

**Minutes of the meeting of the AREA PRESCRIBING COMMITTEE held on
Wednesday, 12th November 2025 via MS Teams**

MEMBERS:

Erica Carmody (Chair)	Medicines Optimisation Senior Pharmacist, Strategy & Delivery Barnsley & Doncaster (SY ICB)
Professor Adewale Adebajo	Associate Medical Director (Medicines Optimisation) on behalf of the Medical Director (BHNFT)
Patrick Cleary	Lead Pharmacist - Barnsley BDU/Medicines Information (SWYPFT)
Deborah Cooke	Senior Pharmacist, Strategy and Delivery, Barnsley & Clinical Effectiveness (SY ICB)
Joanne Howlett	Medicines Optimisation Lead Pharmacist, Strategy and Delivery Barnsley (SY ICB)
Dr Kapil Kapur	Consultant Gastroenterologist (BHNFT)
Chris Lawson (up to 25/209.1)	Programme Director for Medicines Optimisation, Strategy and Delivery (SY ICB)
Dr Munsif Mufalil (from 25/205 to 25/214.3)	General Practitioner (LMC)
Gillian Turrell	Lead Pharmacist, Medicines Information and Cardiology (BHNFT)

IN ATTENDANCE:

Nicola Brazier	Medicines Optimisation Business Support Officer (SY ICB)
Maryam Safdar	Interface Pharmacist, BHNFT Pre-registration Pharmacist, SY ICB

APOLOGIES:

No apologies received.

**ACTION
BY**

APC 25/201	QUORACY	The meeting was quorate from 25/205 to 25/214.3 therefore any proposed decisions or approvals made whilst the meeting was not quorate will be ratified for endorsement either outside of the meeting by email or at the next meeting.	JH/NB
		The new Interface Pharmacist, BHNFT was welcomed to the meeting. Maryam Safdar was welcomed to the meeting, attending for learning experience.	
		The Associate Medical Director, BHNFT spoke of a two-minute silence observed yesterday in remembrance of Mike Smith, former Chief Pharmacist at BHNFT and asked for a moment of reflection.	
APC 25/202	DECLARATIONS OF INTEREST RELEVANT TO THE AGENDA	There were no declarations of interest relevant to the agenda to note.	
APC 25/203	DRAFT MINUTES OF THE MEETING HELD ON 13th OCTOBER 2025	The minutes were approved as an accurate record of the meeting.	

Agreed action: -

- As the meeting was not quorate for this item, approval will be obtained outside of the meeting by email.

NB

Post meeting note: approval received by email; therefore, the minutes were approved by the Committee.

APC 25/204 MATTERS ARISING AND APC ACTION PLAN

25/204.1

Immunosuppressants - dermatology guidelines

The Lead Pharmacist, BHNFT advised that this is scheduled to be discussed at the December 2025 Trust Governance Committee, and an update will be brought back to this Committee.

GT

25/204.2

Amber SCG for Entresto® in the Management of Chronic Heart Failure (LMC approval)

The MO Lead Pharmacist, SY ICB (JH) confirmed that the guideline has been amended following LMC feedback, reworded to include that early shared care referral less than 12 weeks can be made to primary care, where the specialist has titrated up to the maximum dose and where the patient is stable. This has been included in both the specialist's responsibilities and the primary care responsibilities.

The LMC GP (MM) approved the updated Amber SCG for Entresto® in the Management of Chronic Heart Failure.

25/204.3

NICE TAs (September 2025)

The Lead Pharmacist, BHNFT **to advise** if the following NICE TAs are applicable for use at BHNFT: -

- TA1098 Isatuximab in combination for untreated multiple myeloma when a stem cell transplant is unsuitable

GT

This is being followed up with the BHNFT NICE Group for a response.

25/204.4

DMARD Shared Care Guideline (LMC approval)

The updated guideline was approved by the Committee at the last meeting, subject to approval from the LMC. The LMC required additional time to review the guidance.

Agreed action: -

- Awaiting approval from the LMC.

MM/JH

25/204.5

Action Plan – other

25/204.5.1

Proposed APC Feedback to IMOC

The Programme Director for Medicines Optimisation, Strategy and Delivery (SY ICB) reminded members that this was around the strength of feeling back in October last year about the establishment of the IMOC and how things were working with Barnsley, noting the main area of concern was around the primary care representation. These issues were discussed at the APC and a draft response was circulated to members for comment. This item was deferred to the next meeting to allow the Programme Director for Medicines Optimisation, Strategy and Delivery (SY ICB) to review any responses received.

CL

25/204.5.2 Combination anticoagulant and antiplatelet treatment for patients with concomitant AF and ACS Guideline
The Lead Pharmacist, BHNFT had previously advised that following staffing issues and changes, work on the guideline had not been progressed but had agreed to discuss again with Henry Frankland, Lead Pharmacist (Cardiology & Respiratory). An update on this was followed up, however due to significant capacity issues, other areas of work are taking priority, and a revised timescale would need to be considered.

The Senior Pharmacist, SY ICB (DC) referred back to the discussion at the September APC meeting where it was decided to remove the guideline from the South Yorkshire Medicines Optimisation website, and to clarify if a local guideline was needed or whether it would instead be considered acceptable to refer to national/European Society of Cardiology (ESC) guideline, and asked if there was any advice about what action should be taken in the interim. The Lead Pharmacist, BHNFT agreed to compile some information for the MO team to use on the website to help signpost colleagues to the appropriate guidance.

The additional query received regarding the separate antiplatelet guidelines which were written in 2020 with a 2022 review date and the suggestion that we consider following the Sheffield guidelines which are currently within the review period, would be discussed further outside of the meeting.

Agreed actions:

- The Lead Pharmacist, BHNFT to provide information for the MO team to use on the website to help signpost colleagues to the appropriate guidance. GT
- The Lead Pharmacist, BHNFT and MO colleagues to discuss the separate antiplatelet guidelines. GT/DC/ JH

25/204.5.2 Smoking Cessation Guidelines (update)
The Senior Pharmacist, SY ICB (DC) wanted to seek views from members on the smoking cessation guideline that is currently scheduled for December, and to consider whether it is a current priority and whether it is still needed following changes to services.

It was agreed that as this is going to be a service specifically for community pharmacy, the action would be removed from the APC action plan. NB

APC 25/205 BARNSTABLE GUIDELINE ANTICOAGULATION FOR STROKE PREVENTION IN NON-VALVULAR AF: JOINT PRIMARY AND SECONDARY CARE GUIDANCE
The Senior Pharmacist, SY ICB (DC) advised that it had been brought to her attention that there was a discrepancy in the Barnsley guideline regarding dabigatran dosing in renal impairment. As the Barnsley guideline review date has passed, the Committee were asked if this should be stepped down and instead, we should refer to the Sheffield Guideline Anticoagulation for Stroke Prevention in Non-Valvular Atrial Fibrillation (SPAF), which is more up to date and within the review period.

It was noted that all guidelines are held centrally on the SY MO website, and that separately, conversations are taking place via the IMOC subgroup as to whether a South Yorkshire guideline should be in place when this guideline is reviewed, therefore it seems sensible that in the interim we move to using the Sheffield guideline, for which the Barnsley guideline was based on originally.

The Committee were in support of this approach.

APC 25/206 SHARED CARE GUIDELINES/AMBER G SHARED CARE GUIDELINES

25/206.1 Barnsley Mesalazine Amber-G guideline to include rectal preparations (update)

The MO Lead Pharmacist, SY ICB (JH) presented the updated guideline which has had a full review and now includes the rectal mesalazine preparations, as agreed by the APC in June 2024. The requirement for a urine dipstick in the monitoring section has been removed in line with the updated SPS information.

This has been sent to the specialists at BHNFT, but no comments have been received. Although no comments had been received from the LMC, the LMC GP (MM) approved the guideline at today's meeting.

The updated guideline was approved by the Committee.

APC 25/207 FORMULARY

25/207.1 Single National Formulary (SNF) (10 year NHS plan reference)

The Programme Director for Medicines Optimisation, Strategy and Delivery (SY ICB) referred to enclosure D, a letter from NHS England to Regional and ICB Medical Directors and Regional and ICB Chief Pharmacists regarding the 10 Year Health Plan and Life Sciences Sector Plan which sets out a commitment to move to a Single National Formulary (SNF) for medicines within the next two years. The overall aim of the SNF will be to drive rapid and equitable adoption of clinically and cost-effective innovations.

In terms of timeframes, around 5 years is described, the first 2 years is in respect of the first phase, with reference to aligning the medicines, mapping them against the NICE pathways, and also a reference to looking at shared care guidelines as part of a test and learn to see whether there is any advantage to that approach, and see if that could potentially improve how shared care is managed across the NHS. The further 3 years looks at a wider range of medicines including other medicines and indications.

It was noted that while this is being developed any single national formulary will work alongside local formularies. It is intended to be a vital decision-making tool for clinicians, and a working group has been established and task and finish groups will also be established, very much describing a collaborative process, with patients, prescribers, local NHS and industry mentioned, noting about local clinicians retaining clinical autonomy and being encouraged to use products with it that are rated highly in the single national formulary.

There were some advantages recognised including potential solutions to the out of stock issues.

25/207.2

SY ICB Organisation Change

It was noted that the ICB has now received guidance from NHS England to formally proceed with the Organisational Change. Since the beginning of July, the ICB has been ready to proceed with a staff consultation but have been unable to do so due to funding costs associated with redundancy. The ICB has been asked to start the consultation as soon as possible.

The Associate Medical Director (Medicines Optimisation), BHNFT wanted to offer his support, asking how he could provide feedback about retaining our highly talented colleagues.

The Programme Director for Medicines Optimisation, Strategy and Delivery (SY ICB) advised that there will be the consultation process starting locally, possibly early December, which will give an opportunity for wider stakeholders to feedback on it.

APC 25/208

NEW PRODUCT APPLICATION LOG

The new product application log was received for information.

APC 25/209

SOUTH YORKSHIRE INTEGRATED MEDICINES OPTIMISATION COMMITTEE (SY IMOC)

25/209.1

SYICB IMOC Draft Minutes – 1st October 2025

The minutes were received for information.

25/209.2

SYICB IMOC Verbal Key Points – 5th November 2025

The MO Lead Pharmacist, SY ICB (JH) provided an update on key points from the November 2025 meeting.

25/209.2.1

South Yorkshire Actinic Keratosis (AK) guidelines (new)

The new South Yorkshire Actinic Keratosis guideline was approved subject to some minor amendments.

The guideline covers recognition and definition of AK, general advice and self-care treatment advice and a treatment pathway (algorithm) detailing first and second line treatments. There is also a table detailing the different treatment options and details of the specialist services at each Place are included. The preparations in the guidance have been classified green therefore GPs can initiate if confident to do so. There will still be access to Tele-Dermatology in Barnsley, and training is going to be arranged.

The following formulary changes for Barnsley were noted: -

- Fluorouracil 5% cream is now available as a generic and will move from formulary amber to formulary green, and the Efudix® brand will be removed from the formulary.
- Actikerall® (5 Fluorouracil and salicylic acid 5FU-SA) will move from formulary amber to formulary green
- Solaraze® (Diclofenac 3% gel) will move from formulary amber G to formulary green and our amber G guideline will be stepped down.

- Aldara® (Imiquimod 5% cream) will move from formulary amber to formulary green.

The following new products listed in the guidance will be added to the Barnsley formulary: -

- Tolak® (fluorouracil 4% cream) 40mg/g cream will be formulary green (2nd line to efudix for stock supply issues) - to be used when the 5% cream is out of stock or as an alternative to the 5% cream for small single lesions available as a 20g tube.
- Bascellex® (Imiquimod 50mg/g cream) will be formulary green - an alternative to aldara (formulary green).
- Zyclara® (Imiquimod 3.75%) will be formulary green
- Klisyri® (tirbanulin 1%) will move from non-formulary provisional amber to formulary green

The LMC GP (MM) asked if LMC had representation at the November IMOC meeting, and it was confirmed that a representative was present from Rotherham LMC.

25/209.2.2 Tirzepatide weight management guideline
This was approved to support the change of traffic light status of tirzepatide for overweight and obesity from formulary red to formulary green for those who meet priority Cohort 1 criteria only, where prescribed in line with the local guidance and the locally commissioned service, which will be launched shortly.

The Barnsley formulary will be amended to show that tirzepatide is formulary green for patients in cohort 1, and this helps enable the ICB compliance with the NICE TA requirements for access to the tirzepatide in primary care.

As the guidance is quite lengthy, a quick reference guide is to be developed.

The position statement for tirzepatide for managing overweight and obesity has also been updated to reflect the local commissioning arrangements in primary care and the referral criteria have been updated within it, in line with the guideline.

25/209.2.3 SY ICB Position Statement - Choice of DOAC for prevention of stroke and systemic embolism in adults with NVAF
This was approved and now replaces the previous Barnsley position statement.

This is currently on the SY MO website, and a link has been included on the APC agenda. As in the previous Barnsley guidance, the apixaban generic tablets and the rivaroxaban generic tablets are the first line DOACs for AF in all care settings.

A link will be added to the Barnsley formulary in due course, and has also been shared with the Lead Pharmacist, BHNFT to share with relevant specialists.

25/209.2.4	<p><u>Children's & Young People's (CYP) Asthma Guideline (updated)</u> This has received a minor update to reflect that Symbicort® 100/6 is now licensed for MART use in children aged 6 and above.</p>
25/209.2.5	<p><u>SY Position Statement for Prescribing of Betamethasone/Formoterol</u> There is a new SY position statement for prescribing of Betamethasone and Formoterol Combination MDIs. This is now on the SY MO website, and a link has been included on the APC agenda.</p> <p>For new patients, SY ICB recommends the Proxor® MDI as the Betamethasone/Formoterol MDI cost effective product of choice. Proxor® will replace Luforbec® on the Barnsley formulary as the beclomethasone/formoterol MDI of choice in new patients and wording will be added to the formulary to note that Luforbec® is reserved for use in existing patients only. Patients on Fostair® MDI will be reviewed and switched to Proxor® MDI where appropriate.</p>
25/209.2.6	<p><u>Rimegepant Clinician Fact Sheet/Rimegepant Patient Information Leaflet (PIL)</u> The rimegepant clinician fact sheet for acute treatment of migraine in adults, the SY migraine management document, and the rimegepant PIL have all received minor updates following the IMOC approved traffic light classification change of atogepant and rimegepant for preventative treatment from red to amber G.</p> <p>As mentioned previously, these will only change to amber G for preventative treatment once training has been provided, but these resources have been updated in readiness for when the training is being provided and the classification changes. These will then be uploaded to the SY MO website.</p>
25/209.3	<p><u>IMOC Approved Guidelines (for information)</u> Links to the following guidelines on the SY MO website, approved by IMOC were shared with the agenda for information: -</p> <ul style="list-style-type: none"> • Polypharmacy SMR resources • Me + My Medicines The Charter • How to safely stop taking your medicines leaflet • Reviewing your medicines patient information (SMR Invitation letter) • SY ICB Gluten Free Prescribing Guidelines (update October 2025) • SY Valproate Guidance in Primary Care (update September 2025)
APC 25/210	BARNSTABLE APC REPORTING
25/210.1	<p><u>APC Reporting - September 2025</u> The Senior Pharmacist, SY ICB (DC) presented 2 enclosures this month, the September 2025 APC reports, noting that a number of these reports have been discussed at previous meetings, and some have since been resolved. Due to the lag in when we present the reports, we are seeing this month the ones that we highlighted regarding DMS communication not being sent to the pharmacies, but this has since resolved and similarly, we have seen the reports now regarding edoxaban being used first line, that we have previously discussed, noting that the Lead Pharmacist, BHNFT has since sent out comms within BHNFT. There were no other reports to highlight.</p>

Enclosure G2 was presented which is a summary of the numbers of reports received during the first 6 months of the year, detailing the report categories. Within the first 6 months of the year, we have received 79 reports via the APC reporting route, noting that has been a reduction compared to the number of reports received in the same period last year, documented on the report that we are aware that this is likely to be due to a combination of reporting fatigue and overall capacity and workload issues rather than a genuine reduction in issues.

Additionally, since June, when the BHNFT Interface Pharmacist left post, interface queries have been submitted, as agreed in this meeting, direct to the relevant medical secretary, therefore the numbers of interface queries are no longer collated centrally. It was recognised that the APC reports we receive reflect only a small part of the overall situation.

In the categories, the common themes, are as we have seen in previous meetings and what we highlighted when we brought the 12 month summary earlier this year, in that the D1 communication issues form the bulk of the reports, with approximately 59% related to D1 communication issues including related to either the medication changes, information being unclear or other medication clinical information being unclear or missing. Other categories that form a reasonable proportion of the reports, around 9%, include prescribing errors and formulary related issues. The rest are split across a range of categories.

Following recent recruitment to the BHNFT Interface Pharmacist post, and whether interface queries can start to be re-directed to the interface email address, the Lead Pharmacist, BHNFT advised that due to ongoing capacity issues, this was unlikely to be an option going forward.

APC 25/211
25/211.1

NEW NICE TECHNOLOGY APPRAISALS

NICE TAs – October 2025

The Lead Pharmacist, BHNFT advised that the following NICE TAs **were not** applicable for use at BHNFT: -

- TA1074 (Update) Sparsentan for treating primary IgA nephropathy
- TA1099 Durvalumab for treating limited-stage small-cell lung cancer after platinum-based chemoradiotherapy
- TA1100 (**terminated appraisal**) Mirabegron for treating neurogenic detrusor overactivity in people 3 to 17 years
- TA1101 Garadacimab for preventing recurrent attacks of hereditary angioedema in people 12 years and over
- TA1102 (**terminated appraisal**) Iptacopan for treating complement 3 glomerulopathy
- TA1103 (Updates and replaces TA909) Lorlatinib for ALK-positive advanced non-small-cell lung cancer that has not been treated with an ALK inhibitor
- TA1104 (**terminated appraisal**) Sarilumab for treating polyarticular or oligoarticular juvenile idiopathic arthritis in people 2 to 17 years
- TA1105 (**terminated appraisal**) Clascoterone for treating acne vulgaris in people 12 years and over

The Lead Pharmacist, BHNFT **to advise** if the following NICE TAs are applicable for use at BHNFT: -

- TA937 (Update) Targeted-release budesonide for treating primary IgA nephropathy

GT

25/211.2	<u>Feedback from BHNFT Clinical Guidelines and Policy Group</u> There has been no meeting since the last APC meeting therefore there was nothing to report.
25/211.3	<u>Feedback from SWYPFT NICE Group</u> There was nothing to report.
APC 25/212 FEEDBACK FROM THE MEDICINES MANAGEMENT GROUPS	
25/212.1	<u>BHNFT</u> There was nothing to report.
25/212.2	<u>SWYPFT Drug and Therapeutics Committee (D&TC)</u> The meeting was currently taking place therefore there was nothing to report, however the Lead Pharmacist advised that SWYPFT were currently updating the Bupropion PGD.
25/212.3	<u>Community Pharmacy Feedback</u> There was no representative present for this item, therefore no update provided.
25/212.4	<u>Wound Care Advisory Group</u> The MO Senior Pharmacist, SY ICB (EC) advised that the overarching wound care policy was going through the final governance process, and that the new policy was expected to be published once approved.
APC 25/213 ISSUES FOR ESCALATION TO THE BARNESLEY PLACE QUALITY & SAFETY COMMITTEE (13th NOVEMBER 2025)	
	There were no issues to escalate.
APC 25/214 FORMULARY ACTIONS	
25/214.1	<u>SPS Newsletter September 2025</u> Received and noted for information.
25/214.2	<u>IMOC Horizon Scanning November 2025</u> The MO Lead Pharmacist, SY ICB presented enclosure J detailing the traffic light classifications approved at the November 2025 IMOC meeting. <ul style="list-style-type: none">• Influenza vaccine (new vaccine) – influenza vaccine (chemical substance level) already formulary green• Levodopa (Inbrija®, new inhaled formulation) – to be classified at formulation level rather than at chemical substance level – non-formulary grey• Nirsevimab (new medicine) – formulary red

The formulary classifications were accepted by the Committee.

25/214.3

TLDL Sub-Group List October 2025

The MO Lead Pharmacist, SY ICB referred to enclosure L, noting the formulary changes for Barnsley as highlighted in the document: -

- Lomustine - change from non-formulary to non-formulary red (remove entry from unlicensed section of formulary)
- Macitentan - add as non-formulary red
- Mecasermin - change from non-formulary to non-formulary red
- Mepacrine - change from non-formulary to non-formulary red
- Misoprostol (includes in combination) - Misoprostol (Gynaecological indications) entry requires changing from non-formulary to non-formulary red. Mifepristone and misoprostol vaginal tablet, and misoprostol vaginal delivery system are already non-formulary red (provisional wording requires removal)
- Mitotane - change from non-formulary to non-formulary red
- Nepafenac - change from non-formulary to non-formulary red
- All human coagulation factor IX - add as non-formulary red
- Recombinant Parathyroid hormone - change from non-formulary provisional red to non-formulary grey. Remove formulary red entry for parathyroid hormone (Preotact®) as discontinued
- Paricalcitol - change from non-formulary to non-formulary red
- Pentamidine - change from non-formulary to non-formulary red
- Pentostatin - change from non-formulary to non-formulary red
- Plerixafor - change from non-formulary to non-formulary red (remove the entry from 9.1.6 of the formulary and keep the entry in 9.1.7 of the formulary)

The Barnsley formulary changes were approved by the Committee.

25/214.4

TLDL Sub-Group – Green Drugs (June 2024) Part 2

The MO Lead Pharmacist, SY ICB referred to enclosure L, the second half of the green drugs that were approved by IMOC back in June 2024.

It was noted that some of these drugs will currently be classified grey in Barnsley, therefore the changes required to the Barnsley formulary were highlighted.

As a general principle where Barnsley have some brands of green drugs classified as non-formulary grey, as they are not the cost-effective options, these will change to non-formulary with a note to refer to the formulary products/entry.

The Senior Pharmacist, SY ICB (DC) referred to the earlier discussion at 25/209.2.5 regarding Proxor®, to check with the Lead Pharmacist, BHNFT if the Trust will continue to use Fostair® MDI or if there would be scope to use Proxor®, to clarify what wording should be added to the formulary.

The Lead Pharmacist, BHNFT to check internally in terms of contract arrangements, and seek views if required, from the clinicians who would initiate it.

The Senior Pharmacist, SY ICB (DC) advised that a SY Adult Asthma Guideline will be developed, which will include engagement with specialists.

The Lead Pharmacist, SWYPFT advised that where they can, SWYPFT will look to use Proxor® first line.

The classifications were accepted by the Committee.

Agreed action: -

- The Lead Pharmacist, BHNFT to check internally in terms of contract arrangements, and seek views if required, from the clinicians who would initiate Proxor®.

GT

As the meeting was not quorate for this item, approval will be obtained outside of the meeting by email.

JH/MM

APC 25/215 SAFETY UPDATES

25/215.1 MHRA Safety Roundup (October 2025)

Received for information. The following information was highlighted: -

25/215.1.1 Isotretinoin – updates to prescribing guidance and survey of services

There are updates to prescribing guidance and requirements for services that prescribe Isotretinoin to complete a baseline survey.

25/215.1.2 MedSafetyWeek (3-9 November 2025): A call to action to improve patient safety

It was focussed on highlighting the importance of reporting suspected problems from all healthcare products via the Yellow Card scheme.

25/215.2 IMOC Safety Paper (November 2025)

The MO Lead Pharmacist, SY ICB presented the November 2025 IMOC Safety Paper, highlighting the alerts.

25/215.2.1 Rybelsus® (oral semaglutide): risk of medication error due to introduction of new formulation with increased bioavailability

This has been left on as the new formulations are not currently on the clinical systems. A link will be added to the patient information leaflet about the new formulations and the healthcare professional communication to the formulary and we are in the process of updating the GLP-1 agonist amber G guideline. ScriptSwitch prompts will be added once this is available on the clinical systems.

It was agreed that the Lead Pharmacist, BHNFT and the Senior Pharmacist, SY ICB (DC) would share information about stock availability as it becomes known.

Agreed action: -

- Information about stock availability to be shared when known.

GT/DC

Post meeting note: The new Rybelsus® formulations are listed on the clinical systems and ScriptSwitch has been updated.

25/215.2.2 Patients should be reminded and reassured that there is no evidence that taking paracetamol during pregnancy causes autism in children
A link will be added to the formulary and information will be included in the APC memo.

25/215.2.3 #MedSafetyWeek (3-9 November 2025): A call to action to improve patient safety
Noted above at APC 25/215.1.2.

25/215.2.4 Class 4 Medicines Defect Notification: Relonchem Ltd, Various Products
The product quality is not impacted by this issue; therefore, the affected batches are not being recalled. The main issue is with using these batches in robotic or automated dispensing systems or stocking systems.

25/215.2.5 Class 3 Medicines Recall: Accord Healthcare Ltd, Ipratropium Bromide 500 microgram / 2ml Nebuliser Solution
A foil pouch was found to contain ampoules with incorrect labels intended for the Korean market. The incorrectly labelled ampoules are the same product and contain the same active ingredient but have Korean language labels and different batch details. Community pharmacies have been asked to stop supplying immediately and to quarantine and return any stock via suppliers but there's no safety risk to patients.

APC 25/216 **SOUTH YORKSHIRE AREA PRESCRIBING COMMITTEE MINUTES (FOR INFORMATION)**
The minutes from Doncaster Place & Bassetlaw Place Medicines Optimisation Committee (PMOC) (17th September 2025) and Sheffield APG (18th September 2025) were received and noted for information.

APC 25/217 **ANY OTHER BUSINESS**

25/217.1 December APC meeting

It was noted that the December APC meeting and BEST event clash which may affect attendance/quoracy at the APC meeting.

APC 25/218 **DATE AND TIME OF THE NEXT MEETING**

The time and date of the next meeting was confirmed as Wednesday, 10th December 2025 at 12.30 pm via MS Teams.