

Barnsley Self-Care Guidance

Guidance on conditions for which over the counter items should not routinely be prescribed in primary care

The full NHS England guidance is available at: <https://www.england.nhs.uk/wp-content/uploads/2018/03/otc-guidance-for-ccqs.pdf>

SYICB Barnsley Place has made the decision to adopt all of the recommendations within the NHSE guidance. This document has been produced to support primary care clinicians with implementation of the recommendations in practice. It can also be used by community pharmacists to help provide information to the patient on self-care for each condition and to help signpost the patient to the right service.

The guidance is intended to encourage people to self-care for minor illnesses as the first stage of treatment. It is envisioned that in most cases (unless specified) these minor conditions will clear up with appropriate self-care. If symptoms are not improving or responding to treatment, then patients should be encouraged to seek further advice.

The guidance is not intended to discourage patients from going to the GP when it is appropriate to do so.

This guidance applies to all patients, including those who would be exempt from paying prescription charges, unless they fall under the exceptions outlined below (general exceptions) or within the table below under each condition/item.

GPs and/or pharmacists should refer patients to NHS UK, the Self Care Forum or NHS 111 for further advice on when they should seek GP Care.

Why has NHSE developed this guidance?

In the year prior to June 2017, the NHS spent approximately £569 million on prescriptions for medicines, which could otherwise be purchased over the counter (OTC) from a pharmacy and/or other outlets such as petrol stations or supermarkets. In the 12 months prior to June 2017, NHS Barnsley spent approximately £1.4 million on prescriptions for medicines, which could otherwise be purchased OTC.

These prescriptions include items for a condition:

- That is considered to be self-limiting and so does not need treatment as it will heal or be cured of its own accord;
- Which lends itself to self-care i.e. the person suffering does not normally need to seek medical advice and can manage the condition by purchasing OTC items directly.

These prescriptions also include other common items:

- That can be purchased over the counter, sometimes at a lower cost than that which would be incurred by the NHS;

- For which there is little evidence of clinical effectiveness.

A wide range of information is available to the public on the subjects of health promotion and the management of minor self- treatable illnesses. Advice from organisations such as the [Self Care Forum](#) and [NHS.uk](#) website is readily available on the internet. Many community pharmacies are also open extended hours including weekends and are ideally placed to offer advice on the management of minor conditions and lifestyle interventions.

General exceptions to the guidance

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

To note that for vitamins, minerals, probiotics and those self-limiting conditions where there is limited evidence of clinical effectiveness for the treatments used (e.g. OTC items for cough, sore throat and infant colic), then the **general exceptions do not apply**. Specific exceptions are included in the table below under each item/condition.

- 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. More information on over the counter restrictions is available in the table below and in the [PrescQIPP bulletin 227: Over the counter items - GP guide to self care](#).
- 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.

Implementing the NHS England guidance in care settings.

The [CQC](#) supports the principle of promoting self-care and the implementation of the NHS England OTC guidance in social care settings, provided appropriate safeguards are in place.

It is important that implementing the OTC guidance does not restrict safe access to necessary medicines for vulnerable people, such as the elderly and people with learning difficulties, living in care homes, assisted living environments, or receiving social care services. Before stopping prescribing for the conditions included in the guidance and recommending that a care home resident purchases their own medicine the clinician should consider the following on an individual patient basis:

1. NHSE General Exceptions (see [page 2](#))

2. The Care Providers' Medication Policies

The CQC recommends that care providers should have a policy in place to allow access to OTC medicines in appropriate situations. This is different to the use of homely remedies.

Clinicians should liaise closely with carers before recommending the use of OTC medication in any care setting to ensure that:

- The patient is able to obtain the medicine in a safe and timely manner
- The patient is able to self-administer safely, or,
- If carers will be required to administer the medicine, that this is permitted within the care providers own medication policy.

After agreement with the care provider a clinician may recommend a resident, relative or care staff purchases an OTC medicine. The clinician should give verbal or written instructions on the use of the medicine to the patient and carers. This must be recorded in the individual care plan.

3. Use of Homely Remedies

In some cases a care home resident may be able to make use of the care home's own homely medicines. Homely medicines are a range of medicines that a care home may choose to purchase and keep in stock for use by their residents to treat minor conditions. They are the equivalent of the OTC medicines that would commonly be kept in any household, for example paracetamol for a headache or an antacid for indigestion. Use of homely medicines has to be pre-approved by a suitable health care professional e.g. doctor or pharmacist, in advance of use or at the time of need; and a record kept in the residents care plan. Their approval should be reviewed regularly. Homely medicines can only be taken for a short period of time without consulting a doctor, usually a maximum of 48 hours. Although the CQC supports the use of homely medicines, their availability is dependent on the individual care provider's medication policy.

Further information on implementing the NHS England guidance in care settings can be found at: <https://www.england.nhs.uk/medicines-2/conditions-for-which-over-the-counter-items-should-not-routinely-be-prescribed/conditions-for-which-over-the-counter-items-should-not-routinely-be-prescribed-in-primary-care-implementation-resources/faqs/>

Suggested actions for prescribers

New patients

- If a patient presents with a condition that can be managed with an over the counter preparation and / or self-care, sign post the patient to a pharmacy who will be able to offer advice and recommend a suitable preparation (see the [useful resources](#) section for 'no prescription required' leaflets and the patient information resources included in the following tables).
- Promote the self-care websites ([NHS.uk](#), [Self-Care Forum](#)) and the clinical expertise of community pharmacies in supporting management of minor ailments and self-limiting conditions.

Use the NHS SYICB Barnsley Place 'Prescribing of over the counter medicines is changing' leaflets and posters to explain the changes to prescribing of over the counter medicines and why it is now recommended that over the counter medicines are purchased. These can be obtained from the Medicines Management Team.

Existing patients

Review all patients prescribed a medicine for a condition in the tables below. Determine whether to:

- Stop prescribing the medicine and provide the patient with advice on self-care or non-drug alternatives. For items available to purchase over the counter, recommend self-care and purchase of the medicine with support and advice from the community pharmacist wherever appropriate (note some preparations will only be available through community pharmacies – 'P' medicines).
- If it is appropriate in 'exceptional circumstances' to continue treatment, ensure that the patient is assessed and reviewed as appropriate. Document the exception/reason for prescribing in the patients notes.

Consider using patient and professional resources to explain the changes to prescribing of over the counter medicines and why it is now recommended that over the counter medicines are purchased. NHS SYICB Barnsley Place 'Prescribing of over the counter medicines is changing' leaflets and posters can be obtained from the Medicines Management Team. Also see the [useful resources](#) section for 'no prescription required' leaflets and the patient information resources included in the following tables.

The tables on the following pages list the conditions/items where prescribing should be restricted, exceptions when prescribing may be appropriate, examples of products available to purchase, over the counter restrictions and links to self-care leaflets and advice.

Links to information and resources for each condition have also been included within the tables to help support clinicians with the decision of whether prescribing may be appropriate for each condition/item in the guidance (e.g. information on 'red flag symptoms'). However this information is not exhaustive and the decision of whether to prescribe remains the clinical decision of the clinician.

Condition/item for which prescribing should be restricted	
Items of limited clinical effectiveness	Minor conditions suitable for self-care continued
Probiotics page 6	Mild to moderate hay fever/seasonal rhinitis page 17
Vitamins and minerals page 6	Minor burns and scalds page 19
Self-limiting conditions	Minor conditions associated with pain, discomfort and/fever. (e.g. aches and sprains, headache, period pain, back pain) page 19
Acute sore throat page 7	Mouth ulcers page 20
Cold sores page 8	Nappy rash page 20
Conjunctivitis page 9	Oral thrush page 20
Coughs and colds and nasal congestion page 10	Prevention of dental caries page 21
Cradle cap page 10	Ringworm/ athlete's foot page 21
Haemorrhoids page 11	Teething/mild toothache page 21
Infant colic page 11	Threadworms page 22
Mild cystitis page 11	Travel Sickness page 22
Minor conditions suitable for self-care	Warts and Verrucae page 22
Mild Irritant Dermatitis page 12	
Dandruff page 12	
Diarrhoea (adults) page 12	
Dry eyes/sore tired eyes page 12	
Earwax page 13	
Excessive sweating (hyperhidrosis) page 13	
Head lice page 13	
Indigestion and heartburn page 14	
Infrequent constipation page 15	
Infrequent migraine page 15	
Insect bites and stings page 16	
Mild acne page 16	
Mild dry skin page 16	
Sunburn page 17	
Sun protection page 17	

Condition/item for which prescribing should be restricted	Exceptions to the guidance when prescribing may be appropriate (Note: This is not an exhaustive list, where specific examples are not listed, please refer to the NICE CKS or other appropriate resources for 'Red Flag' symptoms and/or the general exceptions in the self-care guidance as advised below)	Examples of products available to purchase (note: some of the products may be pharmacy only). This is not an exhaustive list.	Over the counter restrictions*	Information and resources for the patient (key self-care messages, signposting)	Information and resources for the clinician
Items of limited clinical effectiveness					
Probiotics	<p>No exceptions. There is currently insufficient clinical evidence to support prescribing of probiotics within the NHS for the treatment of prevention of diarrhoeas of any cause.</p> <p>All probiotics are classed as food supplements</p>	Probiotic sachets	N/A – all probiotics are classed as food supplements		<p>Public Health England C. Difficile guidance</p> <p>NICE CG 84: Diarrhoea and vomiting caused by gastroenteritis in under 5s: diagnosis and management</p>
Vitamins and minerals	<p>Medically diagnosed deficiency (confirmed by testing) and receiving loading dose therapy, including for those patients who may have a lifelong or chronic condition or have undergone surgery that results in malabsorption. Continuing need should however be reviewed on a regular basis.</p> <p><i>NB maintenance or preventative treatment is not an exception.</i></p> <p>Calcium and vitamin D for osteoporosis. Further information on the prescribing of calcium and vitamin D is available in the Management of Osteoporosis and Fragility Fracture Risk Barnsley Guideline</p>	<p>Vitamin D (NB. Not the high strength preparations used to treat deficiency), <i>The clinician should advise the patient which strength of vitamin D to purchase.</i></p> <p><i>Barnsley vitamin D guidelines are available on the BEST website:</i></p> <p>Management of Low Vitamin D Level: A Barnsley Guideline (Adults)</p> <p>Guidelines for the management of children with suspected vitamin D deficiency in primary care setting</p>	Many are food supplements so limited information available	<p>Do I need vitamin supplements? - NHS Healthy Start UK</p> <p>Getting vitamins – Get help to buy food and milk (Healthy Start)</p> <p>Overview vitamins and minerals - NHS</p>	<p>PrescQIPP bulletin 107, August 2015; the prescribing of vitamins and minerals including vitamin B preparations (DROP-list)</p> <p>PHE publishes new advice on vitamin D - GOV.UK</p> <p>Healthcare professionals – Get help to buy food and milk (Healthy Start)</p>

	<p>Malnutrition including alcoholism (see NICE Guidance)</p> <p>Vitamin supplements for premature and low birth weight babies (up to one year of age) as advised by the hospital.</p> <p><i>Patients suitable to receive Healthy start vitamins for pregnancy or children between the ages 6 months to their fourth birthday. (NB this is not on prescription but commissioned separately. See Barnsley Healthy Start Vitamin D Guidance - Children)</i></p> <p>This guidance does not apply to prescription only vitamin D analogues such as alfacalcidol and these should continue to be prescribed.</p> <p>In line with the Barnsley Vitamin D guidelines if in exceptional circumstances with clinical assessment a prescriber has concerns that a patient might be unable/unwilling to self-care then a prescription (FP10) may be considered.</p>	<p>Calcium and Vitamin D, and Vitamin D Summary of Formulary Choices in Adults over 18 years</p> <p>Vitamin B compound tablets</p> <p>Vitamin C effervescent 1g tablets</p> <p>Multivitamin preparations</p>			
Self-limiting conditions					
Acute sore throat	<p>'Red flag' symptoms</p> <p>Either referral or a prescription may be appropriate depending on the red flag symptom. The following are red flag symptoms for acute sore throat (please note this list is not exhaustive):</p> <p>Red flags which indicate the need</p>	<p>Benzydamine for example as Difflam® Spray and Difflam® Oral Rinse</p> <p>Lozenges for example Strepsils®, Throaties® and Tyrozets®</p> <p>Throat sprays for example Ultra Chloraseptic®</p>	<p>All preparations – pregnancy, breastfeeding</p> <p>Benzydamine - children under 12 years - oral rinse shouldn't be used.</p> <p>Lozenges- diabetes, children under 6 years (Strepsils®), children under 3 years (Throaties®, Tyrozets®), fructose</p>	<p>Sore throat - NHS</p> <p>Sore Throat Patient.info</p>	<p>Sore throat - acute - NICE CKS</p>

	<p>for urgent referral include:</p> <ul style="list-style-type: none"> • Stridor (making high-pitched sounds when breathing) • breathing difficulty, muffled voice or excessive drooling (difficulty swallowing) • clinical dehydration (where fluid intake is compromised, and patient becomes dehydrated) • a condition that is immediately life-threatening such as acute epiglottitis or Kawasaki disease. • suspected serious but not immediately life-threatening cause for sore throat (such as cancer or HIV). <p>Other red flag symptoms:</p> <ul style="list-style-type: none"> • Sore throat that does not improve after a week or does not respond to OTC pain relief. • Recurrent sore throat (may require specialist assessment). • Sore throat preventing normal functioning or causing excessive anxiety. • Sore throat in patients with weakened immune systems (e.g. because of diabetes or chemotherapy) or accompanied by a very high temperature or fever <p>Further information on diagnosis and management of acute sore throat can be found in the NICE CKS.</p>		<p>intolerance, glucose-galactose malabsorption or sucrose-isomaltose insufficiency.</p> <p>Throat Sprays - children under 6 years, epiglottitis or methaemoglobinaemia.</p>		
<p>Infrequent cold sores of the lip</p>	<p>Immunocompromised patients. 'Red flag' symptoms</p>	<p>Antiviral cold sore cream (aciclovir 5% cream)</p>	<p>Immunocompromised patients Terminally ill patients Only for treatment on face and lips</p>	<p>Cold sores - NHS</p> <p>Cold Sores Patient.info</p>	<p>Herpes simplex - oral - NICE CKS</p>

<p>Conjunctivitis</p>	<p>'Red flag' symptoms</p> <p>The following red flag symptoms are listed in the NICE CKS for infective conjunctivitis (please note this list is not exhaustive):</p> <p>Red flags which indicate the need for urgent ophthalmological assessment such as:</p> <ul style="list-style-type: none"> • Reduced visual acuity. • Marked eye pain, headache or photophobia — always consider serious systemic conditions such as meningitis in a person presenting with photophobia. • Red sticky eye in a neonate (within 30 days of birth). • History of trauma (mechanical, chemical or ultraviolet) or possible foreign body. • Copious rapidly progressive discharge — may indicate gonococcal infection. • Infection with a herpes virus. • Soft contact lens use with corneal symptoms (such as photophobia and watering). <p>Further information on diagnosis (including differential diagnosis) and management of infective conjunctivitis can be found in the NICE CKS.</p> <p>It is difficult to differentiate viral and bacterial conjunctivitis clinically.</p>	<p>Antimicrobial eye drops and eye ointment (chloramphenicol drops and ointment).</p>	<p>Children under 2 years Pregnancy Breastfeeding</p>	<p>Conjunctivitis - NHS</p> <p>Infective Conjunctivitis Patient.info</p>	<p>Conjunctivitis - infective - NICE CKS</p> <p>PHE Advice for schools: September 2017</p> <p>Chloramphenicol eye drops containing borax or boric acid buffers: use in children younger than 2 years - GOV.UK (www.gov.uk)</p>
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<p>Coughs and colds and nasal congestion</p>	<p>'Red flag' symptoms</p>	<p>Cough mixtures or linctus</p> <p>Saline nose drops</p> <p>Menthol vapour rubs</p> <p>Cold and flu capsules or sachets</p> <p>Analgesics</p> <p>Pseudoephedrine</p>	<p>Ibuprofen - long term conditions requiring regular pain relief; asthma; unstable high blood pressure; taking anticoagulants; stomach ulcer, perforation or bleeding (active or history of); renal, hepatic or cardiac impairment; pregnancy; breastfeeding; children under 3 months and not for use in chicken pox</p> <p>Paracetamol - long term conditions requiring regular pain relief, severe renal or severe hepatic impairment. Children under 2 months, babies born before 37 weeks and babies weighing less than 4 kg</p> <p>Pseudoephedrine - children under 12 years, pregnancy, breastfeeding, severe hypertension, severe coronary artery disease, taking MAOIs, severe renal impairment, diabetes, hyperthyroidism, closed angle glaucoma, phaeochromocytoma</p>	<p>Common cold - NHS</p> <p>PrescQIPP: Coughs and colds (Self care postcard - PrescQIPP login required)</p> <p>Common Cold Patient.info</p> <p>Coughs and Colds in Children Patient.info</p>	<p>Common cold - NICE CKS</p>
<p>Cradle cap (seborrhoeic dermatitis – infants)</p>	<p>If causing distress to the infant and not improving</p>	<p>Emulsifying ointment and Shampoos, including Capsal® Shampoo and Dentinox® Shampoo Cradle Cap</p>	<p>If it has spread to the face. Broken skin or infected skin</p>	<p>Cradle cap - NHS</p> <p>Cradle Cap Patient.info</p> <p>British Association of</p>	<p>Seborrhoeic dermatitis - NICE CKS</p>

				Dermatologists (bad.org.uk) Seborrhoeic dermatitis & cradle cap in infants National Eczema Society	
Haemorrhoids	'Red flag' symptoms	Haemorrhoid creams, ointments and suppositories.	Children under 18 years Pregnancy Breastfeeding Rectal bleeding or blood in the stool	Haemorrhoids (piles) - NHS Haemorrhoids Patient.info	Haemorrhoids - NICE CKS
Infant colic	'Red flag' symptoms	Simethicone and dimeticone suspensions Lactase drops	Dimeticone colic drops should be avoided in fructose, glucose-galactose or sucrose intolerant patients as it contains sucrose.	Colic - NHS PrescQIPP: Infant Colic (Self care postcard - PrescQIPP login required) Colic in Babies and Infants Patient.info	Colic - infantile - NICE CKS
Mild cystitis	'Red flag' symptoms	Sodium citrate or potassium citrate granules	Sodium citrate 4g sachets products – men, children under 16 years, diabetes, heart disease, hypertension, renal disease, pregnancy and breastfeeding Potassium citrate products - children under 6 years, renal disease/impairment, pregnancy and breastfeeding	Cystitis - NHS Cystitis in Women Patient.info	Urinary tract infection (lower) - women - NICE CKS

Minor conditions suitable for self-care					
Mild Irritant Dermatitis	No routine exceptions have been identified. See page 2 for general exceptions.	Emollients, Steroid creams, Crotamiton (e.g. Eurax®).	Children under 12 years with certain brands (however Eurax® is licensed for children over 3 years and Hc45® Hydrocortisone Cream is licensed for children over 10 years) Pregnancy Breastfeeding Broken or inflamed skin Use on the eyes, face or ano-genital region	Contact dermatitis - NHS Contact Dermatitis Patient.info	Dermatitis - contact - NICE CKS Barnsley Public Health Nursing 0-19 Prescribing Formulary
Dandruff	No routine exceptions have been identified. See page 2 for general exceptions.	Antidandruff shampoos (e.g. coal tar or selenium) Antifungal shampoos (e.g. ketoconazole)	All products Pregnancy, breastfeeding Coal tar products Children under 12 years, infected open skin lesions and sore or acute pustular psoriasis Selenium sulphide children under 5 years Ketoconazole Children under 12 years	Dandruff - NHS Dandruff Patient.info	Seborrhoeic dermatitis - NICE CKS
Diarrhoea (adults)	No routine exceptions have been identified. See page 2 for general exceptions. THIS RECOMMENDATION DOES NOT APPLY TO CHILDREN	Loperamide 2mg capsules Rehydration sachets	Loperamide - inflammatory bowel disease, post bowel surgery, post pelvic radiation and colorectal cancer Oral rehydration sachets - liver or renal disease, patients on low potassium/sodium diets and patients with diabetes (Note Dioralyte® Relief can be given to diabetics)	Diarrhoea and vomiting - NHS Diarrhoea Patient.info	Diarrhoea - adult's assessment - NICE CKS
Dry eyes/sore tired eyes	No routine exceptions have been identified. See page 2 for general exceptions, e.g. pre-existing long term conditions	Eye drops for dry/sore, tired eyes e.g. hypromellose 0.3% eye drops and carbomers	Children under 18 years (carbomer) Pregnancy Breastfeeding (check individual brands)	Dry eyes - NHS Dry Eyes Patient.info	Dry eye syndrome - NICE CKS

	affecting the eyes, more severe dry eye symptoms. (Self-care should only be recommended in people with mild to moderate symptoms, without inflammation, unrelated to a long-term condition or essential medication, and not currently using drops for another eye health problem).				Barnsley guidelines for the treatment of dry eye
Earwax	No routine exceptions have been identified. See page 2 for general exceptions (e.g. perforated ear drum)	Drops containing sodium bicarbonate, hydrogen peroxide, olive oil or almond oil.	None identified	Earwax build-up - NHS Earwax Patient.info	Earwax - NICE CKS Barnsley Public Health Nursing 0-19 Prescribing Formulary
Excessive sweating (hyperhidrosis)	No routine exceptions have been identified. See page 2 for general exceptions.	Aluminium chloride sprays, roll-ons, solutions.	Broken or infected skin External use only	Excessive sweating (hyperhidrosis) - NHS Excessive Sweating Patient.info	Hyperhidrosis - NICE CKS
Head lice	No routine exceptions have been identified. See page 2 for general exceptions (e.g. current skin conditions of the scalp or side effects of a severe infestation)	Creams or lotions for head lice (e.g. malathion or dimeticone) Bug busting (conditioner and head lice combs)	Creams and lotions - children under 6 months, pregnancy and breastfeeding (some products), avoid use on broken or inflamed skin Conditioner and head lice combs – no restrictions	Head lice and nits - NHS PrescQIPP: Head lice (Self care postcard - PrescQIPP login required) Head Lice and Nits Patient.info Treatment and Prevention of	Head lice - NICE CKS Barnsley Public Health Nursing 0-19 Prescribing Formulary

				head lice Patient.info Pharmacyfirst Minor Ailments Scheme Bug Buster Kits and Nitty Gritty Combs can be supplied by participating community pharmacies where appropriate FREE of charge to patients with headlice who don't normally pay NHS prescription charges.	
Indigestion and heartburn	No routine exceptions have been identified. See page 2 for general exceptions.	Antacid tablets or liquids Ranitidine 75mg Tablets OTC proton pump inhibitors e.g. esomeprazole 20mg tablets. Sodium alginate, calcium carbonate or sodium bicarbonate liquids/tablets.	Ranitidine Children under 16 years, pregnancy, breastfeeding, peptic ulceration, people taking NSAIDs (these patients should not self-medicate with ranitidine 75 mg tablets but seek their doctor's advice before use) Proton pump inhibitors Children under 18 years or adults over 55 years with new or recently changed symptoms, pregnancy, breastfeeding, jaundice or liver disease	Indigestion - NHS PrescQIPP: Indigestion and Heartburn (Self care postcard - PrescQIPP login required) Indigestion (Dyspepsia) Patient.info Heartburn Patient.info	Dyspepsia - proven functional - NICE CKS

			<p>Gaviscon® Children under 12 years, renal failure, hypercalcaemia, nephrocalcinosis, kidney stones</p> <p>Gaviscon® Infant Infants under 12 months, children over 2 years, babies born before 37 weeks, renal impairment</p>		
Infrequent constipation	<p>No routine exceptions have been identified. See page 2 for general exceptions.</p> <p>Laxatives are not recommended for children unless they are prescribed by a GP (however self-care advice can be given on diet, fluid intake and exercise)</p>	<p>Bisacodyl tablets Senna</p> <p>Ispaghula Husk granules</p> <p>Lactulose solution</p>	<p>Bisacodyl Acute inflammatory bowel diseases, severe dehydration, pregnancy and breastfeeding, and children under 10 years.</p> <p>Senna Severe dehydration, children under 18 years, pregnancy and breastfeeding.</p> <p>Ispaghula husk granules Children under 6 years and diabetes.</p> <p>Lactulose Galactosaemia, gastro-intestinal obstruction, digestive perforation or risk of digestive perforation</p>	<p>Constipation - NHS</p> <p>Constipation Patient.info</p> <p>Constipation in Children Patient.info</p>	<p>Constipation - NICE CKS</p> <p>Barnsley Public Health Nursing 0-19 Prescribing Formulary</p>
Infrequent migraine	<p>No routine exceptions have been identified. See page 2 for general exceptions (e.g. those with severe or recurrent migraines should continue to seek advice from their GP)</p>	<p>Migraine tablets (e.g. Migralve®)</p> <p>Painkillers</p> <p>Anti-sickness tablets (prochlorperazine maleate – Buccastem M®)</p>	<p>For this indication:</p> <p>Ibuprofen Long term conditions requiring regular pain relief; asthma; unstable high blood pressure; taking anticoagulants; stomach ulcer, perforation or bleeding (active or history of); renal, hepatic or cardiac impairment; children under 12 years; pregnancy ; breastfeeding</p>	<p>Migraine - NHS</p> <p>PrescQIPP: Infrequent Migraines (Self care postcard - PrescQIPP login required)</p> <p>Migraine Patient.info</p>	<p>Migraine - NICE CKS</p>

			<p>Paracetamol Long term conditions requiring regular pain relief, children under 12 years, severe renal or severe hepatic impairment</p> <p>Co-codamol (e.g. Migralve® Yellow tablets) Children under 12 years, severe liver disease, breastfeeding and pregnancy</p> <p>Prochlorperazine maleate Children under 18 years, impaired liver function, existing blood dyscrasias, epilepsy, Parkinson's Disease, prostatic hypertrophy, narrow angle glaucoma, pregnancy and breastfeeding</p>	<p>Migraine Treatment and Medication Patient.info</p>	
Insect bites and stings	No routine exceptions have been identified. See page 2 for general exceptions.	Steroid creams or creams for itching (e.g. mepyramine maleate 2% - Anthisan®)	<p>Mepyramine maleate 2% Broken or infected skin and children under 2 years</p> <p>Steroid preparations See above under Mild Irritant Dermatitis</p>	<p>Insect bites and stings - NHS</p> <p>PrescQIPP: Insect bites and stings (Self care postcard - PrescQIPP login required)</p>	Insect bites and stings - NICE CKS
Mild acne	No routine exceptions have been identified. See page 2 for general exceptions.	Benzoyl peroxide products	Pregnancy, breastfeeding Damaged skin Elderly Children under 12 years	<p>Acne - NHS</p> <p>Acne Patient.info</p> <p>Acne Treatments Patient.info</p>	Acne vulgaris - NICE CKS
Mild dry skin	See page 2 for general exceptions.	Emollient creams, ointments and lotions	Broken or infected skin Some preparations have age restrictions	Emollients - NHS	Eczema - atopic - NICE CKS

					Bath additives and shower emollients position statement.pdf (barnsleyccg.nhs.uk) Barnsley Public Health Nursing 0-19 Prescribing Formulary
Sunburn due to excessive sun exposure	See page 2 for general exceptions (e.g. severe sunburn in babies and young children)	After sun products	No restrictions	Sunburn - NHS PrescQIPP: Sunburn (Self care postcard - PrescQIPP login required) Sunburn Patient.info	
Sun protection	ACBS approved indication of photodermatoses (i.e. where skin protection should be prescribed). See page 2 for general exceptions.	Sun protection cream, sprays, gels	No restrictions		
Mild to moderate hay fever/seasonal rhinitis	No routine exceptions have been identified. See page 2 for general exceptions. Taking into account the general exceptions, the following patients should continue to have their hayfever medicines prescribed (this list is not exhaustive): <ul style="list-style-type: none"> Patients prescribed hayfever treatments for severe hayfever 	Antihistamine tablets or liquids. Steroid nasal sprays Sodium cromoglicate eye drops	Chlorphenamine Tablets - children under 6 years 2mg/5ml solution - children under 1 year Taken monoamine oxidase inhibitors within the last 14 days; epilepsy; raised intra-ocular pressure including glaucoma; prostatic hypertrophy; severe hypertension or cardiovascular disease; bronchitis,	Hay fever - NHS PrescQIPP: Hay fever (Self care postcard - PrescQIPP login required) Hay Fever and Seasonal	Allergic rhinitis - NICE CKS Management of Allergic Rhinitis in Primary Care

	<p>symptoms that are unresponsive to over the counter medicines.</p> <ul style="list-style-type: none"> • Patients with 'red flag' symptoms that suggest the condition is not minor e.g. unilateral symptoms (e.g. nasal blockage on one side only), polyps, persistent blood stained or purulent discharge, nasal pain or nosebleeds. • Complex patients (e.g. immunosuppressed patients). • Patients prescribed prescription only hayfever treatments (e.g. ipratropium bromide nasal spray (Rinatec®), Dymista® nasal spray (fluticasone and azelastine), fluticasone furoate nasal spray (Avamys®), azelastine nasal spray (Rhinolast®), budesonide nasal spray (Rhinocort® Aqua) montelukast (used in patients with ongoing symptoms and a history of asthma)). Patients with mild to moderate hayfever should try treatment with several over the counter hayfever products (including antihistamines and nasal steroids) before a prescription only hayfever treatment is prescribed. <p>Note that montelukast is only used to provide symptomatic relief of hayfever where the patient is asthmatic and montelukast is indicated for the treatment of the patient's asthma.</p>		<p>bronchiectasis or asthma; hepatic impairment; renal impairment; rare hereditary problems of galactose intolerance, Lapp lactase deficiency or glucose-galactose malabsorption; pregnancy and breastfeeding.</p> <p>Loratadine Tablets - children under 6 years 1mg/ml syrup - children under 2 years Rare hereditary problems of galactose intolerance, the Lapp lactase deficiency or glucose-galactose malabsorption; liver impairment; pregnancy and breastfeeding.</p> <p>Acrivastine Children under 12 years and adults over 65 years; renal impairment; rare hereditary problems of galactose intolerance, the Lapp lactase deficiency or glucose-galactose malabsorption; pregnancy and breastfeeding.</p> <p>Cetirizine Tablets - children under 6 years 1mg/ml solution - children under 2 years (depending on the brand) Epilepsy; renal impairment; rare hereditary problems of fructose intolerance; pregnancy and breastfeeding.</p> <p>Fexofenadine 120mg Children under 12 years; elderly; renal impairment; hepatic impairment; patients with a</p>	<p>Allergies Patient.info</p>	
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			<p>history of or ongoing cardiovascular disease; pregnancy and breastfeeding.</p> <p>Beclomethasone 0.05% nasal spray-Children under 18 years, pregnancy and breastfeeding.</p> <p>Sodium Cromoglicate 2% eye drops Children under 6 years, pregnancy and breastfeeding.</p>		
Minor burns and scalds	<p>See page 2 for general exceptions. No routine exceptions have been identified.</p> <p>However more serious burns always require professional medical attention. Burns requiring hospital A&E treatment include but are not limited to:</p> <ul style="list-style-type: none"> -all chemical and electrical burns; -large or deep burns; -burns that cause white or charred skin; -burns on the face, hands, arms, feet, legs or genitals that cause blisters. 	<p>Antiseptic burns cream or powder</p> <p>Cooling burn gel.</p>	<p>Betadine® Dry Powder Spray Pregnancy, breastfeeding, children under 2 years and taking lithium therapy</p>	<p>Burns and scalds - NHS</p> <p>Burns and Scalds Patient.info</p>	<p>Burns and scalds - NICE CKS</p>
Minor conditions associated with pain, discomfort and/fever. (e.g. aches and sprains, headache, period pain, back pain)	<p>No routine exceptions have been identified. See page 2 for general exceptions.</p>	<p>Paracetamol 500mg tablets</p> <p>Ibuprofen 200mg and 400mg tablets</p> <p>Co-codamol 8/500mg tablets</p> <p>NSAID topical creams or gels (e.g. Ibuprofen 5%gel)</p> <p>Paracetamol and Ibuprofen Suspension</p>	<p>Paracetamol Long term conditions requiring regular pain relief; severe renal or severe hepatic impairment; children under 2 months; babies born before 37 weeks; and babies weighing less than 4 kg.</p> <p>Ibuprofen Long term conditions requiring regular pain relief; asthma; unstable high blood pressure; severe renal, hepatic or cardiac impairment; taking anticoagulants; stomach</p>	<p>10 ways to reduce pain - NHS</p> <p>Back pain - NHS</p> <p>Fever in children - NHS</p> <p>Headaches - NHS</p> <p>Headaches Patient.info</p>	<p>Analgesia - mild-to-moderate pain - NICE CKS</p> <p>Barnsley Public Health Nursing 0-19 Prescribing Formulary</p>

			<p>ulcers/problems; children under 3 months; pregnancy; breastfeeding; and not for use in chicken pox</p> <p>Co-codamol Children under 12 years; severe liver disease; breastfeeding and pregnancy</p> <p>Ibuprofen 5% gel Children under 14 years; pregnancy and breastfeeding; broken/ infected skin</p>	<p>Period pain - NHS</p> <p>Period Pain (Dysmenorrhoea) Patient.info</p> <p>PrescQIPP: Pain (Self care postcard - PrescQIPP login required)</p>	
Mouth ulcers	No routine exceptions have been identified. See page 2 for general exceptions.	<p>Lidocaine hydrochloride/ Chlorocresol/ Cetylpyridinium chloride e.g. Anbesol®</p> <p>Choline salicylate/Cetalkonium chloride e.g. Bonjela®</p> <p>Benzocaine e.g. Orajel®</p>	<p>Various age restrictions Active peptic ulceration (some preparations) Pregnancy Breastfeeding</p>	<p>Mouth ulcers - NHS</p> <p>Mouth Ulcers Patient.info</p>	Aphthous ulcer - NICE CKS
Nappy rash	No routine exceptions have been identified. See page 2 for general exceptions.	Nappy rash creams (e.g. Metanium®, Sudocrem®)	No restrictions	<p>Nappy rash - NHS</p> <p>Nappy Rash Patient.info</p>	<p>Nappy rash - NICE CKS</p> <p>Barnsley Public Health Nursing 0-19 Prescribing Formulary</p>
Oral thrush	No routine exceptions have been identified. See page 2 for general exceptions.	Miconazole 2% oral gel (Daktarin® oral gel)	<p>Children under 4 months Pregnancy, breastfeeding Patients taking warfarin Liver dysfunction</p>	<p>Oral thrush (mouth thrush) - NHS</p> <p>Oral thrush in babies - NHS</p>	<p>Candida - oral - NICE CKS</p> <p>Barnsley Public Health Nursing 0-19 Prescribing Formulary</p>

<p>Prevention of dental caries</p>	<p>No routine exceptions have been identified. See page 2 for general exceptions.</p> <p>Note that some fluoride toothpastes (2800ppm and 5000ppm) are POM</p> <p>Prescription only medicines should be re-directed to the dentist to prescribe</p>	<p>Fluoride toothpastes</p> <p>Mouthwashes such as chlorhexidine gluconate</p>	<p>Children under 12 years</p>	<p>Tooth decay - NHS</p> <p>Tooth Decay Patient.info</p>	
<p>Ringworm/ Athlete's foot</p>	<p>Lymphoedema or history of lower limb cellulitis. See page 2 for general exceptions.</p>	<p>Antifungal creams or sprays (e.g. miconazole or terbinafine)</p>	<p>All products Diabetes, pregnancy, breastfeeding.</p> <p>Terbinafine hydrochloride Children under 16 years Some preparations may only be licensed for athlete's foot.</p>	<p>Athlete's foot - NHS</p> <p>Ringworm - NHS</p>	<p>Fungal skin infection - foot - NICE CKS</p> <p>Barnsley Public Health Nursing 0-19 Prescribing Formulary</p>
<p>Teething/mild toothache</p>	<p>No routine exceptions have been identified. See page 2 for general exceptions.</p>	<p>Teething gel (Calgel® and Dentinox®)</p> <p>Painkillers</p>	<p>Calgel® and Dentinox® teething gel Babies under 5 months, heart disease and liver disease</p> <p>Ibuprofen Long term conditions requiring regular pain relief; asthma; unstable high blood pressure; taking anticoagulants; stomach ulcer, perforation or bleeding (active or history of); renal, hepatic or cardiac impairment; pregnancy; breastfeeding; children under 3 months; and not for use in chicken pox.</p> <p>Paracetamol Long term conditions requiring regular pain relief; severe renal or severe hepatic impairment; children under 2 months; babies born before 37 weeks; and babies weighing less than 4 kg.</p>	<p>Toothache - NHS</p> <p>Teething Patient.info</p> <p>PrescQIPP: Teething (Self care postcard - PrescQIPP login required)</p> <p>PrescQIPP: Toothache (Self care postcard - PrescQIPP login required)</p>	<p>Teething - NICE CKS</p>

Threadworms	No routine exceptions have been identified. See page 2 for general exceptions.	Mebendazole 100mg tablets	Children under 2 years Pregnancy Breastfeeding	Threadworms - NHS	Threadworm - NICE CKS Barnsley Public Health Nursing 0-19 Prescribing Formulary
Travel Sickness	No routine exceptions have been identified. See page 2 for general exceptions	Travel sickness tablets	Cinnarizine- Parkinson's Disease; fructose or galactose intolerance, Lapp lactase deficiency, glucose-galactose malabsorption or sucrase-isomaltase insufficiency; porphyria; children under 5 years; pregnancy and breastfeeding. Hyoscine- Children under 3 years (Joyrides®); under 4 years (Kwells®); epilepsy; glaucoma; pregnancy and breastfeeding; paralytic ileus; pyloric stenosis; prostatic enlargement; myasthenia gravis.	Motion sickness - NHS Patient info: Motion Sickness	
Warts and Verrucae	No routine exceptions have been identified. See page 2 for general exceptions	Gels, skin paints, ointments and medicated plasters containing salicylic acid and lactic acid Wart freeze treatments (e.g. Dimethyl ether propane cold spray)	Diabetic patients Face, neck, ano-genital area Moles, birthmarks, hairy warts or skin lesions Broken skin Impaired peripheral blood circulation Age restrictions apply to some preparations (e.g. wart freeze treatments should not to be used in children under 4 years)	Warts and verrucas - NHS Warts and Verrucas Patient.info	Warts and verrucae - NICE CKS

***This list may not be exhaustive. If needed see summary of product characteristics and patient information leaflets within the [EMC](#)**

Useful resources

NHS SYICB Barnsley Place 'Prescribing of over the counter medicines is changing' posters and leaflets to support implementation can be obtained from the Medicines Management Team. The following may also be of use:

NHS England Implementation Resources:

<https://www.england.nhs.uk/medicines/conditions-for-which-over-the-counter-items-should-not-routinely-be-prescribed/conditions-for-which-over-the-counter-items-should-not-routinely-be-prescribed-in-primary-care-implementation-resources/>

Resources for ICBs and healthcare professionals on the implementation of not routinely prescribing over the counter (OTC) medicines for certain conditions.

Quick reference guide for healthcare professionals: <https://www.england.nhs.uk/publication/quick-reference-guide-for-healthcare-professionals-conditions-for-which-over-the-counter-items-should-not-routinely-be-prescribed-in-primary-care/>

Patient information leaflet: <https://www.england.nhs.uk/wp-content/uploads/2018/08/1a-over-the-counter-leaflet-v1.pdf>

Patient information leaflet for print: <https://www.england.nhs.uk/wp-content/uploads/2018/08/1a-over-the-counter-leaflet-print-ready.pdf>

Easy to read patient information leaflet: <https://www.england.nhs.uk/wp-content/uploads/2018/08/1b-easy-read-over-the-counter-leaflet.pdf>

Patient Information Sheet (space to add notes/specific advice as needed): <https://www.england.nhs.uk/wp-content/uploads/2018/08/1c-over-the-counter-patient-info-sheet.pdf>

PrescQIPP Self-Care Resources (PrescQIPP login required):

<https://www.prescqipp.info/our-resources/webkits/self-care/>

These resources focus on reducing the prescribing of over the counter preparations in general practice, signposting to the correct health service and supporting the implementation of the NHS England OTC guidance. Each set of resources contains tools that can be adapted for local use before implementation.

Coughs and colds poster: <https://www.prescqipp.info/media/3862/cough-colds-and-sore-throats-poster.jpg>

Medicines cabinet poster: <https://www.prescqipp.info/media/3756/medicine-cabinet-poster-v1-l.jpg>

Choose self-care poster: <https://www.prescqipp.info/media/3754/feeling-under-the-weather-poster-v1-l.jpg>

'No prescription required' leaflet: <https://www.prescqipp.info/our-resources/webkits/self-care/resources-for-professionals/>

Receptionist information sheet checklist: <https://www.prescqipp.info/our-resources/webkits/self-care/resources-for-professionals/>

Self-Care Forum:

<http://www.selfcareforum.org/>

Aims to raise the awareness of self-care and embed it into everyday life. The website contains lots of useful resources and information for prescribers and patients.

NHS.uk:

<https://www.nhs.uk/>

Aims to help patients take control of their health and wellbeing

References

1. NHS England: Conditions for which over the counter items should not routinely be prescribed in primary care: Guidance for CCGs. Available at: <https://www.england.nhs.uk/wp-content/uploads/2018/03/otc-guidance-for-ccgs.pdf> Accessed 07/11/2022
2. PrescQIPP CIC Bulletin 227: Over the counter items – GP guide to self-care. Available at: <https://www.prescqipp.info/umbraco/surface/authorisedmediasurface/index?url=%2fmedia%2f4055%2f227-over-the-counter-items-22.pdf> Accessed 07/11/2022
3. PrescQIPP self-care resources. Available at: <https://www.prescqipp.info/our-resources/webkits/self-care/> Accessed 07/11/2022
4. Electronic Medicines Compendium. Available at: <https://www.medicines.org.uk/emc/> Accessed 07/11/2022
5. NHS.uk Website. Available at: <https://www.nhs.uk/conditions/> Accessed 07/11/2022
6. Patient.info Website. Available at: <https://patient.info/> Accessed 07/11/2022
7. CQC Treating minor ailments and promoting self-care in adult social care. Available at: <https://www.cqc.org.uk/guidance-providers/adult-social-care/treating-minor-ailments-promoting-self-care-adult-social-care> Accessed 07/11/2022

Acknowledgements

SYICB Sheffield Place Self-Care Guidance, October 2018 (review date extended to October 2023). Available at:

https://www.intranet.sheffieldccg.nhs.uk/Downloads/Medicines%20Management/prescribing%20guidelines/Self-care/Self-care_guidance.pdf

Development Process

This guidance was approved by the Barnsley Area Prescribing Committee on 11th January 2023.