



This will make it easier for hospital staff to find out which medicines you use.

The hospital will make sure that you have enough medicines to last you for at least two weeks after you leave hospital.

### Key points

The NHS has to make the best use of its resources and we are looking closely at how medicines are prescribed to ensure that we make best use of the money we spend, without reducing the quality of the treatment that you receive.

Making changes to your medicines does not mean that you are receiving a reduced quality service or product.

If you have a leaflet or letter giving information about the changes to your medicines, please read it carefully and keep it for reference.

Always follow the directions printed on the medicine label. For further information you can speak to your local community pharmacist.

Your pharmacist may be able to offer you a consultation in private to discuss your medicines, just ask at the pharmacy. Pharmacists are experts in the uses of medicines and are able to advise you about a wide range of medicines related issues, including advice and treatment for minor illness and ailments. They are often open extended hours, such as evenings and weekends.

### Glossary

**Brand name** - a drug that has a trade name and is protected by a patent and can be produced and sold only by the company holding the patent

**Capsules** – either a hard case which contains dry, powdered ingredients containing the active medicine or a soft shell which contains oils in which the active ingredient is dissolved or suspended.

**Clinically effective** - this is a measure of the extent to which specific clinical interventions (such as taking a medicine) do what they are intended to do i.e. they either maintain or improve the health of patients.

**Generic medicine** - Generic medicines are copies of brand name drugs that have exactly the same dosage, effects, side effects, route of administration, risks, safety, and strength as the original brand drug.

**Patent** – an exclusive right to manufacture for a certain period of time. During this time no other company can produce the same drug.

**Tablets** – are usually a mixture of active medicine and other substances in powder form which are compacted into a solid tablet.

**If you would like a copy of this leaflet in alternative formats or languages please contact us on 0191 217 2599**



## Information on why your medicines may have been changed

**a guide for patients**

This leaflet explains why the NHS North of Tyne is making some changes to medicines which may affect you.

## Making best use of NHS resources

NHS North of Tyne is responsible for managing the budget for the drugs prescribed by your GP and nurses. During the last year we spent £130 million in Newcastle, North Tyneside and Northumberland on 17 million prescriptions for medications.

The NHS has to make the best use of its resources and as such we have decided that we need to look closely at how medicines are prescribed to ensure that we make best use of the money we spend, without reducing the quality of the treatment that you receive.

If more money is spent on medicines than that is available in the budget, then the extra money has to come from other areas of the NHS.

This leaflet explains how the local NHS is making some changes to medicines which may affect you.

## What sort of changes are being made?

The generic name of a medicine is the actual name of the active ingredient, rather than the 'trade' or the 'brand' name which is chosen by the manufacturer. For example, Panadol® is one brand name for the medicine paracetamol.

When new medicines first become available there is usually only one manufacturer that has the patent to produce that particular branded medicine. When that patent expires other companies can manufacture the same medicine as a 'generic' product. The medicine is manufactured to the same tight quality controls and contains the same active drug ingredients.

However the appearance, packaging and name will be different from the branded medicine. Competition between different manufacturers means that medicines prescribed by a generic name usually costs much less for the NHS to buy – however the generic medicine will have the same effect on your health condition as the branded product.

### Brand switches

Sometimes it is important that a patient receives a particular brand of a medicine. This is usually because very small changes in the way the medicine is absorbed into the body may change how effective the medicine is.

It is usually only in specialised areas of medicine that the same brand of a medicine should always be used, for example organ transplantation. If such a medicine is prescribed by its generic name we will try to switch to the branded medicine instead.

### Group switches

There may be several different drugs in the same group of medicines. When there is no difference in the clinical effectiveness between these drugs we will recommend that the cheapest is prescribed.

For example, changing from colour coated prednisolone EC (a medication used to treat inflammatory conditions) to uncoated prednisolone tablets, would give the NHS £380,000 to reinvest in other treatments without reducing the clinical effectiveness of the drug.

## Dose changes

We may change patients doses of medicines to ensure best value for money. This might mean a patient who is prescribed a low dose of a medicine to be taken twice a day could be prescribed a higher strength to be taken once a day. Alternatively a medicine taken once a day may be changed to a lower dose taken twice a day. It will be just as clinically effective and less expensive.

## Tablets and capsules

Sometimes the same medicine may be available in both tablet and capsule form – and both would just as clinically effective as the other. If there is a difference in cost, we will recommend that the less expensive product is prescribed.

## Stopping some medicines

We are stopping some drugs where there is a very limited clinical evidence base. In some cases they are not recommended by the Department of Health, or the National Institute for Health and Clinical Excellence (NICE) has said they should not be used. This means that there is insufficient evidence to suggest they are clinically effective – in other words that they work. For example, we are stopping the prescription of gamolenic acid (evening primrose oil) for period related breast pain.

Often these products are available to buy from health food shops and community pharmacies.

## Taking your medicines into hospital

If you are admitted for a planned or emergency visit to hospital please bring all the medicines you usually take with you.