



NHS Clinical
Commissioners

The independent collective voice
of clinical commissioning groups



Prescribing medicine for minor illnesses Consultation



Information booklet



Every year, there are a lot of GP appointments for illnesses people can treat by themselves, without having to see a doctor.



People can buy medicines to treat themselves for these illnesses over the counter, from a pharmacy or supermarket.



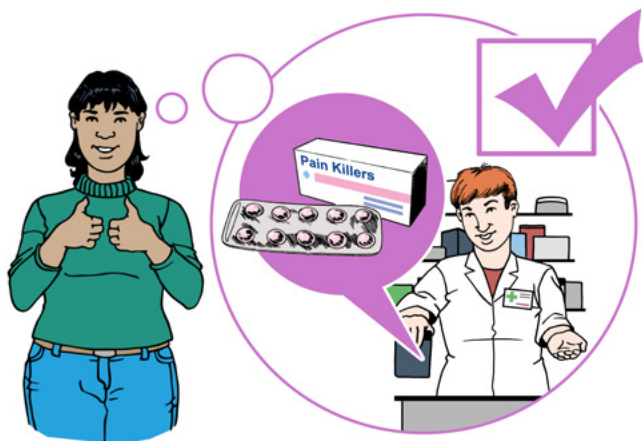
When people go to the GP for these illnesses, it costs the NHS a lot of money.



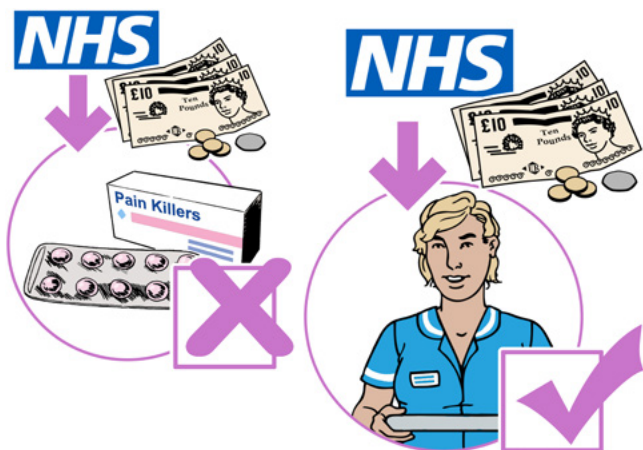
When people get medicines for these illnesses on prescription, it also costs the NHS a lot of money.



Many medicines for these illnesses cost the NHS more on prescription than they would cost the patient to buy in a pharmacy or a supermarket.



The NHS thinks that people can treat some illnesses by themselves if they have the right information.



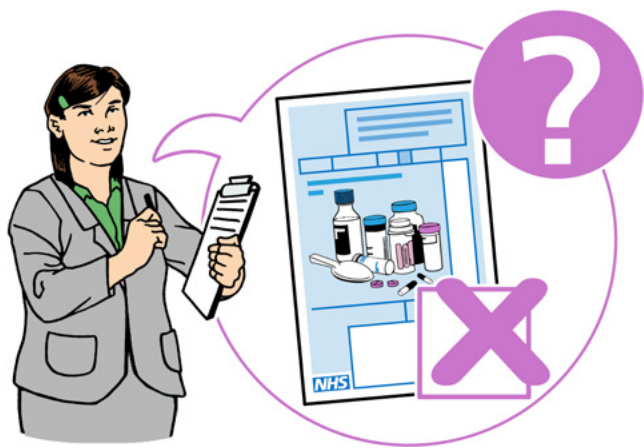
This will save the NHS a lot of money every year. This money can then be spent on other things, like nurses or cancer treatment.



NHS England and NHS Clinical Commissioners asked people what they think about spending less on medicines for some illnesses by supporting people to treat themselves.



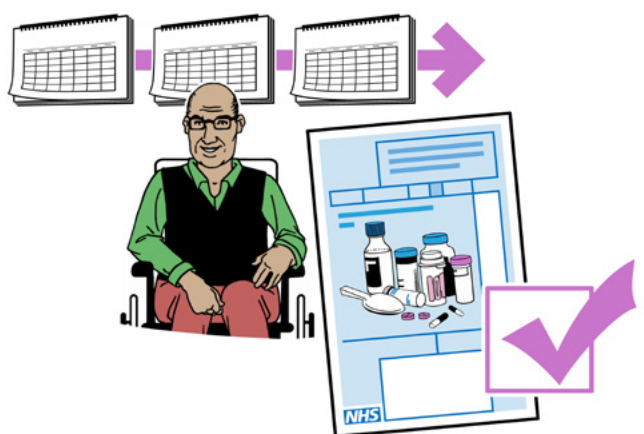
People agreed with the idea, so the NHS made a list of 33 illnesses that can be treated using over the counter medicines.



NHS England and NHS Clinical Commissioners are asking people if they think it would be a good idea to stop prescribing medicines for these illnesses.

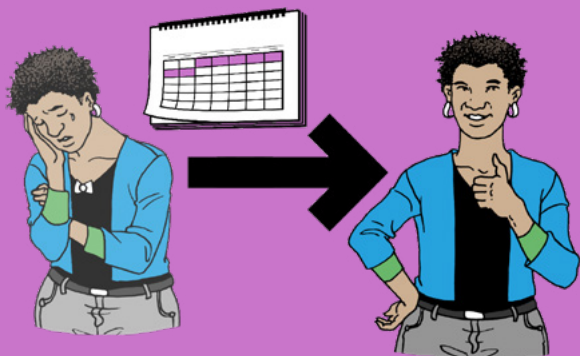


Instead, people would have to buy their own medicines from a pharmacy or a supermarket.

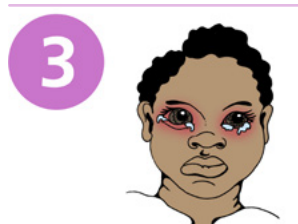
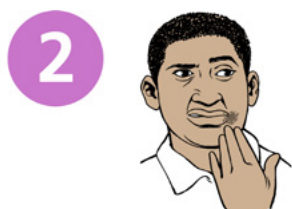


Some people will still be prescribed medicine for these 33 illnesses. For example people who also have a long-term illness like arthritis or a more serious illness like cancer.

Illnesses that can be treated using over the counter medicines



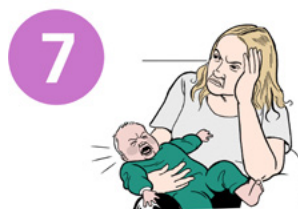
Illnesses that don't last long or illnesses that go away on their own:



1. Acute sore throat
2. Cold sores
3. Conjunctivitis
4. Coughs and colds and nasal congestion

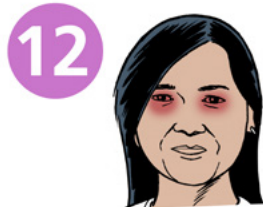


5. Cradle cap
6. Haemorrhoids
7. Infant colic
8. Mild cystitis





Illnesses that people can treat themselves:



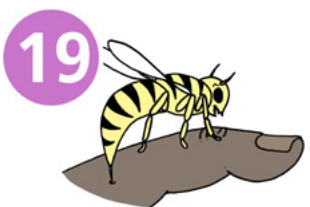
- 9. Contact dermatitis (allergic rash)
- 10. Dandruff
- 11. Diarrhoea in adults
- 12. Dry eyes / sore tired eyes

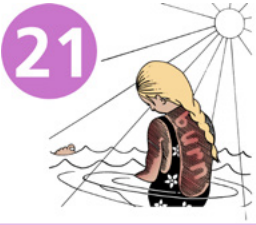


- 13. Earwax
- 14. Sweating too much
- 15. Head lice
- 16. Indigestion and heartburn



- 17. Infrequent migraines
- 18. Infrequent constipation
- 19. Insect bites and stings
- 20. Mild acne





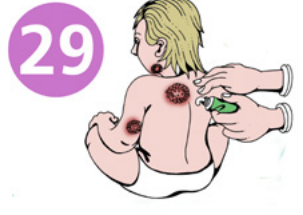
- 21. Mild dry skin/sunburn
- 22. Mild to moderate hay fever
- 23. Minor burns and scalds



- 24. Conditions which are not serious but might cause pain or fever. For example sprains, headaches, period pain or back pain.
- 25. Mouth ulcers



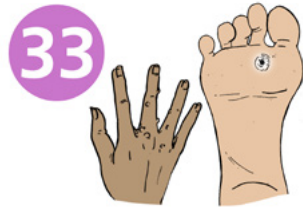
- 26. Nappy rash
- 27. Oral thrush
- 28. Prevention of tooth decay



- 29. Ringworm or athlete's foot



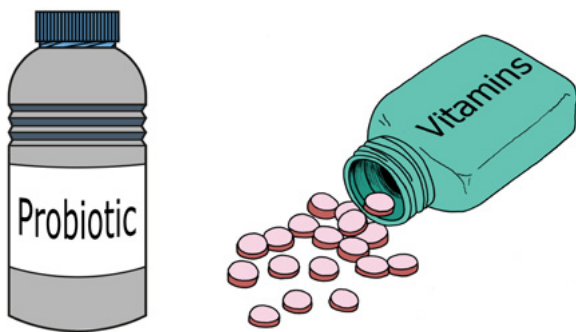
- 30. Teething or mild toothache
- 31. Threadworms



- 32. Travel sickness
- 33. Warts and verrucas

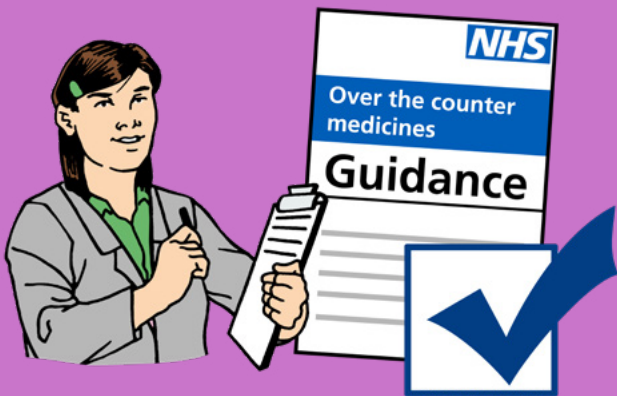


Other medicines you can get over the counter:



- Probiotics
- Vitamins and minerals

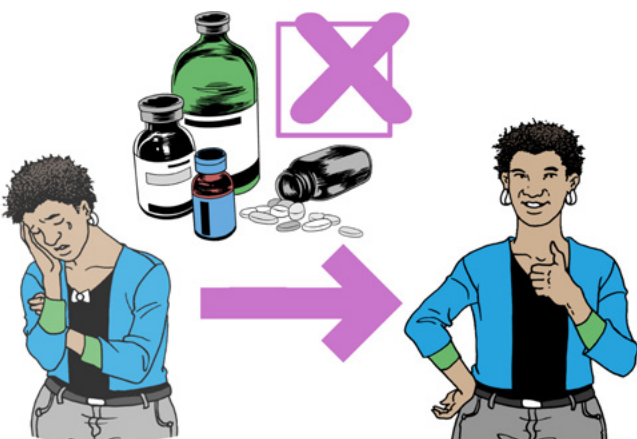
NHS England want to change their policies about prescribing medicine for these illnesses



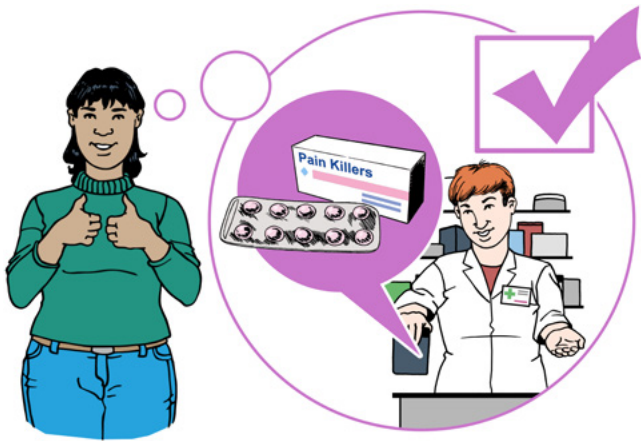
NHS England are suggesting that guidance for Clinical Commissioning Groups will be written to:



1. Support healthcare staff to help patients understand the medicines that are unlikely to work and so won't be prescribed to them.



2. Support healthcare staff to help patients to understand that their illness will get better on its own, so medicine will not be prescribed.



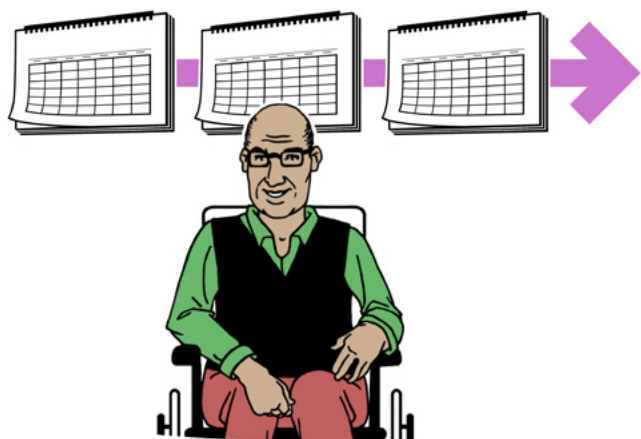
3. Support healthcare staff to help patients to understand that their illness is not serious and can be treated with over the counter medicine from a pharmacy.



This guidance is to help Clinical Commissioning groups encourage people to treat themselves if their illness is not serious.



Healthcare staff would still prescribe medicine for:



- The treatment of long term illnesses, for example arthritis.



- The treatment of illnesses that are not serious but stop someone living life normally. For example migraines that are very bad or happen often.



- Illnesses that are normally not serious but are not getting better. For example if someone has a cough that lasts more than three weeks.



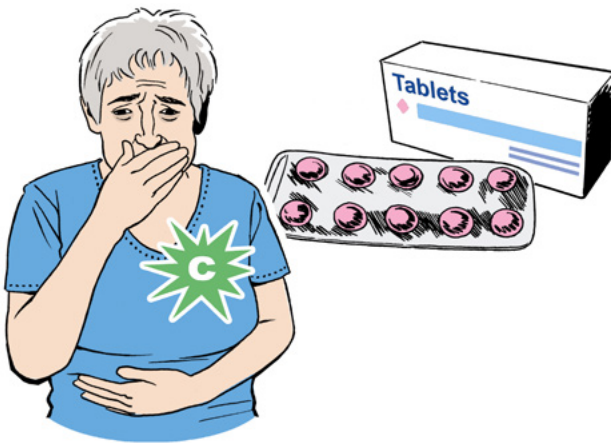
Healthcare staff would still prescribe medicine for patients who:



- Have complex needs. This means they may have more than one illness, a long-term illness or long-lasting pain.



- Are on treatments that they can only get on prescription.



- Are being prescribed medicines that they can get over the counter to treat a symptom of a more serious illness. For example a serious illness that causes pain.



Healthcare staff would also still prescribe medicine when:



- The medicine has a licence which says it cannot be sold over the counter to certain types of patients. For example pregnant women or children.



- The patient has an illness that is not serious but the medicine they have bought over the counter has not worked.



- The healthcare staff believes the illness is more serious.



- The healthcare staff believes the patient cannot treat themselves. This might be because they have a disability or mental health problems.



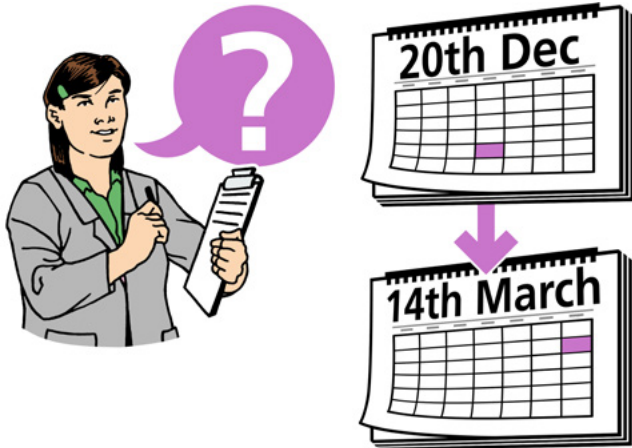
- The healthcare staff believes there is a special reason why they should prescribe the medicine.

Who has developed these ideas?



NHS England and NHS Clinical Commissioners have talked to the joint clinical working group and patient groups.

Consultation

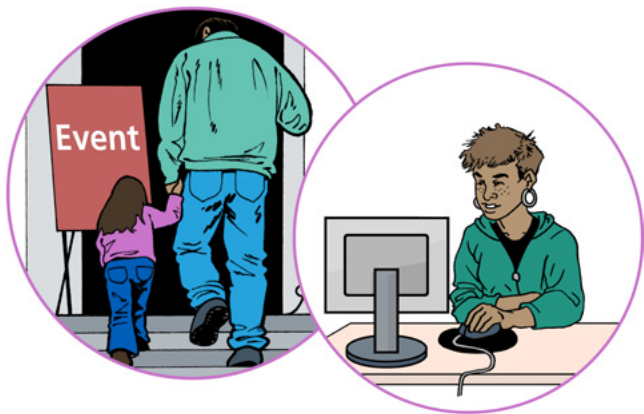


- The consultation will be open from 20th December 2017 to 14th March 2018.

- You can say what you think by filling in an online survey.

[Click here for the full consultation survey](#)

[Click here for the easy read survey](#)



- There will be different face to face and online events. For more information about these please [click here](#)



- You will have a chance to say what you think about these ideas.

Getting the views of people locally



Clinical Commissioning Groups should have a local consultation which could include:



- The Clinical Commissioning Groups' own view on these ideas.



- The outcomes of any local consultation.



- Speaking to local patient groups, community groups, Healthwatch, or the views of the Local Authority.

What happens after the consultation?



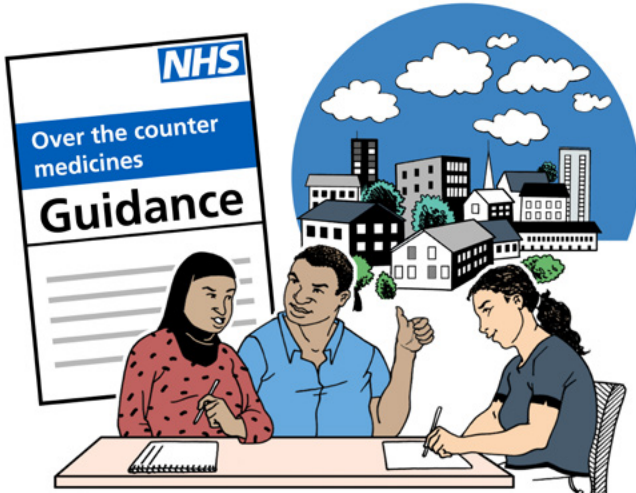
- NHS England will give the responses to these ideas to the Clinical Commissioning Groups to look at.



- Guidance will be written which Clinical Commissioning Groups should read.

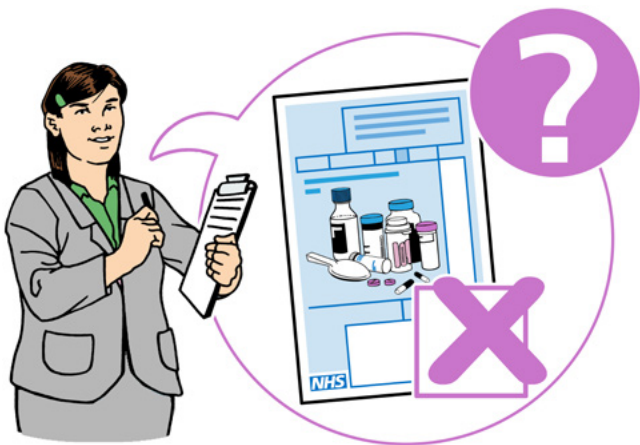


- The Guidance should be ready in April 2018.

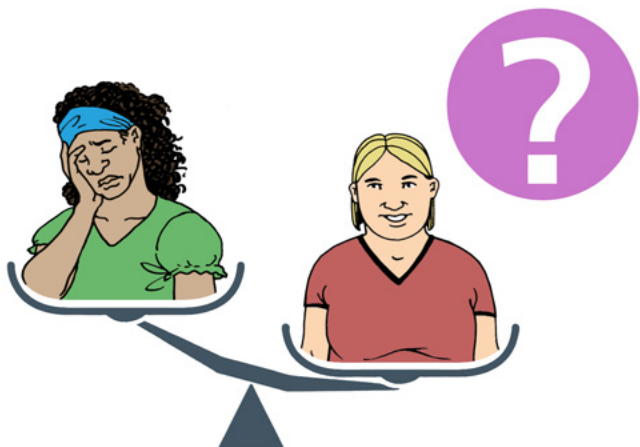


- Clinical Commissioning Groups will decide if they will follow the Guidance in their area.

Questions in the consultation



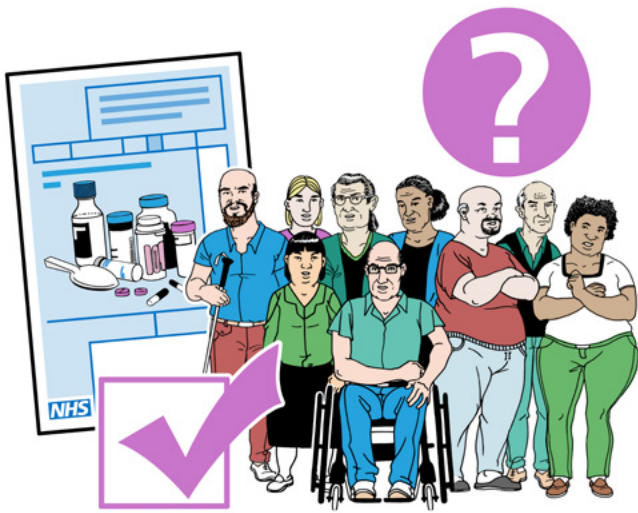
Q. What do you think about prescriptions being stopped for 33 common illnesses?



Q. Do you think that these prescriptions being stopped will affect some people more than others?



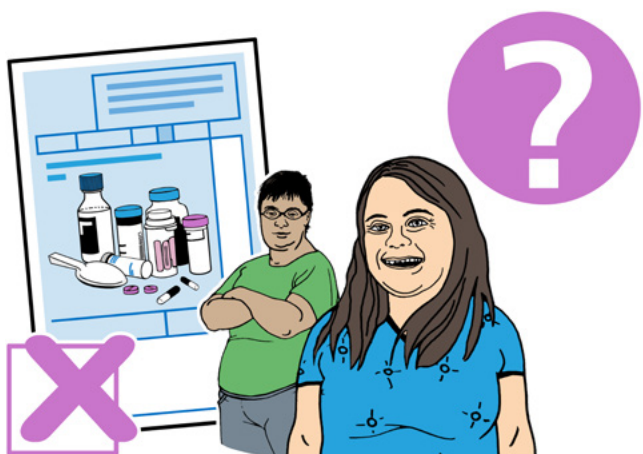
Q. If you have said yes, which groups of people do you think will be most affected?



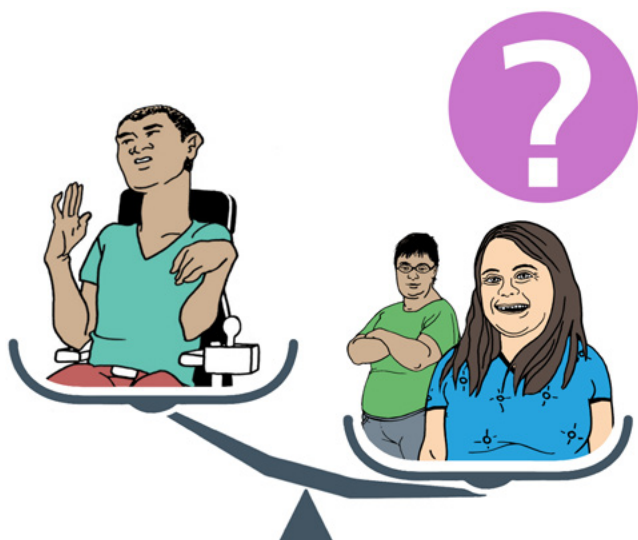
Q. Do you think there are any situations or groups of people who should still be prescribed medicines for these 33 illnesses?



Q. If you have said yes, which are these situations or groups of people who should still be prescribed these medicines?



Q. How do you think these changes will affect people with learning disabilities?



Q. Do you think these changes will affect some people with learning disabilities more than others? For example people with communication needs.

Questions about this consultation



If you have any questions please contact:
england.medicines@nhs.net



Thank you.



This booklet was created by CHANGE to support a national consultation co-ordinated by NHS England and NHS Clinical Commissioners