



Policy on Prescribing of Medicines that are Available for Purchase (Self-Care)

Cambridgeshire and Peterborough Integrated Care System **does not** support the routine prescribing of medication that is available to buy from pharmacies or supermarkets for children or adults.

Empowering people with the confidence and information to look after themselves when they are able, and only visit their GP Practice when they need to, gives people greater control of their own health and encourages healthy behaviours that help prevent ill health in the long-term.

In many cases people can now purchase medicines which are available from community pharmacies, or supermarket or grocery stores, reducing the number of primary care consultations and enabling General Practitioners (GPs) and practice teams to focus on caring for higher risk patients, such as those with comorbidities, the very young and elderly, long-term conditions and providing new services. Many of these treatments are more expensive when prescribed on the NHS compared to when they are purchased in pharmacies or supermarkets.

Prescribing some medication on the NHS is often more expensive than what a patient would purchase it for. The cost to purchase some medications are often less than the prescription charge and we all need to ensure that NHS resources are used appropriately for essential services, such as stroke and cancer management.

Exemption from prescription charges does not exempt an individual from self-care with over the counter medication where clinically acceptable. Patients choosing to self-care, where appropriate often improves the availability of appointment slots at their local practice.

The following principles are those expected to be used across Cambridgeshire & Peterborough Integrated Care System (ICS).

#### Principles:

- 1. Patients should keep a small supply of simple treatments in their own medicine cabinet, so they are able to manage minor ailments at home.
- 2. An increasing range of medicines are available for purchase, at reasonable cost and it is expected that patients will purchase such medicines, after seeking appropriate advice from a community pharmacist or other healthcare professional. Appendix A includes a list of medications that are available to purchase. The range of available medicines increases regularly, and this list is not exhaustive but indicative of the medications which could be considered for self-purchase and care.
- 3. Patients and the public have available an increasing range of resources for advice on medicines use, e.g. community pharmacists, NHS 111, NHS choices website, which can





be used to enable self-care as well as their primary care clinician. Cambridgeshire & Peterborough ICS encourages patients and the public to access advice and purchase such homely remedies as they and their family may need.

- 4. Medication should not be routinely prescribed within the NHS when it is for symptomatic relief or where non-pharmacological treatment is available, for example medicines used for cosmetic purposes or for short term conditions which will resolve on their own. See Appendix A for more details.
- 5. Patients are expected, where possible, to try to alter their diet and make other lifestyle changes, which could be the cause of the symptoms they are experiencing; (for instance dyspepsia or heartburn).
- 6. Where a healthcare professional recommends that treatment be considered on a long-term (chronic) basis e.g. paracetamol regularly four times daily in osteoarthritis, patients can purchase up to a maximum of 96 tablets (3 x 32 tablets), from a community pharmacy at the discretion of the community pharmacist. Long-term treatment of a medicine is not a routine exception to self-care where the medicine can be purchased.
- 7. Community pharmacists **should not** advise patients to request their primary care clinician to prescribe medicines, where these are available to purchase over the counter.
- 8. The General Medical Council (GMC) advises that prescribers should make good use of NHS resources, and in most circumstances, it will be reasonable and appropriate for patients to obtain low cost over the counter medication direct from their community pharmacist. However, if an NHS prescriber has concerns that a patient might not be able to or is unwilling to self-care and treatment with a medication is clinically required, then a prescription (FP10) should be considered, in line with Cambridgeshire & Peterborough Joint Prescribing Group formulary recommendations.
- 9. Care homes are expected to facilitate self-care, where clinically possible and should have policies in place which are supportive of self-care. For patients who are supported by carers, see the <u>Self-care Toolkit for Care Homes and Residential Homes</u> which includes a template letter to support self-care for patients with carers in Appendix D.





Appendix A: Medication which can be purchased from a Community Pharmacy and should not routinely be prescribed on a prescription.

This list is an over-view of treatments which are available over the counter. It is for indicative purposes only and as such it is not comprehensive of all treatments and indications which are suitable for self-care.

Additional restrictions may apply with the product license in relation to dose, duration of site of application when purchased OTC compared to when prescribed. The medications or conditions listed below are examples of where medicines should be purchased by the patient/parent/guardian.

### Analgesia

- Paracetamol tablets\* / caplets\* / capsules\* / suspension. Up to a maximum of 96
  Capsules/Tablets/Caplets can be sold at the discretion of the Community Pharmacist
- Ibuprofen tablets / capsules / suspension
- Co-codamol 8mg/500mg tablets / capsules
- Topical analgesics: ibuprofen, diclofenac, methyl salicylate and other rubefacients
- Migraine treatments

# Cough and Cold

- Decongestants. It is unlawful to sell or supply a product or products containing more than 720mg pseudoephedrine salts or more than 180mg ephedrine base (or salts) to a person at one time.
- Simple linctus
- Sore throat treatments
- Normal saline (sodium chloride 0.9%) nasal sprays / drops

#### Antihistamines and allergy

- Oral antihistamines: chlorpheniramine, cetirizine, loratadine, acrivastine, fexofenadine
- Allergy and steroid nasal sprays: beclomethasone / fluticasone / mometasone (\*18 years and over)
- Allergy eye drops: sodium cromoglycate, nedocromil
- Normal saline sprays and drops—such as Sterimar®

# Thrush (maximum 2 episodes in 6 months, and cannot be purchased for patients over 60 years)

- Clotrimazole cream and pessaries
- Fluconazole 150mg capsule

#### Gastrointestinal

- Constipation: lactulose, senna, docusate, bisacodyl (tablets and suppositories), ispaghula husk, glycerine suppositories
- Diarrhoea: loperamide, oral rehydration sachets
- Haemorrhoidal preparations e.g. Anusol etc
- Infant colic e.g. Infacol, simethicone, gripe water etc.

# Cambridgeshire & Peterborough Integrated Care System



#### Dermatology

- · Emollients Moisturising creams, gels, ointments and balms
- Bath oils and shower gels although please also note no evidence for effectiveness.
- See <u>C & P formulary</u> for more detail.
- Medicated shampoos e.g. Alphosyl, Capasal, T-Gel
- Antiperspirants
- Cradle cap shampoos Dentinox, Capasal
- Corticosteroids for short courses (15g, 7 days treatment): Hydrocortisone 1% (\*10 years and over), clobetasone (\*12 years and over)
- Fungal treatments (topical): clotrimazole, miconazole, terbinafine, ketoconazole
- Fungal nail paints
- Benzoyl Peroxide containing products for mild acne
- Sunscreen and sun protection products
- Warts and verrucas: salicyclic acid, freeze treatment
- Barrier creams (e.g. for Nappy rash; Sudocrem, Drapoline, Metanium®)
- Calamine lotion
- Antiseptic creams for minor scalds and burns
- Topical products for insect bites and stings
- Potassium hydroxide for Molluscum contagiosum e.g. Molludab

#### **Eye Conditions**

- Lubricating eye drops for dry eye conditions
- Chloramphenicol eye drops and eye ointment (patients >2yrs).
- Other eye drops and ointments etc for simple eye infections (i.e. Goldeneye, Brolene)

#### Heartburn & Indigestion

 Antacids, including Alginates and short courses of H2 antagonists and Proton pump inhibitors.

#### **Cold Sore Treatments**

Aciclovir

#### Oral Health

- Teething gels and pastes
- Mouth ulcer treatments
- Mouthwashes
- Toothpastes (**High strength fluoride toothpastes are prescription only**, but these should be prescribed by a dentist where clinically needed).
- Fluoride tablets
- Miconazole for oral thrush.

#### Earwax removal

- Cerumol
- Olive oil
- Sodium bicarbonate 5%
- Otex





# Head Lice and Threadworm treatments

## Nutrition and Food supplements

- Preventative vitamins and supplements e.g. low dose vitamin D (<2,000units), I-Caps etc
- Lactose free infant formula
- Probiotics

For further information, please contact Cambridgeshire & Peterborough Integrated Care Board (ICB) <u>Medicines Optimisation Team</u> or discuss with your local Community Pharmacist.

#### Document ratification details

<b>Ratification Process</b>	Details
Authored by:	Cambridgeshire and Peterborough Integrated Care Board
Ratified by:	Cambridgeshire and Peterborough Joint Prescribing Group
Date ratified:	July 2023
Review date:	July 2026 (3 years unless clinical evidence changes)
Version number:	8