

The following medicines have been deemed <u>not suitable</u> for prescribing for adults and children in primary or secondary care within County Durham and Darlington.

This includes all medicines classified in the BNF as 'not NHS' or that are considered by the 'Joint Formulary Committee' of the British National Formulary (BNF) as less suitable for prescribing. It also includes those medicines included within the NICE "Do not do" list, Decisions for inclusion of medicines on the list have been made on the basis of safety, efficacy and cost-effectiveness of the product.

This list applies to new initiations only and existing historical prescribing should be reviewed on individual patient basis if clinically appropriate. Any items for consideration for the list should be submitted to the CD&D Formulary Subgroup.

BNF Chapter	Medicine	Rationale	Supporting information
	Liquid Paraffin Oral Emulsion	Not a cost effective use of NHS resources	BNF: less suitable for prescribing
Chapter 1 Gastrointestinal	Liquid paraffin with magnesium hydroxide	Not a cost effective use of NHS resources	BNF: less suitable for prescribing
Gastromtestinai	Kaolin & Morphine	Not a cost effective use of NHS resources	BNF: less suitable for prescribing
	Kaolin	Not a cost effective use of NHS resources	BNF: less suitable for prescribing
	Cilostazol (Pletal®)	Poor evidence base	NICE: TA223
	Diuretics with Potassium	There is sufficient concern over safety that it is not appropriate to be prescribed due to K+ supplements increasing levels.	BNF: Diuretics with potassium
Chapter 2 Cardiovascular	Inositol Nicotinate (Hexopal®)	Poor evidence base	NICE: TA223

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Oxerutins	Poor evidence base	BNF: less suitable for prescribing
Moxisylyte (Opilon®)	Poor evidence base	CKS: <u>Raynaud's</u> Phenomenon
Pentoxifylline (Trental®	Poor evidence base	NICE: TA223
Simvastatin/ ezetimibe combination product (Inegy®)	Not a cost effective use of NHS resources	NICE: <u>TA132</u>
Trandolapril/ verapamil combination product (Tarka®)	Not a cost effective use of NHS resources	eMIMS: deleted products 2014
Co-flumactone		BNF: less suitable for prescribing
Guanethidine	No longer recommended.	BNF – no longer recommended
Etamasylate	Less effective than other treatments in the management of heavy menstrual bleeding.	BNF: less suitable for prescribing
Doxazosin MR	No good evidence of increased benefit over immediate release doxazosin. Both formulations provide effective blood pressure control and are effective at controlling the symptoms of BPH and improving maximum urinary flow rate. • Half-life of immediate release doxazosin is about 22 hours, allowing once daily dosing.	PrescQIPP DROP List
Perindopril arginine	No benefit of evidence over generic perindopril erbumine and it costs more.	PrescQIPP DROP List

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	Aliskiren	Not cost-effective compared to other antihypertensives.	PrescQIPP DROP List
		NICE CG127 states that there is insufficient evidence of its effectiveness to determine is suitability for use in resistant hypertension.	NICE CG127
Chapter 3	Levocetirizine (Xyzal®)	Not a cost effective use of NHS resources.	CKS: Allergic Rhinitis
Respiratory System	Roflumilast (Daxas®)	Poor evidence base.	NICE: TA224
	Cough and Cold remedies (incl local anaesthetic throat lozenges)	Not a cost effective use of NHS resources.	PrescQIPP DROP List
	Ciclesonide	There are alternative inhaled corticosteroids available at a lower cost. Lack of long-term data on clinical outcomes.	
	Cannabis extract (Sativex®)	Poor evidence base. NTAG – not recommended for use for the treatment of spasticity due to MS.	NICE NTAG
Chapter 4 Central Nervous	Co-careldopa intestinal gel (Duodopa®)	Not a cost effective use of NHS resources.	NHS Commissioning Board: Duodopa policy statement DC43
System	Codeine and aspirin combination product (Cocodaprin®)	Poor evidence base. This preparation does not allow for effective dose titration and the advantages of using a compound formulation have not been substantiated. There is no instance where this product is appropriate to use from a safety or efficacy point of view, over existing treatments.	BNF: less suitable for prescribing
	Co-proxamol	Safety concerns	BNF: Compound

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		Analgesic Preparations
Ergotamine containing	Safety concerns.	NICE
products (Migril)	NICE: Do not Do recommendation: Do not offer ergots or opioids for	
	the acute treatment of migraine.	BNF: less suitable for
		prescribing
	NICE: Do not Do recommendation: Do not offer paracetamol, NSAIDS,	
	opioids, ergots or oral triptans for the acute treatment of cluster	
N4 1	headache.	DNE
Meprobamate	Safety concerns	BNF: meprobamate
Oxycodone/naloxone MR tablets (Targinact®)	Poor evidence base and not a cost effective use of NHS resources.	PrescQIPP DROP List
,	Trials have only compared with standard-release oxycodone not with other strong opioids such as morphine with regular laxatives. There is	
	no data showing that combine oxycodone and naloxone reduce the need for laxatives in the long-term.	
Paracetamol and	Not a cost effective use of NHS resources	PrescQIPP DROP List
tramadol combination		
product (Tramacet®)	This combined preparation has both drugs at lower than suggested	
	dosages and is also more expensive than the separate components.	
e-Voke® electronic	The Northern (NHS) Treatment Advisory Group does not recommend	NTAG
inhaler	the use of e-Voke® as a stop smoking aid on the NHS.	
Isocarboxazid		BNF: less suitable for
		prescribing
Tranylcypromine		BNF: less suitable for

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			prescribing
	Clomipramine (Anafranil		BNF: less suitable for
	SR®)		prescribing
	Dosulepin	NICE CG90 for depression in adults states:	BNF: less suitable for
		"Do not switch to, or start, dosulepin because evidence supporting its	prescribing
		tolerability relative to other antidepressants is outweighed by the	
		increased cardiac risk and toxicity in overdose."	PrescQIPP DROP List
	Promazine		BNF: less suitable for
			prescribing
	Pentazocine		BNF: less suitable for
			prescribing
	Flurazepam		BNF: less suitable for
			prescribing
	Chloral hydrate		BNF: less suitable for
	(insomnia)		prescribing
	Ketoconazole (for oral	Safety concerns	MHRA: Drug Safety
	administration)		<u>Update</u>
	Metheneamine		BNF: less suitable for
Chapter 5			prescribing
Infections	Antifungal nail paints e.g.	Systemic treatments are more effective.	PrescQIPP DROP List
iiiiootioiio	amorolfine nail lacquer		
	Minocycline for acne	Not consider 1st line tetracycline for acne and increased risk of side-	PrescQIPP DROP List
		effects.	NICE KTT11
	Malaria prophylaxis	Not prescribable on the NHS.	

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Area Prescribing Committee

	Chlorpropamide	Safety concerns.	CKS: Type 2 diabetes
	Gliclazide MR (Diamicron	Not a cost effective use of NHS resources.	BNF note: equivalent
	MR®)		therapeutic effect to
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		standard prep
	Prednisolone EC tablets	Poor evidence base.	UKMI Q&A: Is there any
			evidence to support the
			use of enteric coated
			(EC) over uncoated
			prednisolone tablets?
	Alendronate plus Vitamin	Not a cost effective use of NHS resources.	NICE- <u>TA161</u>
	D (Fosavance®)		CKS- osteoporosis
Chapter 6		No convincing randomised controlled evidence of benefits over	
Endocrine System		existing bisphosphonate therapy.	
	Liothyronine (Tri-	Poor evidence base.	Royal College of
	iodothyronine)		Physicians position
	thyroid extract, Armour	There is no robust evidence for the use of liothyronine either alone or	statement: The diagnosis
	thyroid preparations	in combination with levothyroxine, and it is not licensed for longterm	and management of
		use.	primary hypothyroidism
			PrescQIPP DROP List
	Testosterone patches	Poor evidence base	EMA Public Statement:
	(Intrinsa®)		Intrinsa (testosterone):
			Withdrawal of the
			marketing authorisation
			in the European Union
	Yohimbine	Poor evidence base and safety concerns	

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	Tolvaptan for hyponatraemia	Not routinely commissioned.	NHS England
	Teriparatide (atypical fractures)	NTAG does not recommend the use of teriparatide for the treatment of bisphosphonate induced atypical fractures due to lack of evidence and concerns around cost-effectiveness.	NTAG
	Hydrocortisone sodium phosphate (Efcortesol®)	Paraesthesia and pain may follow intravenous injection.	BNF: less suitable for prescribing
	Ibandronic acid (Bonviva®)	Once monthly preparation – unclear whether advantageous	
	Bethanechol		BNF: less suitable for prescribing
Chapter 7 Obstetrics, gynae and urinary tract disorders	Tadalafil once daily	Not recommended as not cost-effective in most patients.	PrescQIPP DROP List
	Dapoxetine	NTAG does not recommend the use of dapoxetine for premature ejaculation because of concerns around cost-effectiveness, lack of long-term safety data and lack of any published active comparator trials.	NTAG
Chapter 8 Malignant disease	Fulvestrant	Poor evidence base and not a cost effective use of NHS resources	NICE TA239
and immuno- suppression	Sipluecel-T		NICE TA
Chapter 9	Cod liver oil capsules	Poor evidence base	NHS Choices: Supplements who needs them
Nutrition and blood	Calcium 500mg and	Not a cost effective use of NHS resources	CKS: sub-therapeutic

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colecalciferol 200units (e.g. Calcichew D-3, Calcium & Ergocalciferol Tablets)	A daily dose of 800 units of vit D is required to prevent fractures.	dose for fracture prevention
Iron – all modified release iron preparations	Poor evidence base	BNF: No therapeutic advantage and should not be used
Multivitamin and mineral preparations for the management of agerelated macular degeneration (ARMD) e.g. Icaps, Occuvite preservision, Preservision lutein, Viteyes original plus-lutein, Ocuvite lutein, Visionace, Vitalux-plus)	Poor evidence base. No data to support use in prevention of AMD.	NTAG
Gamolenic Acid/ Starflower oil (Epogam®) and Efamast®)	Poor evidence base	
Vitamin B Compound	Alcohol-use disorders: diagnosis and management of physical complications NICE CG100 only includes the use of thiamine.	BNF: less suitable for prescribing BNF
Spatone - iron-rich spa water from the mountains of Snowdonia	Poor evidence base	

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	Glucosamine (+/-	Poor evidence base.	NICE CG177
	chondroiton)	NICE CG177: Do not Do recommendation: Do not offer glucosamine	
		or chondroiton products for the management of osteoarthritis.	
	Diclofenac & Misoprostol	BNF recommends a higher starting dose of misoprostol for prophylaxis	BNF: less suitable for
	combination product	against NSAID induced GI ulceration that that provided by combination	prescribing BNF
	(Misofen® and	preparations.	
	Arthrotec®)		
	Naproxen &	Not a cost effective use of NHS resources	CKS: Proven GORD
Chapter 10	esomeprazole		
Musculo-skeletal	combination product		
and joint diseases	(Vimovo®)		
	Synovial fluid injections	Poor evidence base.	NICE
	including Hyaluronan and	NICE Do not Do recommendation: Do not offer intra-articular	
	sodium hyaluronate	hyaluronan injections for the management of osteoarthritis.	
	injection		
	Apremilast	No recommended by NICE for psoriatic arthritis or for moderate to	
		severe plaque psoriasis.	
	Methocarbamol	Not cost effective use of NHS resources, deemed less suitable for	BNF: less suitable for
		prescribing in BNF.	prescribing BNF
	Rubefacients	Poor evidence base	NICE do not do: Do not
			offer rubefacients for
	(Topical rubefacient		treating osteoarthritis
	products may contain		
	nicotinate and salicylate		BNF (2016): The
	compounds, essential		evidence available does

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	oils, capsicum, and camphor. However, topical NSAID preps or Capsaicin preps are not rubefacients)		not support the use of topical rubefacients in acute or chronic musculoskeletal pain PrescQIPP DROP List
	Lanolin cream (Lansinoh HPA®)	Not a cost effective use of NHS resources	Cochrane Review 2014: Interventions for treating painful nipples among breastfeeding women
Chapter 13 Skin	Molludab (potassium hydroxide 5%) topical solution for the treatment of molluscum contagiosum	Poor evidence base	CKS: Molluscum contagiosum
	Idoxuridine in dimethyl sulfoxide (Herpid®)	Poor evidence base	No evidence to support use
	Silk garments (Dermasilk®, Dreamskin®, Skinnies Silk®)	Poor evidence base	UKMI 2014: Silk garments for eczema/atopic dermatitis
Chapter 14 Immunological products and vaccines	Travel vaccines not prescribable on the NHS e.g. hepatitis B, Japanese encephalitis, tick-bourne	Patients should be charged privately for all travel vaccines not prescribable on the NHS.	

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	encephalitis, rabies, yellow fever, meningitis, tuberculosis		
Misc	Infantile Colic products e.g. Colief, Infacol	Poor evidence base	BNF Appendix 2.5 NICE CKS – Colic – infantile (Nov 2014): Lactase drops PrescQIPP DROP List
	Bio Oil	Poor evidence base. More cost effective preparations available	
	Herbal supplements and Homeopathy	Poor evidence base	PrescQIPP DROP List

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