of changing the format of SPCs with the MHRA. Members were informed that there is currently no system in place for developing a national campaign to increase public awareness. Mr Morgan was informed that duplicated reports are merged centrally by MHRA. Mrs Houghton agreed to liaise with MHRA to obtain information in relation to requests for Welsh data. Mrs Houghton agreed to take the comments back to MHRA.

The Chairman closed the discussion and thanked Mrs Houghton for her valuable contribution to YCC Wales (formerly CSM Wales) over many years.

8. Appraisal 3: idursulfase (Elaprase®) – start time 2.20 pm

Manufacturer: Shire Pharmaceuticals

Indication: Elaprase® is indicated for the long term treatment of patients with Hunter

Syndrome (Mucopolysacharidosis II, MPS II)

The Chairman asked members to declare any interest in the manufacturer or the technology.

The Chairman confirmed that AWMSG advice has no impact on the licensed status of the technology and the inherent implications associated with this, and that a negative recommendation would not impact on the clinical freedom of the prescriber. He explained that a positive recommendation by AWMSG, subsequently endorsed by the Minister for Health & Social Services, places an obligation on Trusts and LHBs in Wales to fund accordingly. He reiterated that AWMSG advice is interim to NICE should it be subsequently published.

The Chairman confirmed that no members of WMP who may be involved in any subsequent independent review were in attendance.

Dr Duerden set the context of the appraisal and provided a brief overview of the discussions held at the New Medicines Group. Dr Duerden highlighted the relevant issues contained within the PAR - Enclosure 4/AWMSG/0807, confirmed the NMG recommendation and drew members' attention to the proposed restrictions for use outlined in the preliminary appraisal report. He reiterated the factors influencing the decision of NMG.

The Chairman asked members to consider the evidence in relation to the clinical effectiveness. There was discussion and the lack of a study in children was noted.

The Chairman asked members to consider the evidence in relation to the cost effectiveness. Professor Phillips explained the context of the health economic submission. Members alluded to the previous suggestion for a UK integrated approach in assessing ultra orphan drugs.

The Chairman invited comment on the broader society issues and the patient interest group submission received from the Society for Mucopolysaccharide Diseases.

The Chairman drew members' attention to the CR/PAR and invited Mr Cox to raise any general or specific issues. Mr Cox responded to the issues raised in the discussion.

Prior to closing proceedings, the Chairman asked Mr Cox to confirm his satisfaction that all issues had been adequately discussed and taken into account.

In the light of the discussions the Chairman asked members to make note of their initial recommendation.

The Chairman concluded the appraisal at 3.10 pm

Appraisal conclusions:

At 2.15 pm the meeting resumed and the Chairman announced the decision of AWMSG in relation to the following appraisals:

Appraisal 1 - agalsidase alfa (Replagal®)

The recommendation of the AWMSG is:

Agalsidase alfa (Replagal®) should be recommended for use within NHS Wales as a long-term enzyme replacement therapy in patients with a confirmed diagnosis of Fabry disease.

Patients receiving agalsidase alfa (Replagal®) will be entered into the Fabry Outcomes Survey. AWMSG urge the manufacturers of agalsidase alfa and agalsidase beta to develop a combined outcomes database.

Treatment will be administered under the supervision of a physician experienced in the management of Fabry disease or other inherited metabolic diseases.

Treatment will be administered according to agreed guidelines at appropriate designated centres.

AWMSG will review this and other enzyme replacement therapies within three years.

Appraisal 2 - vinorelbine oral (Navelbine Oral®)

The recommendation of the AWMSG is:

Oral vinorelbine (Navelbine Oral®) is recommended for use within NHS Wales as a single agent (in line with current NICE recommendations for IV vinorelbine), for the treatment of advanced breast cancer stage III and IV relapsing after or refractory to an anthracycline-containing regimen.

Oral vinorelbine (Navelbine Oral®) should only be initiated by specialists experienced in the treatment of breast cancer.

Oral vinorelbine (Navelbine Oral[®]) should not presently be recommended for shared care.

At 3.30 pm the meeting resumed and the Chairman announced the decision of AWMSG in relation to the following appraisals:

Appraisal 3 - idursulfase (Elaprase®)

The recommendation of AWMSG is:

Idursulfase (Elaprase®) should not be recommended for use within NHS Wales for the long-term treatment of patients with Hunter syndrome (Mucopolysaccharidosis II, MPS II).

The clinical and cost effectiveness data presented was not sufficient for AWMSG to recommend its use.

The Chairman confirmed that the Final Appraisal Reports would be forwarded to manufacturers within the next five working days. He confirm that manufacturers have up to ten working days following the AWMSG meeting to accept the recommendation or lodge a request for an independent review which should be submitted in writing to the Chairman via WMP. The Chairman reiterated that failure to respond would not delay the process.

The Chairman confirmed that AWMSG recommendations would be forwarded to the Minister for Health and Social Services for ratification when the ten days had expired unless an application for independent review had been received.

The Chairman thanked the manufacturers for engaging with the AWMSG process and closed the meeting.

Date of next AWMSG meeting: Tuesday, 11th December 2007 at the Angel Hotel, Abergavenny.