

Over the Counter (OTC) medication guidance for MECS/CUES Optometrists - NHS St Helens CCG and NHS Halton CCG

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.

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.

By reducing spend on treating conditions that are self-limiting or which lend themselves to self-care, or on items for which there is little evidence of clinical effectiveness, these resources can be used for other higher priority areas that have a greater impact for patients, support improvements in services and/or deliver transformation that will ensure the long-term sustainability of the NHS.¹

St Helens CCG and Halton CCG do not support the routine prescribing (NHS funding) of over the counter medicines for self-limiting conditions or minor ailments. There will be occasions however where prescribers may use their clinical judgement when consulting individual patients for a minor ailment and will decide if a prescription for an over the counter medicine is warranted. The CCG supports signposting of their residents to self-care solutions whenever possible and appropriate.

There are **general exceptions** to this, and this includes 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. Consideration should also be given to safeguarding issues.²

Please note that being exempt from paying a prescription charge does not automatically warrant an exception to the guidance.

¹ NHSE document 'Conditions for which over the counter items should not routinely be prescribed in primary care' <https://www.england.nhs.uk/wp-content/uploads/2018/03/otc-guidance-for-ccgs.pdf?UNLID=7350505322020632217>

² As per the Self Care Policies of St Helens and Halton. St Helens CCG Self care policy can be found here: <https://www.sthelensccg.nhs.uk/search?search=self+care+policy&singlebutton=> Halton CCG Self care Policy can be found here; <http://www.haltonccg.nhs.uk/your-health/Pages/Prescribing-of-over-the-counter-medicines-is-changing-.aspx>

MECS/CUES formulary

The three conditions that the OTC guidance impacts on are:

- DRY EYES
- BACTERIAL CONJUNCTIVITIS
- MILD TO MODERATE HAYFEVER

Below is the formulary for the provision of drugs within the MECS/CUES service:

Medication	Brand	Form	Strength	Quantity	Medicinal Category
Chloramphenicol		Eye drops	0.5%	10ml	P Self-Care for adults and children over 2 years old. POM Signed Order for children <2 years of age Signed Order if used for prophylaxis
Chloramphenicol		Eye ointment	1%	4g	P Self-Care for adults and children over 2 years old. POM Signed Order for children <2 years of age Signed Order if used for prophylaxis
Fusidic acid *only for consideration when chloramphenicol is contraindicated or in other extenuated circumstances		Eye drops	1%	5g	POM Signed Order
Hypromellose		Eye drops	0.3%	10ml	GSL For Self Care if used for tear deficiency/dry eye conditions For Signed Order if used for other ocular conditions/injuries requiring ocular lubrication
Carbomer 980		Eye gel	0.2%	10g	GSL For Self Care if used for tear deficiency/dry eye conditions For Signed Order if used for other ocular conditions/injuries requiring ocular lubrication
Antazoline and Xylometazoline	Otrivine-antistin®	Eye drops	0.5%/0.05%	10ml	P For Self Care
Sodium Cromoglycate		Eye drops	2%	10ml	P For Self Care
Sodium Hyaluronate	Artelac Rebalance	Preservative Free	0.15%	10ml	GSL For Self Care if used for tear deficiency/dry eye conditions For Signed Order if used for other ocular conditions/injuries

					requiring ocular lubrication
Carmellose sodium	Celluvisc®	Preservative free, single use	1.0%	30 x 0.4ml	GSL For Self Care if used for tear deficiency/dry eye conditions For Signed Order if used for other ocular conditions/injuries requiring ocular lubrication
Soft paraffin ointment	Hilo Night® (Previously Vita-POS)	Eye ointment		5g	GSL For Self Care if used for tear deficiency/dry eye conditions For Signed Order if used for other ocular conditions/injuries requiring ocular lubrication
Soft paraffin ointment	Lacrilube®	Eye ointment		3.5g	GSL For Self Care if used for tear deficiency/dry eye conditions For Signed Order if used for other ocular conditions/injuries requiring ocular lubrication
Soft paraffin ointment	Xailin night®	Eye ointment		5g	GSL For Self Care if used for tear deficiency/dry eye conditions For Signed Order if used for other ocular conditions/injuries requiring ocular lubrication

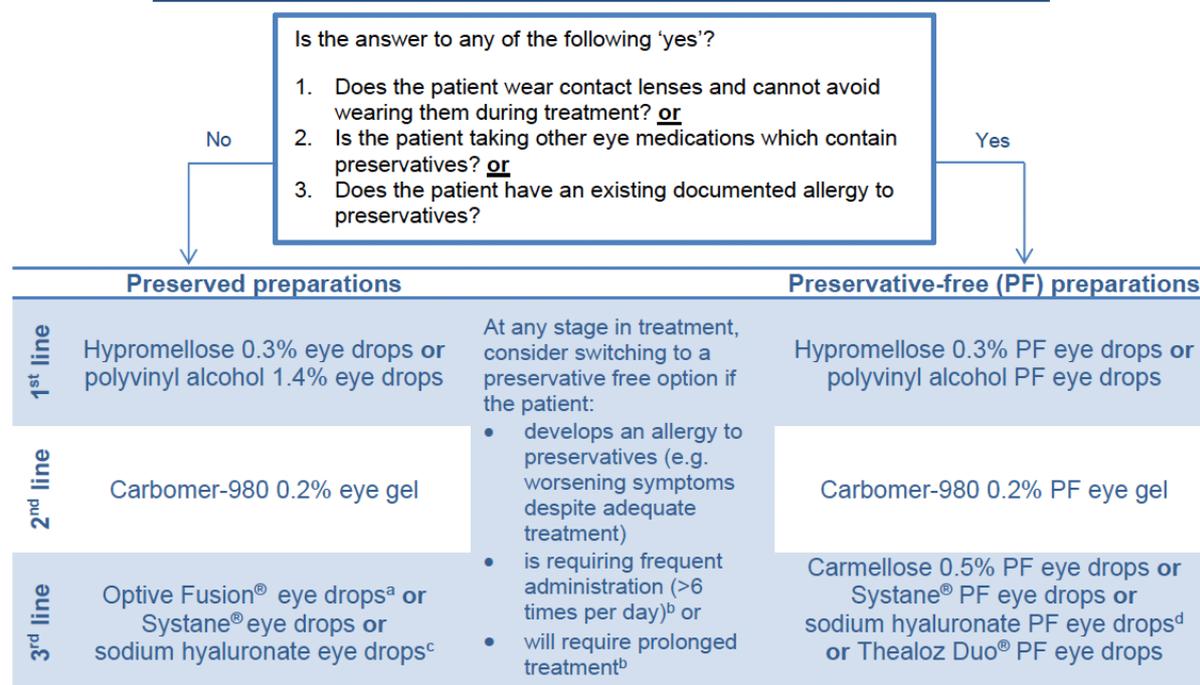
The medications within the formulary can be supplied via

- A written recommendation for OTC medications. The patient will purchase the medication within the optical practice/local pharmacy/supermarket etc.
- An NHS signed order when the patient is exempt due to reasons outlined in this document.

Dry Eyes

Provision of ocular lubricants should follow the Pan Mersey prescribing management advice³ as below:

IF TREATMENT WITH AN ARTIFICIAL TEARS PREPARATION IS INDICATED:



^a Contains preserving system that disintegrates on contact with the eye. May be considered in patients with a known allergy to another preservative (e.g. benzalkonium chloride).

^b Patients requiring frequent administration of 1st line preserved treatments could be trialed on 2nd line preserved options as the required frequency of administration may be lower with these products.

^c The product with the lowest acquisition cost should be selected. At the time of writing, this is **Blink Intensive Tears (10ml bottle)**.

^d The product with the lowest acquisition cost should be selected. At the time of writing, this is **Vismed (10ml bottle)**.

Patients should be given at least a 4 week trial of treatment at each step before reviewing.

Patients who continue to have symptoms despite adequate treatment with 2nd/3rd line treatment options should be considered for referral to an ophthalmologist for assessment.

This guidance should be viewed in relation to the findings and observations found during ocular examination and patient history, therefore it may be appropriate to start with 2nd or 3rd line treatment in some exceptional clinical scenarios. In addition, lid management and other management options may be appropriate.

A patient presenting with an **acute or intermittent acute dry eye** should be directed to purchase the ocular lubricant via OTC medication, the MECS/CUES practitioner should provide a written recommendation to ensure the correct medication is purchased. A patient with intermittent or new dry eye condition is not appropriate for NHS provision of ocular lubricants unless eligible under a general exception as above.

Exemption: Patients identified as having LONG-TERM conditions are exempt from OTC guidance. A long-term condition can be defined as "a condition that requires ongoing medical care, limits what one can do and is likely to last longer than one year".⁴

³ V3 Jan 2020. Full Document here; <https://www.panmerseyapc.nhs.uk/media/1184/dryeye.pdf>

⁴ https://www.nhsggc.org.uk/media/231478/nhsggc_ltc_strategic_framework.pdf

If a patient is identified as having long-term condition that is causing chronic dry eyes, please provide one supply of ocular lubricants by an NHS signed order via the pharmacy, PLUS request that the GP provides a repeat prescription stating that this is a “long-term condition therefore exempt from OTC guidance”.

Bacterial conjunctivitis

As bacterial conjunctivitis is self-limiting please follow the College of Optometrist guidance on the non-pharmacological management when appropriate.

The majority of patients will access the medication via OTC, a written recommendation should be issued to ensure the correct medication is purchased.

Exemption: **Patients under the age of 2** will access the supply by an NHS written order via the pharmacy.

Chloramphenicol – indications other than bacterial conjunctivitis

When Chloramphenicol is required for use in **corneal abrasions or following foreign body removal**, in line with College of Optometrist guidance, the provision under these circumstances is classified as a POM therefore the supply will be by NHS signed order via the pharmacy.

Hayfever

All mast cell stabilisers and antihistamine medication are classed as OTC medications, only those falling into the “**general exceptions**” (see pg.1) are exempt. A written recommendation should be issued to ensure the correct medication is purchased.