



Prescribing Tip No. 193 Date: 14th February 2018

## NHS England Guidance - Items Which Should Not Be Routinely Prescribed In Primary Care

In November 2017, NHS England published <u>quidance</u> for CCGs <u>containing specific recommendations</u> for the following 18 medicines which it considered should no longer be routinely prescribed in primary care. The total current annual spend in

England for these medicines is estimated to be £129 million.

	Items of relatively low clinical effectiveness or which are unsafe:	Items which are clinically effective but where more cost-effective items are available in most cases (this includes items that have been subject to excessive price inflation):	Items which are clinically effective but, due to the nature of the item, are deemed a low priority for NHS funding:
•	Co-proxamol	l● Liothyronine	<ul> <li>Some travel vaccines already not permitted on the NHS (Hepatitis B; Japanese Encephalitis; Meningitis ACWY; Yellow Fever; Tick-borne Encephalitis; Rabies; BCG).</li> </ul>
•	Omega 3 Fatty Acid Compounds	Prolonged Release Doxazosin	
•	Lidocaine Plasters	Perindopril Arginine	
• N	Rubefacients (excluding topical SAIDs)	Immediate Release Fentanyl	
•	Dosulepin	Once Daily Tadalafil	
•	Glucosamine and Chondroiton	Trimipramine	
•	Lutein and antioxidants	Paracetamol and Tramadol Combination product	
•	Oxycodone and Naloxone		
С	ombination Product		
•	Homeopathy items		
•	Herbal medicines		

The Lancashire Medicines Management website has now been updated in line with these recommendations and all drugs have been RAG rated BLACK (NOT recommended for use by the NHS in Lancashire) with the following exceptions:

Drug	Indication	Current RAG rating	Under review in light of NHSE document(RAG rating subject to amendment)
Lidocaine plasters	Post herpetic neuralgia	Green	No
Lidocaine plasters	Use outside of license	Red	Yes
Immediate release fentanyl	Use in palliative care patients	Grey	Yes
Liothyronine	Prescribing by secondary and tertiary care specialists for the treatment of acute thyroid replacement	Red	No
Once daily tadalafil	Erectile dysfunction - when supplied through specialist sexual health services	Red	Yes
Once daily tadalafil	Pulmonary hypertension	Red	No

## Recommendations

Identify all patients prescribed a medicine in the 'items which should not routinely be prescribed in primary care' list. Exclude those prescribed for the exceptions above and then determine whether to:

- Stop prescribing the medicine and provide the patient with advice on self-care or non-drug alternatives.
- Change the medicine to a more cost-effective/safe choice and provide the patient with information on why their medicine has been changed (see PILs link below).
- If it is appropriate in exceptional circumstances to continue treatment, ensure that the patient is assessed and managed through a multidisciplinary team as appropriate.
- For items available to purchase over-the-counter (OTC), recommend self-care and purchase of the medicine OTC with support and advice from the community pharmacist wherever appropriate.

PrescQIPP has produced some excellent patient information leaflets to be used as an information source for patients who are currently prescribed these medicines and require review: <a href="https://www.prescqipp.info/resources/category/414-items-which-should-not-routinely-be-prescribed-in-primary-care-patient-leaflets">https://www.prescqipp.info/resources/category/414-items-which-should-not-routinely-be-prescribed-in-primary-care-patient-leaflets</a>

To contact the Medicines Optimisation Team please phone 01772 214302



