

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
	Kaolin & Morphine	Not a cost effective use of NHS resources	BNF: less suitable for prescribing
Chapter 1 Gastrointestinal	Kaolin	Not a cost effective use of NHS resources	BNF: less suitable for prescribing
Gastromtestinal	Liquid Paraffin Oral Emulsion	Not a cost effective use of NHS resources	BNF: less suitable for prescribing
	Liquid paraffin with magnesium hydroxide	Not a cost effective use of NHS resources	BNF: less suitable for prescribing
	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 2 Cardiovascular	Cilostazol (Pletal®)	Poor evidence base	NICE: TA223
	Co-flumactone		BNF: less suitable for prescribing

Issue: 4	County Duham & D		
Effective from: 17.1.2019		Review Date: 17.1.2019	
Approved by County Durham & Darlington APC		Page 1 of 15	
Current Version is held on the APC website			
	Check with Intranet that is pr		



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
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.	NHSE: Items which should not routinely be prescribed in primary care - Guidance for CCGs (NHS England Gateway Publication 07448, 30th Nov 2017) PrescQIPP DROP List
Etamasylate	Less effective than other treatments in the management of heavy menstrual bleeding.	BNF: less suitable for prescribing
Guanethidine	No longer recommended.	BNF – no longer recommended
Hydrochlorothiazide containing products	Safety concerns	MHRA Drug Safety Update Nov 2018
Inositol Nicotinate (Hexopal®)	Poor evidence base	NICE: TA223
Moxisylyte (Opilon®)	Poor evidence base	CKS: Raynaud's Phenomenon
Oxerutins	Poor evidence base	BNF: less suitable for prescribing

Issue: 4	County Duham & Darlington DNP List		
Effective from: 17.1	.2019 F	Review Date: 17.1.2019	
Approved by County Durha		am & Darlington APC	Page 2 of 15
Current Version is held on the APC website			
Check with Intranet that is printed copy is the latest issue			



Omega-3-acid ethyl ester Omacor®)	Prescribers in primary care should not initiate omega-3 Fatty Acids for any new patient.	NHSE: Items which should not routinely be
	<ul> <li>NICE have reviewed the evidence and advised they are not suitable for prescribing by making "Do not do" recommendations:</li> <li>Do not offer or advise people to use omega-3 fatty acid capsules or omega-3 fatty acid supplemented foods to prevent another myocardial infarction.</li> <li>Do not offer omega-3 fatty acid compounds for the prevention of cardiovascular disease to any of the following: people who are being treated for primary prevention, people who are being treated for secondary prevention, people with chronic kidney disease, people with type 1 diabetes, people with type 2 diabetes.</li> <li>Do not offer the combination of a bile acid sequestrant (anion exchange resin), fibrate, nicotinic acid or omega-3 fatty acid compound with a statin for the primary or secondary prevention of CVD.</li> <li>Do not offer omega-3 fatty acids to adults with non-alcoholic fatty liver disease because there is not enough evidence to recommend their use.</li> <li>Initiation of omega-3-acid ethyl esters supplements is not routinely recommended for patients who have had a myocardial infarction (MI) more than 3 months earlier.</li> <li>Do not use omega-3 fatty acids to manage sleep problems in children and young people with autism.</li> <li>People with familial hypercholesterolemia (FH) should not routinely be recommended to take omega-3 fatty acid supplements.</li> <li>Do not offer omega-3 or omega-6 fatty acid compounds to treat multiple sclerosis (MS). Explain that there is no evidence that they affect relapse frequency or progression of MS.</li> </ul>	prescribed in primary care - Guidance for CCGs (NHS England Gateway Publication 07448, 30th Nov 2017)  NICE: KTT3  PrescQIPP DROP List

Issue: 4	County Duham & Darlington DNP List	
Effective from: 17.1	.2019 Review Date: 17.1.2019	
	Approved by County Durham & Darlington APC	Page 3 of 15
Current Version is held on the APC website		



	Pentoxifylline (Trental®)	Poor evidence base	NICE: <u>TA223</u>
	Perindopril arginine	No benefit of evidence over generic perindopril erbumine and it costs more.	NHSE: Items which should not routinely be prescribed in primary care - Guidance for CCGs (NHS England Gateway Publication 07448, 30th Nov 2017)  PrescQIPP DROP List
	Simvastatin/ ezetimibe combination product (Inegy®)	Not a cost effective use of NHS resources	NICE: TA132
	Trandolapril/ verapamil combination product (Tarka®)	Not a cost effective use of NHS resources	eMIMS: deleted products 2014
Chapter 3	Ciclesonide	There are alternative inhaled corticosteroids available at a lower cost. Lack of long-term data on clinical outcomes.	
Respiratory System	Cough and Cold remedies (incl local anaesthetic throat lozenges)	Not a cost effective use of NHS resources.	PrescQIPP DROP List
	Levocetirizine (Xyzal®)	Not a cost effective use of NHS resources.	CKS: Allergic Rhinitis

Issue: 4	County Duham & Darlington DNP List	
Effective from: 17.1	.2019 Review Date: 17.1.2019	
Approved by County Durham & Darlington APC		Page 4 of 15
Current Version is held on the APC website		
Check with Intranet that is printed copy is the latest issue		



	Cannabis extract (Sativex®)	Poor evidence base.  NTAG – not recommended for use for the treatment of spasticity due to MS.	NICE NTAG
	Chloral hydrate (insomnia) Clomipramine (Anafranil SR®)		BNF: less suitable for prescribing BNF: less suitable for prescribing
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	Co-proxamol was a pain-killer which was previously licensed in the UK until being fully withdrawn from the market in 2007 due to safety concerns. All use in the UK is now on an unlicensed basis.	NHSE: Items which should not routinely be prescribed in primary care - Guidance for CCGs (NHS England Gateway Publication 07448, 30 <sup>th</sup> Nov 2017)

Issue: 4 County Duham & Darlington DNP List		
Effective from: 17.1	.2019 Review Date: 17.1.2019	
Approved by County Durham & Darlington A		Page 5 of 15
	Current Version is held on the APC website	
Check with Intranet that is printed copy is the latest issue		



Dosulepin	NICE CG90 for depression in adults states:  "Do not switch to, or start, dosulepin because evidence supporting its tolerability relative to other antidepressants is outweighed by the increased cardiac risk and toxicity in overdose."	NHSE: Items which should not routinely be prescribed in primary care - Guidance for CCGs (NHS England Gateway Publication 07448, 30th Nov 2017)
		BNF: less suitable for prescribing
		PrescQIPP DROP List
Ergotamine containing products (Migril)	Safety concerns. NICE: Do not Do recommendation: Do not offer ergots or opioids for	NICE
	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 headache.	
e-Voke® electronic inhaler	The Northern (NHS) Treatment Advisory Group does not recommend the use of e-Voke® as a stop smoking aid on the NHS.	NTAG
Flurazepam		BNF: less suitable for prescribing
Isocarboxazid		BNF: less suitable for prescribing
Meprobamate	Safety concerns	BNF: meprobamate

Issue: 4 County Duham & Darlington DNP List		
Effective from: 17.1	.2019 Review Date: 17.1.2019	
	Approved by County Durham & Darlington APC	Page 6 of 15
Current Version is held on the APC website		
Check with Intranet that is printed copy is the latest issue		



Oxycodone/nalo tablets (Targina)		should not routinely be prescribed in primary care - Guidance for
Paracetamol an tramadol combin product (Tramadol Tramadol	nation	rces  NHSE: Items which should not routinely be prescribed in primary
Pentazocine		BNF: less suitable for prescribing
Promazine		BNF: less suitable for prescribing
Tranylcypromine		BNF: less suitable for prescribing
Trimpramine	Not a cost effective use of NHS resou	rces.  NHSE: Items which should not routinely be prescribed in primary

Issue: 4	County Duham & Darlington DNP List	
Effective from: 17.1	.2019 Review Date: 17.1.2019	
	Approved by County Durham & Darlington APC	Page 7 of 15
Current Version is held on the APC website		
Check with Intranet that is printed copy is the latest issue		



			care - Guidance for CCGs (NHS England Gateway Publication 07448, 30th Nov 2017)
	Ketoconazole (for oral administration)	Safety concerns	MHRA: <u>Drug Safety</u> <u>Update</u>
Chapter 5 Infections	Antifungal nail paints e.g. amorolfine nail lacquer	Systemic treatments are more effective.	PrescQIPP DROP List
iniections	Minocycline for acne	Not consider 1st line tetracycline for acne and increased risk of side- effects.	PrescQIPP DROP List NICE KTT11
	Malaria prophylaxis	Not prescribable on the NHS.	
	Alendronate plus Vitamin D (Fosavance®)	Not a cost effective use of NHS resources.  No convincing randomised controlled evidence of benefits over existing bisphosphonate therapy.	NICE- TA161 CKS- osteoporosis
Chapter 6	Chlorpropamide	Safety concerns.	CKS: Type 2 diabetes
Endocrine System	Gliclazide MR (Diamicron MR®)	Not a cost effective use of NHS resources.	BNF note: equivalent therapeutic effect to standard prep
	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	

Issue: 4	County Duham & Darlington DNP List	
Effective from: 17.1	.2019 Review Date: 17.1.2019	
	Approved by County Durham & Darlington APC	Page 8 of 15
Current Version is held on the APC website		
	Check with Intranet that is printed copy is the latest issue	



Area Prescribing Committee

	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?
	Teriparatide (atypical	NTAG does not recommend the use of teriparatide for the treatment of	NTAG
	fractures)	bisphosphonate induced atypical fractures due to lack of evidence and concerns around cost-effectiveness.	
	Testosterone patches	Poor evidence base	EMA Public Statement:
	(Intrinsa®)		Intrinsa (testosterone):
			Withdrawal of the
			marketing authorisation
			in the European Union
	Tolvaptan for	Not routinely commissioned.	NHS England
	hyponatraemia		
	Yohimbine	Poor evidence base and safety concerns	
Chapter 7	Bethanechol		BNF: less suitable for prescribing
Obstetrics, gynae and urinary tract disorders	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

Issue: 4	County Duham & Darlington DNP List	
Effective from: 17.1	.2019 Review Date: 17.1.2019	
	Approved by County Durham & Darlington APC	Page 9 of 15
Current Version is held on the APC website		
	Check with Intranet that is printed copy is the latest issue	



	Tadalafil once daily	Not recommended as not cost-effective in most patients.  Benign Prostatic Hyperplasia: NICE terminated their technology appraisal (TA273) due to receiving no evidence from the manufacturer. In NICE CG97: Lower Urinary Tract Symptoms in Men NICE state that there is not enough evidence to recommend phosphodiesterase inhibitors in routine clinical practice.  Erectile Dysfunction: PrescQIPP CIC have reviewed the evidence for Tadalfil and although tadalafil is effective in treating erectile dysfunction, there is not enough evidence to routinely recommend once daily preparations in preference to "when required" preparations particularly as when required preparations are now available as a generic.	NHSE: Items which should not routinely be prescribed in primary care - Guidance for CCGs (NHS England Gateway Publication 07448, 30th Nov 2017) NICE CG97 NICE TA273 PrescQIPP DROP List
Chapter 8 Malignant disease and immuno- suppression	Fulvestrant Sipluecel-T	Poor evidence base and not a cost effective use of NHS resources	NICE TA239 NICE TA
Chapter 9	Calcium 500mg and colecalciferol 200units (e.g. Calcichew D-3, Calcium & Ergocalciferol Tablets)	Not a cost effective use of NHS resources A daily dose of 800 units of vit D is required to prevent fractures.	CKS: sub-therapeutic dose for fracture prevention
Nutrition and blood	Cod liver oil capsules	Poor evidence base	NHS Choices: Supplements who needs them

Issue: 4	County Duham & Darlington DNP List	
Effective from: 17.1	.2019 Review Date: 17.1.2019	
	Approved by County Durham & Darlington APC	Page 10 of 15
Current Version is held on the APC website		
	Check with Intranet that is printed copy is the latest issue	



	Gamolenic Acid/ Starflower oil (Epogam®) and Efamast®)	Poor evidence base	
	Iron – all modified release iron preparations	Poor evidence base	BNF: No therapeutic advantage and should not be used
	Spatone - iron-rich spa water from the mountains of Snowdonia	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
	Actipatch®	Poor evidence base and not approved by NTAG Nov 2018.	NTAG Nov 2018
	Diclofenac & Misoprostol combination product (Misofen® and Arthrotec®)	BNF recommends a higher starting dose of misoprostol for prophylaxis against NSAID induced GI ulceration that that provided by combination preparations.	BNF: less suitable for prescribing BNF
Chapter 10 Musculo-skeletal and joint diseases	Glucosamine (+/- chondroiton)	Poor evidence base.  NICE CG177: Do not Do recommendation: Do not offer glucosamine or chondroiton products for the management of osteoarthritis.	NHSE: Items which should not routinely be prescribed in primary care - Guidance for CCGs (NHS England Gateway Publication 07448, 30th Nov 2017)
			NICE CG177

Issue: 4	County Duham & Darlington DNP List	
Effective from: 17.1	.2019 Review Date: 17.1.2019	
	Approved by County Durham & Darlington APC	Page 11 of 15
Current Version is held on the APC website		
	Check with Intranet that is printed copy is the latest issue	



Naproxen & esomeprazole	Not a cost effective use of NHS resources	CKS: <u>Proven GORD</u>
combination product		
(Vimovo®)		
Methocarbamol	Not cost effective use of NHS resources, deemed less suitable for prescribing in BNF.	BNF: less suitable for prescribing BNF
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		
Rubefacients	Poor evidence base	NHSE: Items which should not routinely be
(Topical rubefacient		prescribed in primary
products may contain		care - Guidance for
nicotinate and salicylate		CCGs (NHS England
compounds, essential		Gateway Publication
oils, capsicum, and		07448, 30th Nov 2017)
camphor. However,		NICE do not do: Do not
topical NSAID preps or Capsaicin preps are not		offer rubefacients for
rubefacients)		treating osteoarthritis
Tuberacionis		BNF (2016): The
		evidence available does
		not support the use of
		topical rubefacients in
		acute or chronic

Issue: 4 County Duham & Darlington DNP List		
Effective from: 17.1	.2019 Review Date: 17.1.2019	
	Approved by County Durham & Darlington APC	Page 12 of 15
Current Version is held on the APC website		
Check with Intranet that is printed copy is the latest issue		



			musculoskeletal pain
			PrescQIPP DROP List
	Eyelid cleaning products for blepharitis	Not a cost effective use of NHS resources Prescribing at NHS expense is not recommended. Patients who wish to use these products should be advised to purchase them over the counter and follow NHS Choices self-care advice.	Tees DNP List
Chapter 11 Eye	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.	NHSE: Items which should not routinely be prescribed in primary care - Guidance for CCGs (NHS England Gateway Publication 07448, 30th Nov 2017)
Chapter 12	Ear wax softening ear	Not a cost effective use of NHS resources	Tees DNP List
Ear, Nose & Oropharynx	drops	Should be purchased for self-care. Drops containing simple remedies such as olive oil, almond oil and sodium bicarbonate are available.	
Chapter 13 Skin	Lanolin cream (Lansinoh HPA®)	Not a cost effective use of NHS resources	Cochrane Review 2014: Interventions for treating painful nipples among breastfeeding women
	Minoxidil 5% Scalp Foam	Not a cost effective use of NHS resources. All other forms of topical minoxidil are black-listed in the Drug Tariff.	

Issue: 4	County Duham & Darlington DNP List	
Effective from: 17.1	.2019 Review Date: 17.1.2019	
	Approved by County Durham & Darlington APC	Page 13 of 15
	Current Version is held on the APC website	
	Check with Intranet that is printed copy is the latest issue	



Issue: 4

Effective from: 17.1.2019

	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 encephalitis, rabies, yellow fever, meningitis ACWY, tuberculosis, combined hepatitis A&B	Patients should be charged privately for all travel vaccines not prescribable on the NHS.  Combined Hepatitis A&B added to DNP list as Hep B not prescribable on the NHS for travel purposes. The APC noted the current supply shortages with Hep B vaccine and that Public Health England have issued guidance to mitigate the shortages and the combined vaccine is recommended in certain circumstances to help manage the shortages currently. Prescribers are advised to follow Public Health England until supply issues are resolved.	NHSE: Items which should not routinely be prescribed in primary care - Guidance for CCGs (NHS England Gateway Publication 07448, 30th Nov 2017)
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

County Duham & Darlington DNP List

Approved by County Durham & Darlington APC

Current Version is held on the APC website
Check with Intranet that is printed copy is the latest issue

Review Date: 17.1.2019

Page 14 of 15



Bio Oil	Poor evidence base. More cost effective preparations available	
Herbal supplements and	Poor evidence base	NHSE: Items which
Homeopathy		should not routinely be
		prescribed in primary
		care - Guidance for
		CCGs (NHS England
		Gateway Publication
		07448, 30th Nov 2017)
		PrescQIPP DROP List

Review date: January 2020

Issue: 4	County Duham & Darlington DNP List		
Effective from: 17.1.2019		Review Date: 17.1.2019	
	Approved by County Durham & Darlington APC		Page 15 of 15
	Current Version is held on the APC website		
	Check with Intranet that is pr		