All Wales Medicines Strategy Group

Grŵp Strategaeth Meddyginiaethau Cymru Gyfan

WEDNESDAY 17th JULY 2013 COMMENCING 09.30 AM

(UNTIL 4.00 PM APPROX)

AT CARDIFF METROPOLITAN UNIVERSITY, LLANDAFF CAMPUS, WESTERN AVENUE, CARDIFF CF5 2YB

AGENDA

		Enclosure
1.	**Welcome and introduction**	
2.	**Apologies**	
3.	**Declarations of interest**	
4.	**Minutes of previous meeting**	**1**/AWMSG/0713

To protect commercial confidentiality, the first appraisal will be conducted in private. The final appraisal recommendation will be announced in public.

5.	**Appraisal 1 – Full submission (WPAS)** **Lapatinib (Tyverb®)** for the treatment of adult patients with breast cancer, whose tumours overexpress HER2 (ErbB2), in combination with capecitabine for patients with advanced or metastatic disease with progression following prior therapy, which must have included anthracyclines and taxanes and therapy with trastuzumab in the metastatic setting	**2**/AWMSG/0713 **Appendices**

The meeting will now open to the public

6.	**Chairman's report (verbal update)**	
7.	**Appraisal 2 – Full submission** **Nepafenac (Nevanac®)** for reduction in the risk of postoperative macular oedema associated with cataract surgery in diabetic patients	**3**/AWMSG/0713 **Appendices**
8.	**Appraisal 3 – Full submission** **Ulipristal acetate (Esmya®)** for the pre-operative treatment of moderate to severe symptoms of uterine fibroids in adult women of reproductive age. The duration of treatment is limited to 3 months	**4**/AWMSG/0713 **Appendices**

9.	**Appraisal 4 – Limited submission** **Adalimumab (Humira®)** for the treatment of severe active Crohn's disease in paediatric patients (6 to 17 years of age) who have had an inadequate response to conventional therapy including primary nutrition therapy, a corticosteroid, and an immunomodulator, or who are intolerant to or have contraindications for such therapies	**5**/AWMSG/0713 **Appendices**
10.	**Appraisal 5 – Limited submission** **Adalimumab (Humira®)** in combination with methotrexate for the treatment of active polyarticular juvenile idiopathic arthritis, in children aged 2-4 years who have had an inadequate response to one or more disease-modifying anti-rheumatic drugs (DMARDs). Adalimumab can be given as monotherapy in case of intolerance to methotrexate or when continued treatment with methotrexate is inappropriate. Adalimumab has not been studied in children aged less than 2 years	**6**/AWMSG/0713 **Appendices**
11.	**Appraisal 6 – Limited submission** **Tenofovir disoproxil fumarate (Viread®)** in combination with other antiretroviral medicinal products for the treatment of HIV-1-infected paediatric and adolescent patients aged 2 to < 18 years, with NRTI resistance or toxicities precluding the use of first line agents. The choice of tenofovir disoproxil fumarate to treat antiretroviral-experienced patients with HIV-1 infection should be based on individual viral resistance testing and/or treatment history of patients	**7**/AWMSG/0713 **Appendices**
12.	**Appraisal 7 – Limited submission** **Tenofovir disoproxil fumarate (Viread®)** for the treatment of chronic hepatitis B in adolescents 12 to < 18 years of age with compensated liver disease and evidence of immune active disease, i.e. active viral replication, persistently elevated serum ALT levels and histological evidence of active inflammation and/or fibrosis	**8**/AWMSG/0713 **Appendices**
13.	**AWPAG update (draft minutes of June 2013 meeting)**	**9**/AWMSG/0713
14.	**AWMSG Medicines Strategy for Wales (Update)**	**10**/AWMSG/0713
15.	**AWMSG National Prescribing Indicators:** **Antidepressant & Dosulepin Prescribing**	**11**/AWMSG/0713
16.	**AWMSG National Prescribing Indicators Report 2012-13**	**12**/AWMSG/0713
17.	**Opioids in Palliative Care – A Patient Information Manual**	**13**/AWMSG/0713

Date of next meeting:
Wednesday 16th October in Abergavenny