

Area Prescribing Group report

Date: Friday 03 July 2026 **Quorate:** Yes

The items in this report are supported by the area prescribing group (APG) and approval by NHS Cheshire and Merseyside Integrated Care Board (ICB) is detailed below.

All document links provided for any CMAPG recommendations can be found in the [Cheshire and Merseyside formulary](#) which will also be updated to reflect these changes.

The legacy Cheshire formulary, and the legacy Pan Mersey APC website and formulary are now closed. Legacy documents are available by using the search function of the [Cheshire and Merseyside formulary](#).

CMAPG governance documents are hosted on the [Prescribing](#) section of the NHS Cheshire and Merseyside website.

Please note there may be items that have been considered by APG but not yet approved by NHS Cheshire and Merseyside ICB. Items will be reported in the month that they are approved.

New medicines NICE TAs

Proposal	Notes	Financial implications	Approval
Fezolinetant for treating moderate to severe vasomotor symptoms associated with menopause RAG designation: Green APG subgroup: 08 May 2026 APG: 06 Jun 2026	Date of NICE TA publication: 31 Mar 2026 Approval for implementation: 90 days Deadline for implementation: 29 Jun 2026 Green statement for treating moderate to severe vasomotor symptoms associated with	Significant cost impact. Financially approved at ICB Executive Committee. Not included in Horizon scanning budget planning.	ICB Medicines Optimisation and Pharmacy (MOP) Group: 18 Jun 2026, clinically supported by MOP group. ICB Executive Committee: 16 Jul 2026, approved by ICB Executive Committee.

Proposal	Notes	Financial implications	Approval
	menopause in line with NICE. TA1143. Fezolinetant is a first in class non-hormonal selective neurokinin 3 (NK3) receptor antagonist which moderates activity of thermoregulatory centre of the brain to reduce the frequency and severity of vasomotor symptoms. It is administered orally once daily and there are no dosage adjustments. It is recommended as option to treat moderate to severe vasomotor symptoms associated with menopause when hormone replacement therapy is unsuitable. Fezolinetant treatment is associated with a risk of drug induced liver injury. Liver function tests should be performed monthly during the first three months of treatment, and then based on clinical judgement.		

New Formulary and guidelines

Proposal	Notes	Financial implications	Approval
Omega-3 Fatty Acid Compounds and other Fish Oils.	Statement recommending a DNP designation in line with NHSE guidance to support de-prescribing - with exceptions for NICE TA805 approved use (Green), prevention of pancreatitis in hypertriglyceridemia	Cost savings by deprescribing Omega-3 compounds and fish oils. Current ICB annual eicosapentaenoic acid and	ICB MOP Group: 16 Jul 2026, approved by MOP group.

Proposal	Notes	Financial implications	Approval
RAG designation: - Do not Prescribe – overall RAG designation - Amber Initiated - for hypertriglyceridaemia to prevent pancreatitis as an additional/ alternative option after fibrates and statin therapy where these are insufficiently effective at maximally tolerated doses or where they are contraindicated, where fasting serum triglycerides >10mmol/L. - Red - Supplementation to prevent Preterm Birth - Green - Icosapent ethyl capsules (Vazkepa) when used in line with NICE TA 805 APG subgroup: 17 Mar 2026 APG: 03 Jul 2026	(Amber initiated) and use for prevention of premature birth (Red). There is a lack of evidence to support continued use in other unlicensed indications and has been associated with an increased risk of atrial fibrillation in patients with existing cardiovascular diseases or cardiovascular risk factors. Practice-level searches and a structured implementation approach are considered necessary to support review and deprescribing. ScriptSwitch message is required.	docosahexaenoic acid cost: £159,120 Annual monthly items: 4,607	
Budesonide 4mg suppositories for treatment of mild to moderate acute ulcerative colitis limited to the rectum (ulcerative proctitis) in adult patients. RAG designation: Green APG subgroup: 16 Jun 2026 APG: 03 Jul 2026	Budesonide 4mg suppositories to be used instead of prednisolone 5mg suppositories for the treatment of mild to moderate proctitis, where aminosalicylate suppositories alone do not control disease.	Based on current primary care prescribing levels if 50% of patients prescribed prednisolone suppositories received budesonide suppositories instead this could result in an annual saving of £77,672. Deprescribing not	ICB MOP Group: 16 Jul 2026, approved by MOP group.

Proposal	Notes	Financial implications	Approval
	This will reduce the likelihood of steroid related adverse effects and will be more cost-effective. Where severe disease is suspected, clinicians may continue to use prednisolone 5mg suppositories where indicated.	envisaged as these are prescribed as discreet courses.	
Actioned items for noting			
Liraglutide in bile acid diarrhoea RAG designation: Red APG subgroup: 16 Jun 2026 APG: 03 Jul 2026	This has been designated by Formulary and Guidelines as Red. Red-designated in-tariff drugs are not added to formulary and are noted by APG.	Cost is in tariff.	ICB MOP Group: 16 Jul 2026, noted by MOP group.
Hydrocortisone sodium phosphate injection RAG designation: Amber Recommended APG subgroup: 16 Jun 2026 APG: 03 Jul 2026	Discontinued, removed from formulary (hydrocortisone sodium succinate, interchangeable with sodium phosphate, remains available).	Minimal cost impact.	ICB MOP Group: 16 Jul 2026, noted by MOP group.