

Summary of the additional items within the NHS England Guidance: Items which should not routinely be prescribed in primary care: Guidance for CCGs

Version 2, June 2019

Introduction

The table below contains a summary of the recommendations for the 7 new items included in version 2 of the guidance.

The full guidance is available at:

https://www.england.nhs.uk/wp-content/uploads/2017/11/items-which-should-not-be-routinely-precscribed-in-pc-ccg-guidance-v2.pdf

Recommendations

Product	Category	Recommendation					Exceptions and
(Traffic light classification)		Prescribers in primary care should not initiate the product for any new patient.	Prescribers should not initiate the product in primary care for any new patient.	CCG to support prescribers in deprescribing the product in all patients	If, in exceptional circumstances, there is a clinical need for the product to be prescribed, this should be undertaken in a cooperation arrangement with a multidisciplinary team and/or other healthcare professional.	Other	further recommendations
Aliskiren (Currently grey restricted)	Products which are clinically effective but where more cost-effective products are available this includes products that have been subject to excessive price inflation.	√		✓			No routine exceptions have been defined.
Amiodarone (Currently amber-G. Classification to change to Amber shared care for new patients, following development of a shared care guideline – APC August 2019)	Products of low clinical effectiveness, where there is a lack of robust evidence of clinical effectiveness or there are significant safety concerns.		✓		✓		Must be initiated by a specialist and only continued under a shared care arrangement for patients where other treatments cannot be used, have failed or is in line with NICE Guidance CG180. It may also be suitable in patients prior and post cardioversion or in specific patients who also have heart failure or left ventricular impairment.

Bath and shower preparations for dry and pruritic skin conditions (Classification to change to grey – APC August 2019)	Products of low clinical effectiveness, where there is a lack of robust evidence of clinical effectiveness or there are significant safety concerns.	√		✓			No routine exceptions have been defined.
Dronedarone (Currently red restricted)	Products of low clinical effectiveness, where there is a lack of robust evidence of clinical effectiveness or there are significant safety concerns.		√		✓		Must be initiated by a specialist and only continued under a shared care arrangement for patients where other treatments cannot be used, have failed or is in line with NICE Guidance CG180.
Minocycline for acne (Currently grey)	Products of low clinical effectiveness, where there is a lack of robust evidence of clinical effectiveness or there are significant safety concerns.	✓		✓			No routine exceptions have been identified.
Needles for Pre-Filled and Reusable Insulin Pens (GlucoRx CarePoint insulin pen needle-first choice green, BD VIVA insulin pen needle – second choice green. Both <£5 per 100 needles. Further discussions to take place locally regarding needle lengths)	Products which are clinically effective but where more cost-effective products are available this includes products that have been subject to excessive price inflation.					Prescribers in primary care should not initiate insulin pen needles that cost >£5 per 100 needles for any diabetes patient. CCG to support prescribers in deprescribing insulin pen needles that cost >£5 per 100 needles and, where appropriate ensure the availability of relevant services to facilitate this change.	No routine exceptions have been identified. The Forum for Injection Technique (FIT) UK considers the 4mm needle to be the safest pen needle for adults and children regardless of age, gender and Body Mass Index (BMI). Using needles of a shorter length helps to prevent intramuscular injection of insulin. For patients currently using longer pen needle lengths (8mm, 12mm), it is advisable to change to a shorter needle length (6mm or less) but only

					after discussion with a healthcare professional. For patients that are not able to self-administer it may be appropriate that a safety needle is used by the health care professional, however this would not need to be prescribed on prescription.
Silk Garments (Currently non- formulary. To be added to the grey list – APC August 2019)	Products of low clinical effectiveness, where there is a lack of robust evidence of clinical effectiveness or there are significant safety concerns.	✓	√		No routine exceptions have been identified.