

565 million reasons...

Last year the NHS spent approximately £569million on prescriptions for medicines for minor conditions, which could have been bought over the counter from a pharmacy, petrol station or supermarket.

Every £1million saved on prescriptions for over the counter treatments could pay for:

- 39 more community nurses;
- 270 more hip replacements;
- 66 more drug treatment courses for breast cancer;
- 1000 more drug treatment courses for Alzheimer's;
- 1040 more cataract operations; or
- 60,000 more GP appointments (excluding admin and practice staff time)

You may find that your doctor or healthcare professional will no longer give you a prescription for a medicine that you can buy over the counter for a minor condition. If you need help to take care of yourself or someone else who uses these medicines, please ask one of our team.

In the year to June 2017, the NHS spent approximately £569 million on prescriptions for medicines for minor conditions, which could have been purchased OTC from a pharmacy or other outlets such as petrol stations or supermarkets. The cost to the NHS for many of the items used to treat minor conditions is often higher than the OTC price as there are hidden costs. For example, a pack of 12 anti-sickness tablets can be purchased for £2.18 from a pharmacy whereas the cost to the NHS is over £3.00 after including dispensing fees. The actual total cost is more than £35 when you include GP consultation and administration costs.

By reducing what we spend on treating conditions that are self-limiting or lend themselves to self-care, we will have more money to spend on high priority areas that have a greater impact for patients, to support improvements in services and to deliver transformation that will ensure the long-term sustainability of the NHS.

What medicines and conditions are we talking about?

The clinical working group developed proposed guidelines for 33 minor and/or self-limiting conditions.

Vitamins/minerals and probiotics have also been included as items with low clinical effectiveness but a high cost to the NHS. These conditions were categorised under three headings:

1. An item of low clinical effectiveness, where there is a lack of robust evidence for clinical effectiveness: probiotics, vitamins and minerals;

2. A condition that is self-limiting and does not require medical advice or treatment as it will clear up on its own: acute sore throat, cold sores, conjunctivitis, coughs and colds and nasal congestion, cradle cap (seborrhoeic dermatitis – infants), haemorrhoids, infant colic, mild cystitis.

3. A condition that is a minor illness and is suitable for self-care and treatment with items that can easily be purchased over the counter from a pharmacy: contact dermatitis, dandruff, diarrhoea (adults), dry eyes/sore tired eyes, earwax, excessive sweating (hyperhidrosis), head lice, indigestion and heartburn, infrequent constipation, infrequent migraine, insect bites and stings, mild acne, mild dry skin/sunburn, mild to moderate hay fever/allergic rhinitis, minor burns and scalds, minor conditions associated with pain, discomfort and fever (such as aches and sprains, headache, period pain, back pain), mouth ulcers, nappy rash, oral thrush, prevention of dental caries, ringworm/athletes foot, teething/mild toothache, threadworms, travel sickness, warts and verrucae.

The consultation was undertaken because CCGs asked for a nationally coordinated, consistent approach to the development of commissioning guidance about the prescribing of over the counter (OTC) medicines. The consultation ran between 20 December 2017 and 14 March 2018. Final commissioning guidance will be published with the expectation that CCGs should 'have regard to' it in accordance with the Health and Social Care Act 2006.