

Freedom of Information Request

Ref: 21-413

3 August 2021

By Email

Dear Sir/Madam

Thank you for your request for information under the Freedom of Information Act 2000. The Trust's response is as follows: After scrutinising minutes from the Minutes of the Drugs and Therapeutics Committee of Weston Area Health NHS Trust from 2017 onwards I have only been able to find the following in relation to your questions below.

- We can confirm that we do hold the information you are requesting

- 1. Please provide all letters, emails or other instructions to consultants, doctors and GPs regarding the prescribing of Liothyronine, Armour Thyroid or Erfa extract from January 2016 to date.**
- 2. Please provide letters or emails to and from Dr Parag Singhal regarding deprescribing or polypharmacy of Liothyronine, Erfa or Armour Thyroid since 2017.**
- 3. Please provide correspondence, either letters, emails or other communication, regarding deprescribing due to cost of Liothyronine.**

We have undertaken a search for the information that you have requested and have the following notes available from the Drugs and Therapeutics Committee of Weston Area Health NHS Trust.

17 January 2019

- RMOC Guidance for use of liothyronine has been published, liaise with endocrinology when BNSSG position formalised. BNSSG DTC has yet to agree shared care arrangements. HS advised still a red drug for Somerset GPs. Emergency directorate pharmacist has compiled a list of patients.
- Liothyronine Prescribing Guidance
- BNSSG has yet to decide on process for shared care with GPs

8th March 2018

- Liothyronine pathway –. advised that the matter was taken to the NHS South West regional medicines optimisation committee (RMOC) who have requested the national body for Endocrinology compile a pathway.
- Liothyronine - CCG are moving this to RED on the Traffic Light System in accordance within national guidelines.

- Trelegy, a triple inhaler for maintenance treatment of COPD has been approved for use with traffic light status of green. The section referring to liothyronine is asking for secondary care reviews of all patients currently taking.

14th September 2017

- Liothyronine pathway –. Make alterations to pathway.
- Alterations made, pathway sent to Emergency Directorate Board. Item to remain outstanding until decision received from the Directorate. There are cost implications to be considered.

11th May 2017

- Liothyronine –. Meet with relevant doctor to develop pathway re use of T3
- Establish at BNSSG JFG if established can continue to keep current prescribing arrangements.
- Provide the number of current patients and associated costs.
- Liothyronine – presented the liothyronine pathway developed to date advised that liothyronine mono-therapy would not be supported and that the pathway applied to combination therapy with levothyroxine. Patients currently on mono-therapy can be referred back to the Hospital for reassessment and apart from exceptional circumstances; they would be transferred to combination therapy. It was requested that a statement outlining the above was added to the pathway. There appears to be a lack of clarity relating to whether prescribing for established patients can, following review, remain as it is currently.

Thursday 9th March 2017

- Liothyronine –. to be encouraged to develop pathway. Lloyds maternity cover pharmacist to be reminded that monotherapy is still Non Formulary
- Meet with Dr to develop pathway for use of T3 at WAHT.
- Liothyronine –compiling a pathway for new and existing patients which need to be agreed by the Emergency Directorate before being tabled at DTC for approval.

26th January 2017

- Liothyronine –BNSSG still to publish pathway for approved usage to develop WAHT pathway.
- T3 is still non-formulary for Somerset [black traffic light].
- Formulary/prescribing issues – Liothyronine

10th November 2016

- Liothyronine – approved at September BNSSG JFG for difficult to manage patients pending finalisation of a pathway for use. Prescribing for existing patients prescribing should stay where it currently is if a decision is taken following a review to continue treatment.

15th September 2016

- Liothyronine – approved at September BNSSG JFG for difficult to manage patients and a pathway is being finalised. For existing patients prescribing should stay where it currently is if a decision is taken following a review to continue treatment.

This concludes our response. We trust that you find this helpful, but please do not hesitate to contact us directly if we can be of any further assistance.

If, after that, you are dissatisfied with the handling of your request, you have the right to ask for an internal review. Internal review requests should be submitted within two months of the date of receipt of the response to your original letter and should be addressed to:

Director of Corporate Governance
University Hospitals Bristol and Weston NHS Foundation Trust
Trust Headquarters
Marlborough Street
Bristol
BS1 3NU

Please remember to quote the reference number above in any future communications.

If you are not content with the outcome of the internal review, you have the right to apply directly to the Information Commissioner for a decision. The Information Commissioner can be contacted at: Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF

Publication

Please note that this letter and the information included/attached will be published on our website as part of the Trust's Freedom of Information Publication Log. This is because information disclosed in accordance with the Freedom of Information Act is disclosed to the public, not just to the individual making the request. We will remove any personal information (such as your name, email and so on) from any information we make public to protect your personal information.

To view the Freedom of Information Act in full please click [here](#).

Yours sincerely

Freedom of Information Team
University Hospitals Bristol and Weston NHS Foundation Trust