



East Surrey CCG
Guildford & Waverley CCG
North West Surrey CCG
Surrey Downs CCG
Surrey Heath CCG

NHS England Guidance on Over the Counter (OTC) Preparations

Following a national consultation, NHS England (NHSE) has published [guidance on conditions for which over the counter items should not routinely be prescribed in primary care](#) for short-term minor ailments. A total of 33 conditions were reviewed and recommendations made to GPs that prescriptions are not routinely provided for their treatment based upon the fact that they may be self-limiting requiring no treatment, there is insufficient evidence to support the therapy, or that they may be 'appropriate for self-care'. NHSE have predicted that up to £136 million per annum could be saved nationally if these products were no longer prescribed on FP10 for the specified indications.

The Medicines Commissioning Group supports the principles and recommendations within the guidance but acknowledges the potential conflict with the obligations within the GMS contract that states that *"a prescriber shall order any drugs, medicines or appliances which are needed for the treatment of any patient who is receiving treatment under the Contract."*

Prescribers are encouraged, as with other medication, to ensure that they *only prescribe medication when it is necessary and capable of alleviating symptoms or altering the natural course of a disease and to choose medication that has an appropriate evidence base*. A number of the minor conditions and medications within the guidance do not fulfil these criteria and prescribers are advised to consider this as noted within the NHSE guidance (see Appendix 1 for a summary list).

There is a broad range of conditions noted in the NHSE guidance that relates to medications which have an evidence base and are still available on FP10. Prescribers will need to use their clinical discretion and judgement when deciding whether to prescribe these medicines and are directed to the 'general exceptions to the guidance' (see Appendix 2), and their own professional contractual responsibilities.

Helping patients to care for their own minor illnesses, and to explain the availability and proper use of OTC preparations is already an intrinsic part of a prescribers' role in primary care. To support primary care, the CCG members of the PCN plan to continue to promote self-care, working closely with community pharmacist colleagues, to raise awareness and understanding of the national guidance. This will support patient empowerment, confidence in self-care and potentially reduce workload for GPs.

Treatments for which over the counter items should not routinely be prescribed in primary care for short-term minor ailments

- Probiotics
- Vitamins, tonics and minerals (*excluding prescription only products and those required for specific medical use, see PAD for details*
<http://pad.res360.net/PAD/Search>)
- Health supplements and complementary medicines
- Acute Sore Throat treatments
- Infrequent Cold Sores of the lip.
- Conjunctivitis or minor eye infections (*patients > 2 years*)
- Coughs, colds and nasal congestion
- Cradle Cap (Seborrheic dermatitis – infants)
- Hemorrhoids
- Infant Colic
- Mild Cystitis (*in women*)
- Mild Irritant Dermatitis
- Dandruff
- Diarrhoea (Adults)
- Dry Eyes/Sore (tired) Eyes
- Earwax removers
- Excessive sweating (Hyperhidrosis)
- Head Lice (Lotions and shampoos)
- Indigestion and Heartburn
- Infrequent Constipation
- Infrequent Migraine
- Minor insect bites and stings
- Creams or gels for dry skin conditions (*they should still be prescribed if patient has eczema, psoriasis etc.*)
- Minor acne treatment
- Sun screens (*unless treatment according to the position statement on sunscreen*)
- Tubigrip/plasters/bandages for sprains and sports injuries
- Mild to Moderate Hay fever/Seasonal Rhinitis
- Minor burns and scalds
- Minor conditions associated with pain, discomfort and/fever, e.g. aches and sprains, headache, period pain, back pain (*excluding chronic long term use of pain killers*)
- Mouth ulcers
- Nappy Rash
- Oral and Vaginal Thrush
- Prevention of dental caries
- Ringworm/Athletes foot
- Topical fungal nail treatments
- Teething/Mild toothache
- Threadworms, (*mebendazole (Ovex®) licensed for >2yrs and can be sold to the public for >2yrs. Will need to be prescribed for children <2yrs*)
- Travel medicines e.g. for travel sickness and vaccines
- Warts and Verrucae treatments

General Exceptions to the Guidance:

There are certain scenarios where patients should continue to have their treatments prescribed and these are outlined below:

- Patients prescribed an OTC treatment for a long term condition (e.g. regular pain relief for chronic arthritis or treatments for inflammatory bowel disease).
- For the treatment of more complex forms of minor illnesses (e.g. severe migraines that are unresponsive to over the counter medicines).
- For those patients that have symptoms that suggest the condition is not minor (i.e. those with red flag symptoms for example indigestion with very bad pain.)
- Treatment for complex patients (e.g. immunosuppressed patients).
- Patients on prescription only treatments.
- Patients prescribed OTC products to treat an adverse effect or symptom of a more complex illness and/or prescription only medications should continue to have these products prescribed on the NHS.
- Circumstances where the product licence doesn't allow the product to be sold over the counter to certain groups of patients. This may vary by medicine, but could include babies, children and/or women who are pregnant or breast-feeding. Community Pharmacists will be aware of what these are and can advise accordingly.
- Patients with a minor condition suitable for self-care that has not responded sufficiently to treatment with an OTC product.
- Patients where the clinician considers that the presenting symptom is due to a condition that would not be considered a minor condition.
- Circumstances where the prescriber believes that in their clinical judgement, exceptional circumstances exist that warrant deviation from the recommendation to self-care.
- Individual patients where the clinician considers that their ability to self-manage is compromised as a consequence of medical, mental health or significant social vulnerability to the extent that their health and/or wellbeing could be adversely affected, if reliant on self-care. To note that being exempt from paying a prescription charge does not automatically warrant an exception to the guidance. Consideration should also be given to safeguarding issues.