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Medicines Optimisation Update

Lidocaine Patches

NHS

Cumbria

Clinical Commissioning Group

What this includes:

Ensuring that Lidocaine 5% patches (Versatis®) are prescribed and reviewed appropriately.

Identifying the problem:

- Lidocaine audit available at: <https://www.prescgipp.info/-lidocaine-plasters/category/54-lidocaine-plasters>

Suggested actions:

- Lidocaine 5% patch (Versatis®) are only currently indicated for the symptomatic relief of neuropathic pain associated with previous herpes zoster infection (post-herpetic neuralgia, PHN) in adults. Therefore audit patients that are prescribed lidocaine patch to ensure it is being prescribed appropriately. (See resources overleaf). An exception is patients that are prescribed lidocaine patches in palliative care when prescribed by a specialist.

Patients currently being prescribed lidocaine for PHN:

- Review treatment: Is it still indicated?
- First line treatments are: Paracetamol and codeine. Second line treatments are amitriptyline, gabapentin, tramadol.
- For a person with localized neuropathic pain who wishes to avoid, or cannot tolerate, oral treatments, consider prescribing capsaicin 0.075% cream (Axsain®).

Patients currently being prescribed lidocaine for an unlicensed indication (diabetic neuropathy, other neuropathic pain and other pain):

- Review treatment if patient has not tried first line treatments (paracetamol and codeine) and second line treatments (amitriptyline, gabapentin, tramadol, capsaicin cream).

Patients that are commenced on lidocaine for PHN:

- Consider a trial of Lidocaine patches only if first and second line treatments have failed and schedule a follow up review to see if treatment has been effective prior to reissuing a further prescription.

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Suggested actions:

- The painful area should be covered with the plaster once daily for up to 12 hours within a 24 hour period.
- Only the number of plasters that are needed for an effective treatment should be used. When needed, the plasters may be cut into smaller sizes with scissors prior to removal of the release liner.
- In total, not more than three plasters should be used at the same time.
- The plaster must be applied to intact, dry, non-irritated skin (e.g. after healing of the shingles).
- Each plaster must be worn no longer than 12 hours. The subsequent plaster-free interval must be at least 12 hours. The plaster can be applied during the day or during the night.
- The plaster must be applied to the skin immediately after removal from the sachet and following removal of the release liner from the gel surface. Hairs in the affected area must be cut off with a pair of scissors (not shaved).
- Treatment outcome should be re-evaluated after 2-4 weeks. If there has been no response to Versatis® after this period (during the wearing time and/or during the plaster-free interval):
 - Discontinue use.
 - Optimise current pain relief choices
- Consider referring a person with PHN or neuropathic pain if any of the following apply:
 - They have severe pain.
 - Their pain significantly limits their daily activities and participation.
 - Their underlying health condition has deteriorated.

Resources:

- Lidocaine bulletin and resources available from Prescqipp:
<https://www.prescqipp.info/-lidocaine-plasters/category/54-lidocaine-plasters>

References:

- Summary of Products Characteristics, Versatis (lidocaine patch 5%).
<https://www.medicines.org.uk/emc/medicine/19291>
- NICE Clinical Knowledge Summaries, neuropathic pain.
<http://cks.nice.org.uk/neuropathic-pain-drug-treatment#!topicsummary>