

## WECCG Red List

The General Medical Council Good Medical Practice states 'prescribe drugs or treatment, including repeat prescriptions, only when you have adequate knowledge of the patient's health, and are satisfied that the drugs or treatment serve the patient's needs. It also says provide effective treatments based on the best available evidence'. By prescribing a medication a GP is taking clinical responsibility.

### WHAT IS THE RED LIST?

The Red list contains medicines which have been discussed at the Medicines Optimisation Programme Board/Area Prescribing Committee Stakeholders/Locality and it has been agreed **are not normally recommended for prescribing in primary care**

Medicines may be low priority, because they are not the most clinically or cost effective or for which there are safer alternatives and are **NOT NORMALLY RECOMMENDED ON THE WECCG FORMULARY**

'Specialist Only' medicines should only be prescribed in secondary / tertiary care by or under the supervision of a specialist and will need to be prescribed on an on-going basis by the initiating provider.

***Most GPs should not normally be asked or agree to prescribe these medicines. This is because these treatments require specialist knowledge, monitoring or dose adjustment or they may be used for conditions which GPs rarely encounter.***

Some medicines may be both specialist only (**RED List**) and shared care (**YELLOW List**) depending on the condition they are used to treat.

Medicines listed by NHSE as specialist commissioned services exclusively from secondary/tertiary care are automatically included in the list, e.g. metabolic disorders, specialised services for infectious diseases (tuberculosis, hepatitis, malaria)

Others may be on the specialist only list as they are part of a package of treatment provided by specialists in secondary or tertiary care, e.g. chemo therapy adjuvant therapies, LMWH, erythropoetins, specialised formulas BNF A2.3.1.

Intravenous fluids and anaesthetic agents are all assigned specialist only classification by default, and are not included on the list

Injectable products would generally be specialist only, unless an agreement had been made between the GP and the specialist for an individual patient, as part of an agreed course of treatment where the trained patient / carer or health care professional administers the medicine at home or in the surgery, and/or specifically commissioned for Primary Care prescribing. This should not preclude a GP from use in urgent treatment where oral treatment is not appropriate.

**These recommendations are made without prejudice to established longstanding prescribing and are not intended to disrupt the care of patients already receiving any of the drugs in the list**

| Medicine               | Indication                       | Decision        | Rationale for inclusion in the List   | Circumstances in which GP prescribing might be appropriate |
|------------------------|----------------------------------|-----------------|---|--|
| <b>Updated Monthly</b> |                                  |                 |   |  |
| Abatacept              | All                              | Specialist Only | Under specialist supervision only; affects immune response, monitoring and funding required.  | None Foreseen  |
| Acetazolamide          | Glaucoma and ocular hypertension | Specialist Only | Specialist prescribing only   | None Foreseen  |
| Acitretin Capsules     | Psoriasis                        | Specialist Only | Safety concerns, strict monitoring requirements and restricted availability   | None Foreseen  |
| Actipatch              | Pain                             | Not Recommended | MOPB April 2019 Not recommended for prescribing in Primary Care due to lack of published clinical effectiveness data.                                 | None Foreseen  |
| Adalimumab             | All                              | Specialist Only | Under specialist supervision only; affects immune response, monitoring and funding required.  | None Foreseen  |
| Aflibercept            | Ocular Disorders                 | Specialist Only | Under specialist administration only. Specialist monitoring and funding required  | None Foreseen  |
| Alemtuzumab            | MS                               | Specialist Only | Under specialist supervision only. GP may be invited by Addenbrookes to take bloods as part of Shared Care Guidelines within Near Patient testing LES | None Foreseen  |

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| Alendronate effervescent tablets Binosto® | Osteoporosis when intolerant to gastro-intestinal effects of oral bisphosphonates and only alternative is a parenteral option | Specialist Only | Weak evidence for improving gastric tolerance. Specialist prescribing only. MOPB June 2017. Specialists to audit after 6 months and MOPB to revisit decision Jan 2018   | None Foreseen  |
| Alimemazine                               | Urticaria, Pruritis or Allergic Rhinitis  | Not Recommended | MOPB July 2019 Not recommended for prescribing in primary care as there are more cost effective sedating antihistamines available.  | None Foreseen  |
| Alirocumab                                | All Indications   | Specialist Only | Under specialist supervision only. Prescribed and monitored by specialist, funding required   | None Foreseen  |
| Aliskiren                                 | All Indications   | Not recommended | MOPB Aug 2019 Not recommended for prescribing in primary or secondary care for <b>new patients</b> as its effects on mortality and long term morbidity are currently unknown; NHSE Guidance June 2019                     | Existing patients to be reviewed for appropriateness of treatment with advice and guidance from specialist as needed |
| Alitretinoin Capsules                     | Chronic Hand Eczema   | Specialist Only | Under specialist supervision only, safety issues and specialist funding required.   | None Foreseen  |
| Alprazolam                                | Anxiety   | Not Recommended | Non-formulary for EPUT as high risk of misuse due to rapid onset of action and high potency, and may be more toxic in overdose than other benzodiazepines. Drug Tariff Part XVIII A not to be ordered under GMS contract. | None Foreseen  |

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| Amphetamines mixed (Adderall) | ADHD                                  | Not Recommended | Non-formulary for EPUT as show mixed results in treatment of ADHD, more efficacious than placebo in reducing symptom severity in the short term but didn't improve retention in treatment and were associated with an increased risk of drop out due to adverse events | None Foreseen |
| Anagrelide                    | Reduction of elevated platelet counts | Specialist Only |  | None Foreseen |
| Anakinra                      | All                                   | Specialist Only | Under specialist supervision only as affects immune response. Specialist monitoring and funding required.  | None Foreseen |
| Anti-coagulants               | Hip and Knee Replacement              | Specialist Only | Prescribed by the Specialist as part of a package of care  | None Foreseen |
| Apomorphine                   | All                                   | Specialist Only | Specialist drug requiring specialist knowledge for prescribing and monitoring MOPB Sept 2017   | None Foreseen |
| Apraclonidine                 | Intraocular Pressure                  | Specialist Only | Used to control increases in intra ocular pressure associated with ocular surgery and as short term treatment to reduce intra ocular pressure prior to surgery   | None Foreseen |
| Apremilast                    | All                                   | Specialist Only | Under specialist supervision only. Specialist monitoring and funding required.   | None Foreseen |
| Aprepitant                    | Chemo Induced Nausea                  | Specialist Only | Adjunct to chemotherapy and prescribed within treatment plan   | None Foreseen |

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| Argatroban   | Anticoagulation in adults with heparin-induced thrombocytopenia type II who require parenteral antithrombotic therapy. | Specialist Only       | Continuous infusion requiring daily APTT monitoring SPC  | None Foreseen |
| Aripiprazole injection IM                          | Agitation and disturbed behaviour in schizophrenia   | EPUT prescribers only | RED Formulary for EPUT as used in hospital for the rapid control of an acute episode - BNF   | None Foreseen |
| Armour Thyroid                                     | Hypothyroidism   | Not Recommended       | Amour thyroid is extract from the thyroid of pigs. It is an unlicensed product in the UK which contains differing ratios of T3 relative to T4 than the human thyroid, it is not a pure preparation of thyroid hormones and there have been stability issues. British Thyroid Association | None Foreseen |
| Asenapine (Sycrest)                                | Acute phase Bipolar  | Not Recommended       | Non-formulary for EPUT as place in therapy not yet clear - EPUT  | None Foreseen |
| Bath additives and shower gels                     | All indications  | Not Recommended       | Not recommended, no evidence to support the use of bath additives in children with eczema BMJ 2018;361 MOPB Aug 2018   | None Foreseen |
| Baricitinib  | All indications  | Specialist Only       | Specialist prescribing only in line with NICE recommendations. Monitoring and funding required.  | None Foreseen |
| Basiliximab  | Renal transplant   | Specialist Only       | Under specialist supervision only. Specialist monitoring and funding required.   | None Foreseen |
| Bazedoxifene plus conjugated oestrogens (Duavive®) | Treatment of post-menopausal symptoms in women with a uterus   | Not Recommended       | Insufficient evidence to quantify the risks and benefits against current treatments and the condition /symptoms being treated. No long term safety data and unavailability of information on cost effectiveness and cost impact. MOPB April 2016   | None Foreseen |

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| BCG Vaccine              | Travel purposes          | Not recommended                  | NHS England guidance for items which should not be routinely prescribed in Primary Care advises prescribers in primary care should not initiate the stated vaccines exclusively for the purposes of travel for any new patient. MOPB Jan 2018 | BCG Vaccine may continue to be administered for purposes other than travel, if clinically appropriate. |
| Bevacizumab              | All                      | Specialist Only                  | Under specialist supervision only Specialist monitoring and funding required.   | None Foreseen  |
| Betaine                  | Metabolic disease        | Specialist Only                  | MOPB April 2018 Hospital only prescribing requires specialist prescribing and monitoring  | None Foreseen  |
| Bosentan                 | All                      | Specialist Only                  | Specialised commissioning by NHSE from secondary or tertiary care   | None Foreseen  |
| Botulinum Toxin A and B  | All                      | Specialist Only                  | Specialist use only. Specialist administration and funding required.  | None Foreseen  |
| Brimonidine 0.5% gel     | Acne Rosacea             | Specialist Only, including GPwSI | MOPB June 17 not recommended for prescribing in Primary Care as limited evidence, safety concerns and cosmetic effect   | None Foreseen  |
| Brodalumab               | All                      | Specialist Only                  | Under specialist supervision only; affects immune response, monitoring and funding required.  | None Foreseen  |
| Budesonide (Jorveza@)    | Eosinophilic esophagitis | Specialist Only                  | Undergoing NICE evaluation process therefore specialist prescribing only until outcome of the TA is known   | None Foreseen  |
| Budesonide (Cortiment ®) | Ulcerative Colitis       | Specialist Only                  | Specialist prescribing only as a short course required and bridging to immunosuppressant may be required. MOPB Jan 17   | None Foreseen  |

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|---|-------------------|-----------------|---|---------------|
| Buprenorphine oral lyophilisate (Espranor®) | All               | Not Recommended | Similar clinical outcomes and adverse effects as sublingual buprenorphine. Non-formulary for EPUT. MOPB 2017  | None Foreseen |
| Buprenorphine 3 day patches                 | All               | Not Recommended | Due to incidents which have occurred nationally, for safety reasons buprenorphine 3 days patches are not recommended for prescribing in Primary or Secondary Care MOBP July 2017  | None Foreseen |
| Buprenorphine (Buvidal ®)                   | All               | Specialist Only | GPs to be aware that EPUT specialists may prescribe long acting subcutaneous buprenorphine injections for treatment of opioid dependence within a framework of medical, social and psychological treatment. Treatment is intended for use in adults and adolescents aged 16 years and over. | None Foreseen |
| Carglumic acid                              | Metabolic disease | Specialist Only | MOPB April 2018 Hospital only prescribing requires specialist prescribing and monitoring  | None Foreseen |
| Ceftriaxone IV                              | Infections        | Specialist Only | Patient@Home will prescribe and monitor if long term antibiotic are required. District Nurses have agreed to administer under shared care. MOPB Nov 2018  | None Foreseen |
| Certolizumab                                | All               | Specialist Only | Under specialist supervision only; affects immune response, monitoring and funding required.  | None Foreseen |
| Chemotherapy (oral and IV)                  | Cytotoxic Drugs   | Specialist Only | Under specialist supervision only. Specialist monitoring and funding required.  | None Foreseen |

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| Chlorpromazine injection (Largactil and generic) | Antipsychotic  | Not Recommended       | Non-formulary for EPUT as erratic unpredictable absorption. Cardiac risk - EPUT  | None Foreseen   |
| Cilostazol                                       | Intermittent claudication in people with peripheral arterial disease | Not Recommended       | NICE TA 223 May 2011 does not recommend the use of cilostazol for this indication  | None Foreseen   |
| Cinacalcet                                       | Primary hyperparathyroidism  | Specialist Only       | Not recommended for prescribing or monitoring in Primary Care, requires specialist knowledge. MOPB Sept 2017   | None Foreseen   |
| Ciprofibrate                                     | All indications  | Not Recommended       | Not recommended for prescribing in primary or secondary care. Same proven efficacy but less cost effective compared with other fibrates. MOPB December 2018.               | None Foreseen   |
| Clomifene  | All indications  | Specialist only       | MOPB December 2018. Specialist use only requires specialist monitoring   | None Foreseen   |
| Clonidine  | Attention deficit hyperactivity disorder                             | Not Recommended       | MOPB April 2019 Not recommended for prescribing in Primary Care due to lack of published clinical effectiveness data, off label indication and highly specialist medicine. | None Foreseen   |
| Clozapine  | Treatment resistant schizophrenia                                    | EPUT prescribers only | Neutropenia, potentially fatal agranulocytosis, cardiomyopathy and GI obstruction reported   | Patients with learning difficulties or those who have difficulty in accessing the Clozapine clinics or services. Shared Care to be agreed with GP |
| Collagenase clostridium histolyticum             | Dupuytren's contracture  | Specialist Only       | Specialist prescribed only in line with NICE TA 459, requires specialist funding   | None Foreseen   |



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|  | Peyronies Disease                               | Not Recommended | Not routinely commissioned for Peyronies Disease as limited evidence for effectiveness. Funding and specialist monitoring required.                       | None Foreseen |
| Colistimethate sodium dry powder for inhalation (Colobreathe®) | Cystic fibrosis                                 | Specialist Only | GP prescribing of Colobreathe® not normally recommended as Patient Access Scheme not available in primary care. NHSE                                      | None Foreseen |
| Colesevelam  | Primary hypercholesterolaemia                   | Not recommended | NICE CG181: do not offer bile acid sequestrants. MOPB February 2019   | None Foreseen |
| Co-careldopa intestinal gel (Duodopa)                          | Drugs used in parkinsonism and related disorder | Specialist Only | Specialist use only, funding required   | None Foreseen |
| Co-proxamol  | Analgesic                                       | Not Recommended | Highly toxic in even small overdoses. The MHRA has withdrawn the marketing authorisation for co-proxamol due to the poor risk/benefit profile of the drug | None Foreseen |
| Cyanocobalamin IM  | Vitamin B12 deficiency                          | Not Recommended | MOPB August 2019 Where Vitamin B12 is indicated, NHS West Essex commissions Hydroxocobalamin.   | None Foreseen |
| Cyanocobalamin oral  | Vitamin B12 deficiency                          | Not Recommended | MOPB August 2019 West Essex CCG does not commission Maintenance or Preventative vitamin and mineral supplementation.                                      | None Foreseen |

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| Cystistat                          | Recurrent UTI or painful bladder                                    | Specialist Only | Addenbrookes DTC Dec 2014 agreed specialist prescribing and administration only  | None Foreseen   |
| Dapoxetine                         | Premature Ejaculation   | Not Recommended | MOPB August 2019 Not recommended for prescribing in primary and secondary care as evidence base supporting its use consists of low quality short term trials, it is higher cost than alternative treatments and no NHS cost-effectiveness analysis is available. | None Foreseen   |
| Dapsone                            | All indications   | Specialist only | MOPB April and October 2018, high risk drug requires specialist support to prescribe and monitor   | None Foreseen   |
| Darbepoetin Alfa                   | Anaemia in people with Chronic Kidney Disease. NICE NG8 (June 2015) | Specialist Only | Under specialist supervision only. Specialist monitoring and funding required.   | None Foreseen   |
| Deferasirox                        | Anaemia   | Specialist Only | Under specialist supervision only. Specialist monitoring and funding required.   | None Foreseen   |
| Deferiprone                        | Anaemia   | Specialist Only | Under specialist supervision only. Specialist monitoring and funding required.   | None Foreseen   |
| Denosumab                          | All indications   | Specialist Only | Under specialist supervision only. Specialist monitoring and funding required.   | Only if under transfer of care guidance or shared care guidance – in line with NICE TA 204 and locally agreed for males July 2016 |
| Desferrioxamine                    | Anaemia   | Specialist Only | Under specialist supervision only. Specialist monitoring and funding required.   | None Foreseen   |
| Dexamethasone Intravitreal implant | All indications   | Specialist Only | Specialist administration, monitoring and funding required   | None Foreseen   |
| Dibotermin                         | Bone morphogenic protein  | Specialist Only | Used during orthopaedic surgery  | None Foreseen   |

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| Dicycloverine hydrochloride                | Antimuscarinics                  | Not Recommended | Dicycloverine is not recommended for prescribing as it is poorly selective, more likely to cause anti-muscarinic adverse effects and there are lower cost alternatives with relatively fewer adverse effects. Non-formulary for EPUT as toxic in overdose. Cardiotoxic. Except existing patients with no contra-indications. Alternatives include lofepramine, amitriptyline, trazodone mirtazepine. Not recommended in NICE CG 90 2010 | None Foreseen  |
| Dimethyl fumarate                          | All indications                  | Specialist only | Under specialist supervision only. Specialist monitoring and funding required.  | None Foreseen  |
| Domperidone                                | Use in children                  | Specialist Only | MOPB Sept 2019 Domperidone should only be prescribed for children by a specialist, and only if the benefits of using domperidone outweigh the risks of the cardiac adverse events.  | None Foreseen  |
| Dosulepin, Dothiepin (formerly Prothiaden) | Antidepressant                   | Not Recommended | Non-formulary for EPUT as toxic in overdose. Cardiotoxic. Except existing patients with no contra-indications. Alternatives include lofepramine, amitriptyline, trazodone mirtazepine. Not recommended in NICE CG 90 2010   | Existing patients with no contra indications - continuing care guidance to be used |
| Doxazocin MR tablets                       | All indications                  | Not Recommended | No evidence of additional benefit over immediate release tablets and both are administered once daily. MOPB August 2017   | None Foreseen  |
| Doxylamine and pyridoxine                  | Nausea and vomiting in pregnancy | Not recommended | Prescribing of doxylamine plus pyridoxine (Xonvea®) for nausea and vomiting in pregnancy is NOT recommended in primary or secondary care. MOPB November 2018  | None Foreseen  |

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| Dupilumab           | Atopic Dermatitis   | Specialist Only | Under specialist supervision only; affects immune response, monitoring and funding required.   | None Foreseen |
| E-caps (vitamin E)  | All indications   | Not Recommended | Lower cost vitamin E products available MOPB May 2018  | None Foreseen |
| Eculizumab          | Anaemia   | Specialist Only | Under specialist supervision only. Specialist monitoring and funding required.   | None Foreseen |
| Eltrombopag         | ITP NICE TA 205 Oct 2010  | Specialist Only | Under specialist supervision only. Specialist monitoring and funding required.   | None Foreseen |
| Eluxadoline         | All indications   | Specialist Only | Specialist prescribing only in line with NICE recommendations for the management of IBS. Refer to IBS guidelines.  | None Foreseen |
| Enoxaparin          | All   | Specialist Only | Usually prescribed as part of a package of care from secondary care  | None Foreseen |
| Ensure Plus Advance | All   | Not Recommended | Not recommended for prescribing due to limited evidence to support its use over and above the cost effective products currently approved for use in West Essex. MOPB Sept 17 | None Foreseen |
| Entecavir           | Chronic Hepatitis B infection                                       | Specialist Only | Under specialist supervision only. Specialist monitoring and funding required.   | None Foreseen |
| Epoetin             | Anaemia in people with Chronic Kidney Disease. NICE NG8 (June 2015) | Specialist Only | Under specialist supervision only. Specialist monitoring and funding required.   | None Foreseen |

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| Erlotinib                           | All   | Specialist Only | Under specialist supervision only. Specialist monitoring and funding required.   | None Foreseen  |
| Ertapenem                           | Infections  | Specialist Only | Patient@Home will prescribe and monitor if long term antibiotic are required. District Nurses have agreed to administer under shared care. MOPB Nov 2018   | None foreseen  |
| Erythropoietin                      | Anaemia in people with cancer having chemotherapy NICE TA 323 November 2014 | Specialist Only | Under specialist supervision only. Specialist monitoring required.   | None Foreseen  |
| Etanercept                          | All   | Specialist Only | Under specialist supervision only; affects immune response, monitoring and funding required.   | None Foreseen  |
| Ethambutol                          | Tuberculosis  | Specialist Only | Under specialist supervision only. Specialist monitoring required  | None Foreseen  |
| Ethosuximide                        | Epilepsy  | Not Recommended | Supply difficulties. Existing patients to be reviewed by specialist care   | None foreseen, refer existing patients back to specialist care |
| Evolocumab                          | All indications   | Specialist Only | Under specialist supervision only. Prescribed and monitored by specialist, funding required  | None Foreseen  |
| Fentanyl transdermal system lonsys® | Analgesia   | Not Recommended | Only licensed for use in hospitals registered with the REMS safety programme and patients who are alert enough and have adequate cognitive ability to understand the directions for use. Staff and patients must have suitable training prior to use.<br>Device must be removed from patient before they leave the hospital. MOPB April 2016 | None Foreseen  |

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| Fentanyl IR products                        | All  | Not recommended. May only be prescribed by the palliative care specialist at the hospice in exceptional circumstances | Included within NHS England consultation for medicines regarded low priority as they lack robust evidence for clinical effectiveness, they are poor value for money or they are medicines for which there are safer alternatives. Licensed only for breakthrough pain in adult patients using maintenance opioid therapy for chronic cancer pain. According to NICE, it should not be offered as first line rescue medication (a NICE Do Not Do Recommendation). It is contraindicated in the management of acute or postoperative pain. Use outside of the licence has patient safety implications and should not be initiated. MOPB Sept 2017 | None Foreseen                                 |
| Ferric Maltol (Ferracru 30mg hard capsules) | ALL  | Not recommended   | MOPB January 2018- Not recommended for prescribing in primary and secondary care.   | None Foreseen                                 |
| Fibrinolytics                               | All  | Specialist Only   | Specialist diagnosis and monitoring required  |   |
| Fidaxomicin                                 | First and subsequent <b>recurrence</b> of C.diff Infection | Specialist decision to prescribe only   | Prescribing on recommendation of Consultant Microbiologist only. (MOPB Nov 15)  | Only after recommendation from Microbiologist |
| Filgrastim                                  | Neutropenia  | Specialist only   | Under specialist supervision only. Specialist monitoring and funding required. Part of chemo package of care  | None Foreseen                                 |
| Finasteride                                 | Androgenetic alopecia in men                               | Not recommended   | Finasteride is not prescribable under the NHS for treatment of androgenetic alopecia in men   | None Foreseen                                 |

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| Fingolimod                                  | MS                                     | Specialist Only                      | Under specialist supervision only. Specialist monitoring and funding required.  | None Foreseen |
| Fluocinolone Intravitreal implant (Iluvien) | All indications                        | Specialist Only                      | Under specialist administration only. Specialist monitoring and funding required.   | None Foreseen |
| Fluorouracil 5% cream (Efudix®)             | Actinic Keratosis                      | Specialist or GPwSI Dermatology only | Training required for diagnosis and management MOPB Sept 2017   | None Foreseen |
| Flurazepam (formerly Dalmane)               | Insomnia                               | Not recommended                      | Non-formulary for EPUT as hypnotic of misuse and not to be prescribed in GMS contract as Drug Tariff Part XVIII A   | None Foreseen |
| Fondaparinux                                | Anti-Coagulant                         | Specialist Only                      | Specialist use only as part of a package of care and monitoring required  | None Foreseen |
| Fomepizole                                  | Ethylene glycol and methanol poisoning | Specialist Only                      | Emergency medicine  | None Foreseen |
| Fulvestrant                                 | Licensed Indications                   | Not recommended                      | NICE TA 239 Dec 2011 does not recommended its use   | None Foreseen |
| Gemfibrozil                                 | All indications                        | Not recommended                      | Not recommended for prescribing in primary or secondary care. Patient safety concerns - myositis and rhabdomyolysis. Same proven efficacy but less cost effective compared with other fibrates. MOPB December 2018. | None Foreseen |
| Ginkgo Biloba                               | Alzheimer's disease                    | Not recommended                      | Non-formulary EPUT. Not available on NHS. Risk of cerebral haemorrhage.   | None Foreseen |
| Glatiramer                                  | MS                                     | Specialist Only                      | Under specialist supervision only. Specialist monitoring and funding required.  | None Foreseen |

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| Glucodrate®                   | All indications                 | Not recommended | Evidence does not support the use of Glucodrate® oral powder sachets MOPB June 2017. Withdrawn from the market Feb 2018 due to biochemical irregularities MOPB 1 March 2018 | None Foreseen |
| Glucose Urine Test Strips     | Diabetes                        | Not recommended | MOPB May 2018 The prescribing of glucose strips for urinalysis is not recommended   | None Foreseen |
| Glucosamine & Chondroitin     | All indications                 | Not recommended | No strong evidence of efficacy and a NICE “Do not do” recommendation. Widely available over the counter. MOPB August 2017   | None Foreseen |
| Glycopyrronium Bromide Powder | Inotophoresis for hyperhidrosis | Specialist Only | NHS West Essex Dermatology Formulary, specialist funding required   | None Foreseen |
| Glycopyrronium Bromide oral   | All                             | Not recommended | Not normally recommended for prescribing in Primary or Secondary Care as it is very expensive and there are alternative cost effective medicines available. MOPB Jan 17     | None Foreseen |
| Golimumab                     | All                             | Specialist Only | Under specialist supervision only; affects immune response, monitoring and funding required.  | None Foreseen |



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| Grazax                | Grass Pollen Allergy                                      | Not recommended       | Oral lyophilisate Grazax® is not recommended for prescribing in Primary Care for disease-modifying treatment of grass pollen induced rhinitis and conjunctivitis in adults and children (5 years or older), with clinically relevant symptoms and diagnosed with a positive skin prick test and/or specific IgE test to grass pollen. (licensed indication SPC) It should only be prescribed by a specialist at a highly specialist centre including outreach when delivered as part of a provider network. | None Foreseen  |
| Guselkumab            | All   | Specialist Only       | Under specialist supervision only; affects immune response, monitoring and funding required.  | None Foreseen  |
| Guanfacine            | All indications   | Not recommended       | Non-formulary for EPUT. Decision confirmed MOPB Nov 2016  | None Foreseen  |
| Haloperidol injection | Antipsychotic   | EPUT prescribers only | RED formulary for EPUT as patients should have ECG before use. Alternatives for community include risperidone quicklets, olanzapine velotabs  | None Foreseen  |
| Heparinised saline    | Maintaining patency of Central Venous Catheters in Adults | Not recommended       | RMOC Feb 2019 and MOPB Feb 2019: Heparinised saline should not be prescribed in primary care for maintaining patency of Central Venous Catheters in Adults.   | None forseen   |
| Hepatitis B Vaccine   | Travel purposes   | Not recommended       | NHS England guidance for items which should not be not routinely prescribed in Primary Care advises prescribers in primary care should not initiate the stated vaccines exclusively for the purposes of travel for any new patient. MOPB Jan 2018   | Vaccine may continue to be administered for purposes other than travel, if clinically appropriate. |

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| Herbal supplements | All indications | Not recommended | There is a limited evidence base and a lack of robust randomised controlled trials directly comparing these products with standard treatments. Some are also associated with severe adverse effects; they may significantly interact with other medicines and can delay accurate diagnosis of underlying pathology. None reviewed by NICE recommend their use. These items are not licensed Drugs under the Medicines Act, so there is no approved summary of product characteristics (SmPC) for prescribers to consult. (N.B. prescribers are only indemnified by a drug company if there is an SmPC and if the drug is used within licensed indications). This concurs with the CCG OTC guidance: Treatment of Unproven Value , Guidance on OTC prescribing | None Foreseen |
| Hepatitis therapy  | Hepatitis       | Specialist Only | Specialist commissioning by NHSE for specialist centres only  | None Foreseen |
| HIV treatments     | HIV Infections  | Specialist Only | Specialist commissioning by NHSE for specialist centres only  | None Foreseen |

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|------------------------------------|----------------------------------|---------------------------|---|---------------|
| Homeopathy                         | All Indications                  | Not recommended           | There is a limited evidence base and a lack of robust randomised controlled trials directly comparing these products with standard treatments. Some are also associated with severe adverse effects; they may significantly interact with other medicines and can delay accurate diagnosis of underlying pathology. None reviewed by NICE recommend their use. These items are not licensed Drugs under the Medicines Act, so there is no approved summary of product characteristics (SmPC) for prescribers to consult. (N.B. prescribers are only indemnified by a drug company if there is an SmPC and if the drug is used within licensed indications). This concurs with the CCG OTC guidance: Treatment of Unproven Value , Guidance on OTC prescribing | None Foreseen |
| Hyaluronic acid eg Synvisc®        | Intra-articular Injection        | Not recommended           | NICE 'do not do' Clinical Guidelines 177, MOPB June 2017. The prescribing of intra-articular injections of hyaluronic acid and its derivatives for osteoarthritis is not supported.   | None Foreseen |
| Hydrocortisone granules (Alkindi®) | All indications                  | Not recommended           | MOPB Oct 2019 not recommended for prescribing in primary or secondary care until a full evaluation of the product has been undertaken either regionally or nationally.  | None Foreseen |
| iAluril                            | Recurrent UTI or painful bladder | Specialist Only           | Addenbrookes DTC Dec 2014 agreed specialist prescribing and administration only   | None Foreseen |
| Imiquimod cream                    | All indications                  | GPwSI and Specialist only | Under specialist supervision only. Also see actinic keratosis guidelines MOPB August 2017   | None Foreseen |

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|---------------------|--|-----------------|---|---------------|
| Immunoglobulins     | Immunoglobulin   | Specialist Only | DoH Clinical Guidelines for the use of IVIGs Aug 2011, prescribing is within secondary/tertiary care only.  | None Foreseen |
| Infliximab          | All indications  | Specialist Only | Under specialist supervision only; affects immune response, monitoring and funding required.  | None Foreseen |
| Inositol nicotinate | Intermittent claudication in people with peripheral arterial disease | Not recommended | NICE TA 223 May 2011 does not recommend the use of inositol nicotinate for this indication  | None Foreseen |
| Insulin pumps       | Diabetes Type 1  | Specialist Only | NICE TA 151 July 2008 advises initiation and education of insulin pump by specialist only. Specialist funding required. Insulin used within the pump is prescribable by GPs | None Foreseen |
| Interferon Alfa-2B  | All indications  | Specialist Only | Under specialist supervision only. Specialist monitoring and funding required   | None Foreseen |
| Interferon Beta     | All indications  | Specialist Only | Under specialist supervision only. Specialist monitoring and funding required   | None Foreseen |
| Interferon gamma    | All indications  | Specialist Only | Under specialist supervision only. Specialist monitoring and funding required   | None Foreseen |
| Iron, parenteral    | Anaemia  | Specialist Only | MHRA – serious hypersensitivity reactions, including life-threatening and fatal anaphylactic reactions have been reported   | None Foreseen |
| Isocarboxazid       | Antidepressant MAOI  | Not recommended | Non-formulary for EPUT as risk of postural hypotension and hepatotoxicity - BNF   | None Foreseen |
| Isoniazid           | Tuberculosis   | Specialist Only | Under specialist supervision only. Specialist monitoring required   | None Foreseen |

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| Isotretinoin Capsules          | Acne               | Specialist Only | NHS West Essex Dermatology Formulary - Safety concerns, strict monitoring requirements and restricted availability  | None Foreseen  |
| IVF drugs for private patients | Infertility        | Specialist Only | If the patient does not meet the criteria for NHS IVF treatment then the whole treatment is private and the drugs cannot be prescribed on the NHS. Where NHS funds IVF, all drugs to be provided by specialists as part of a package of care. | None Foreseen  |
| Ixekizumab                     | All                | Specialist Only | Under specialist supervision only; affects immune response, monitoring and funding required.  | None Foreseen  |
| Japanese Encephalitis Vaccines | Travel purposes    | Not recommended | NHS England guidance for items which should not be routinely prescribed in Primary Care advises prescribers in primary care should not initiate the stated vaccines exclusively for the purposes of travel for any new patient. MOPB Jan 2018 | Vaccine may continue to be administered for purposes other than travel, if clinically appropriate. |
| Ketorolac                      | Eye drops          | Specialist Only | Licensed for 3 weeks post cataract complete course to be provided by secondary care.  | None Foreseen  |
| L-arginine                     | Metabolic disease  | Specialist Only | MOPB April 2018 Hospital only prescribing requires specialist prescribing and monitoring  | None Foreseen  |
| Lanthanum                      | Hyperphosphataemia | Specialist Only | Under specialist supervision only. Specialist monitoring and funding required   | None foreseen. Barts Health have a shared care agreement with local CCGs                           |

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| Lanreotide                    | All  | Specialist Only | Lanreotide is not recommended for prescribing in Primary Care for: Acromegaly & Cancer<br>As no shared care has been agreed by West Essex MOPB. Lanreotide for congenital hyperinsulinism specialist prescribing only. | None Foreseen |
| Lenalidomide                  | All  | Specialist Only | Under specialist supervision only as safety concerns BNF. Specialist monitoring and funding required   | None Foreseen |
| Lenograstim                   | Neutropenia                                | Specialist Only | Under specialist supervision only. Specialist monitoring and funding required. Part of chemo package of care.  | None Foreseen |
| Lesinurad                     | Hyperuricaemia                             | Not recommended | NICE TA 506 does not recommend the use of lesinurad for treating hyperuricaemia in adults with gout. MOPB 1 March 2018   | None foreseen |
| Levocarnitine                 | Metabolic disease                          | Specialist Only | MOPB April 2018 Hospital only prescribing requires specialist prescribing and monitoring   | None Foreseen |
| Levosert®<br>(Levonorgestrel) | Contraception and Heavy Menstrual Bleeding | Not recommended | MOPB October 2018. Non-formulary due to size and licenced indication compared to products already on formulary.  | None foreseen |
| Lidocaine patches             | Localised neuropathic pain                 | Not recommended | Not recommended for localised neuropathic pain. Prescribing should be restricted to patients with postherpetic neuralgia, in whom alternative treatments are ineffective or contraindicated. MOPB August 2017          | None Foreseen |
| Linezolid                     | Antibiotic                                 | Specialist Only | Microbiologist recommendation only. Requires monitoring and safety concerns – blood disorders and optic neuropathy. Specialist to prescribe complete course. BNF   | None Foreseen |

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| Liraglutide (Saxenda®)        | Obesity                            | Not recommended       | NOT RECOMMENDED for prescribing as insufficient evidence in relation to long term efficacy and long term safety and safety concerns regarding serious adverse effects including pancreatitis. MOPB May 16   | None Foreseen                              |
| Liothyronine                  | Hypothyroidism                     | Not recommended       | NOT RECOMMENDED for prescribing in primary and secondary care. Liothyronine should not be initiated in Primary Care. Patients currently prescribed liothyronine should be reviewed by a consultant NHS endocrinologist with consideration given to switching to levothyroxine where clinically appropriate. MOPB Jan 2018 | None Foreseen                              |
| Lofexidine                    | Opioid dependence NICE CG 52, 2008 | EPUT prescribers only | RED formulary for EPUT cardiac monitoring required, used by specialists in opioid dependence only. BNF  | GPs with special interest in mental health |
| Low molecular weight heparins | All indications                    | Specialist Only       | Prescribed as part of a package of care from secondary /tertiary care   | None Foreseen                              |
| Lurasidone                    | All indications                    | Not recommended       | Non-formulary EPUT. Decision confirmed MOPB Nov 2016  | None Foreseen                              |

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| Lutein and antioxidant vitamins | Age Related Macular Degeneration          | Not recommended | Evidence suggests there is little benefit from using lutein and other oral anti-oxidant vitamin supplements for the prevention of Age Related Macular Degeneration, In some people there is a possibility these supplements could lead to harm. Patients should be advised to eat a healthy diet including plenty of dark green leafy vegetables such as kale and spinach, oily fish and plenty of fruit. The Macular Society leaflet provides more information on dietary sources. if desired, should be obtained by purchasing products over the counter. The products are not licensed medicines and are classed as food supplements. Lutein and antioxidant vitamins are not suitable for some groups of patients, i.e. beta carotene has been found to increase the risk of lung cancer in smokers. This concurs with the CCG OTC guidance: Guidance on OTC prescribing , and Treatment of Unproven Value | None Foreseen                  |
| Malaria prophylaxis             | Travel purposes                           | Not Recommended | Not reimbursable under the NHS   | Provide a private prescription |
| Mecasermin                      | Somatomedins                              | Specialist Only | Specialist commissioning by NHSE for specialist centres only as monitoring and funding required  | None Foreseen                  |
| Melatonin                       | Short-term treatment of jet-lag in adults | Not Recommended | MOPB July 2019 Not recommended for prescribing in primary and secondary care as its use is outside of the NHS service (GMC contract).  | None Foreseen                  |



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| Meningitis ACWY Vaccine          | Travel purposes  | Not recommended | NHS England guidance for items which should not be routinely prescribed in Primary Care advises prescribers in primary care should not initiate the stated vaccines exclusively for the purposes of travel for any new patient. MOPB Jan 2018 | Vaccine may continue to be administered for purposes other than travel, if clinically appropriate. |
| Meprobamate                      | Anxiety  | Not Recommended | Non-formulary for EPUT as less effective than benzodiazepines, more hazardous in overdose and can induce dependence - BNF   | None Foreseen  |
| Metabolic disease medicines      | Metabolic disease  | Specialist only | MOPB April 2018 Hospital only prescribing requires specialist prescribing and monitoring  | None foreseen  |
| Methadone injection (Physeptone) | Opioid Dependence  | Not Recommended | Non-formulary for EPUT - liquid preferred formulation   | Refer to local CDAT  |
| Methadone tablet (Physeptone)    | Opioid Dependence  | Not Recommended | Non-formulary for EPUT - liquid preferred formulation   | Refer to local CDAT.   |
| Methocarbamol                    | Short-term adjunct to the symptomatic treatment of acute musculoskeletal disorders associated with painful muscle spasms | Not Recommended | MOPB July 2019 Not recommended for prescribing in primary and secondary care as it is not included within nationally nor locally approved pathways.   | None Foreseen  |
| Methotrexate 10mg tabs           | All indications  | Not Recommended | Safety to ensure strengths are not confused. Only prescribe 2.5mg tablets   | None Foreseen  |

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| Methylnaltrexone                    | All indications      | Palliative Care Only | NICE TA 277 not recommended for treating opioid-induced bowel dysfunction. MOPB March 2016.<br>Palliative Care formulary update Sept 16, under special circumstances and with support Palliative Care Consultant may invite GP to prescribe | Only if requested by the Palliative Care Consultant, under special circumstances and with support |
| Methyl Aminolevulinate Cream or gel | Photodynamic Therapy | Specialist Only      | NHS West Essex Dermatology Formulary – used in specialist centres in combination with photodynamic therapy.   | None Foreseen   |
| 5-Methoxypsoralen                   | Psoriasis            | Specialist Only      | NHS West Essex Dermatology Formulary - used in specialist centres in combination with photodynamic therapy.   | None Foreseen   |
| 8-Methoxypsoralen                   | Psoriasis            | Specialist Only      | NHS West Essex Dermatology Formulary- used in specialist centres in combination with photodynamic therapy.  | None Foreseen   |
| Mexiletine                          | All indications      | Specialist only      | MOPB March 2019 - there is not enough evidence base at present to be added to formulary.  | None Foreseen   |
| Mianserin (formerly Bolvidon)       | Antidepressant       | Not recommended      | Non-formulary for EPUT due to the risk of agranulocytosis BNF   | None Foreseen   |
| Minocycline                         | Acne                 | Not recommended      | NHS West Essex Dermatology Formulary- not normally recommended due to greater risk of lupus erythematosus-like syndrome, and can cause irreversible pigmentation BNF  | None Foreseen   |
| Nalmefene                           | Alcohol Dependence   | Specialist Only      | Refer patient for psychosocial counselling services (provided by ADAS in West Essex)  | Awaiting outcome from ECC   |

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| Naloxone pre-filled syringe (Prenoxad®) | Emergency use in the home or other non-medical setting by appropriate individuals or in a health facility setting for the complete or partial reversal of respiratory depression induced by natural and synthetic opioids. | Supplied by Essex STaRS only | Do not prescribe in Primary Care. Essex STaRS Substance Misuse Services have been trained to issue take home naloxone kits and are authorised to train service users in overdose management.   | None Foreseen  |
| Naltrexone and Bupropion (Mysimba®)     | Obesity  | Not recommended              | Limited efficacy, insufficient evidence in relation to long term safety and efficacy. Specific safety concerns regarding adverse effects including cardiovascular effects and potential for seizures. Unavailability of information on cost effectiveness and cost impact. MOPB April 2016, NICE TA 494. | None Foreseen  |
| Natalizumab                             | MS   | Specialist Only              | Under specialist supervision only. Specialist monitoring and funding required  | None Foreseen  |
| Natamycin eye drops                     | All indications  | Specialist only              | MOPB April 2018 Hospital only prescribing requires specialist prescribing and monitoring   | None Foreseen  |
| NHS England commissioned drug           | All indications stated   | Specialist Only              | Specialist monitoring prescribing and funding required.<br><a href="#">For complete up to date list please see the NHS England Drugs List.</a>   | None foreseen except if approved shared care agreement in place for drugs and indications listed as suitable on the drug list. |
| Nitisinone                              | Metabolic disease  | Specialist Only              | MOPB April 2018 Hospital only prescribing requires specialist prescribing and monitoring   | None Foreseen  |

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| Nitrazepam                                | Insomnia               | Not recommended | Non-formulary for EPUT as long half-life, muscle relaxant, increases reaction time, leads to falls in elderly /debilitated. EPUT | Review existing patients. Refer to Trust 'Guidance for Medicines for sleeplessness' for planned withdrawal/change to shorter-acting drug. |
| Noqdirna®                                 | All indications        | Not recommended | MOPB April 2018 not to be prescribed in primary or secondary care until evaluated at MOPB  | None foreseen   |
| Ocriplasmin                               | Vitreomacular traction | Specialist Only | Under specialist administration only. Specialist monitoring and funding required   | None Foreseen   |
| Octreotide                                | All                    | Specialist Only | Specialist commissioning by NHSE for specialist centres only as monitoring required and prescribed as part of a package of care  | None Foreseen   |
| Olanzapine embonate long acting injection | Antipsychotic          | Not recommended | Non-formulary for EPUT as requires high level of monitoring in inpatient conditions EPUT   | None Foreseen   |
| Omalizumab                                | All Indications        | Specialist Only | Under specialist supervision only. Specialist monitoring and funding required  | None Foreseen   |

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| Omega 3 fatty acids and other fish oils | All indications | Not recommended | <p>There are no good quality data for the use of omega 3 fish oils in prevention of dementia, premenstrual syndrome, attention-deficit hyperactivity disorder (ADHD), atrial fibrillation, eczema, osteoarthritis or age related macular degeneration. NICE guidance recommends against prescribing omega-3 fatty acids for the primary prevention of coronary heart disease. Use in patients with schizophrenia is unlicensed and should be reviewed in conjunction with a specialist with a view to stopping prescribing if no benefit has been achieved. Patients should be advised to increase their dietary intake of omega-3 fatty acids.</p> <p>Details available online: Treatment of Unproven Value</p> | None Foreseen  |
| ONS pudding and desserts                | All indications | Not recommended | <p>ONS puddings and desserts should not be routinely initiated in primary care. Equivalent nutrition is widely available over the counter in shop bought puddings/ desserts, or for patients meeting ACBS criteria, more cost effectively from powdered/ ready to drink liquid ONS. MOPB 17</p>  | <p>These products should only be prescribed if the patient:</p> <p>Has, or is at high risk of malnutrition<br/> <b>AND</b><br/> Has been assessed by a Speech and Language Therapist (SLT) as having dysphagia rendering more cost effective ONS unsafe to thicken<br/> <b>AND</b><br/> Recommended by a dietitian with a justification and treatment plan</p> |

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| Oscillating Positive Expiratory Pressure Devices (OPEPD) | All indications                 | Not recommended | There is limited evidence to support prescribing therefore not recommend for prescribing in Primary Care.   | None Foreseen |
| Oxycodone ONCE daily fomrulations                        | All indications                 | Not recommended | Not recommended for prescribing in primary or secondary care due to safety concerns of frequency of dosing compared to the twice daily dosing products already on the formulary MOPB 1 March 2018 | None foreseen |
| Oxycodone/ naloxone prolonged release (Targinact®)       | All indications                 | Not recommended | Equivalent analgesic effect to that of oxycodone. Naloxone does not eliminate constipation and long term effects are uncertain. MOPB August 2017  | None Foreseen |
| Palivizumab  | Prevention of RTI caused by RSV | Specialist Only | Under specialist supervision only. Specialist monitoring and funding required   | None Foreseen |
| Paracetamol/ Tramadol combination (Tramacet®)            | All indications                 | Not recommended | Sub-therapeutic doses of paracetamol and tramadol. Similar efficacy to Ibuprofen and co-codamol 30/500. MOPB August 2017  | None Foreseen |
| Paraldehyde injection                                    | Epilepsy                        | Not recommended | Non-formulary for EPUT as largely superseded by safer or more effective agents Data sheet   | None Foreseen |
| Pasireotide  | All                             | Specialist Only | Specialist commissioning by NHSE for specialist centres only as monitoring required and prescribed as part of a package of care   | None Foreseen |
| Pegaptanib   | Ocular Disorders                | Specialist Only | Under specialist supervision only. Specialist monitoring and funding required   | None Foreseen |
| Pegfilgrastim  | Neutropenia                     | Specialist Only | Under specialist supervision only. Specialist monitoring and funding required   | None Foreseen |

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| Pegvisomant                          | Acromegaly   | Specialist Only                                 | Under specialist supervision only. Specialist monitoring and funding required   | None Foreseen   |
| Pegylated interferon                 | All indications  | Specialist Only                                 | Under specialist supervision only. Specialist monitoring and funding required   | None Foreseen   |
| Pentamidine                          | Pneumocystic Pneumonia   | Specialist Only                                 | Under specialist supervision only. Specialist monitoring and funding required   | None Foreseen   |
| Pentosan                             | All indications  | Not recommended                                 | Evidence does not support use NICE summary 43. (MOPB Nov 2015).   | None Foreseen   |
| Pentoxifylline                       | Intermittent claudication in people with peripheral arterial disease | Not recommended                                 | NICE TA223 May 2011 does not recommend the use of pentoxifylline for this indication  | None Foreseen   |
| Perindopril Arginine                 | All indications  | Not recommended                                 | No clinical benefit over perindopril erbumine and is significantly more expensive. MOPB August 2017   | None Foreseen   |
| Pethidine                            | All indications  | Not recommended                                 | MOPB Sept 2019 Pethidine is not recommended for the management of long term persistent pain because fast-acting opioid medicines, like pethidine tablets are not useful for managing continuous pain. | Review existing patients currently being prescribed pethidine with a plan to stop /move to a more effective pain management medication. |
| Phytomenadione injection (Vitamin K) | All indications  | Not recommended for prescribing in Primary Care | Anticoagulant clinic is responsibility for managing anticoagulant care MOPB May 2018  | None foreseen   |
| Pigmanorm®                           | Melasma  | Not recommended                                 | Not recommended for prescribing in primary or secondary care. MOPB November 2018  | None foreseen   |
| Pimozide                             | Antipsychotic  | EPUT prescribers only                           | RED formulary for EPUT as marked side effects. Annual ECG recommended. -BNF   | None Foreseen   |

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| Pirenzepine                       | For side effects of Clozapine | EPUT prescribers only | RED formulary for EPUT as only available as an unlicensed product, used off label   | None Foreseen                          |
| Pitolisant                        | All indications               | Specialist Only       | Specialist knowledge required for prescribing and monitoring  | None Foreseen                          |
| Predfoam®                         | All indications               | Not recommended       | MOPB April 2018 Predfoam lower cost equivalent options available  | Only if alternatives are not tolerated |
| Prednisolone EC                   | Anti-inflammatory             | Not recommended       | Non formulary in West Essex, More expensive, no advantages over plain tablets   | None Foreseen                          |
| Primidone (formerly Mysoline)     | Epilepsy                      | Not recommended       | Non-formulary for EPUT as safety concerns, visual disturbances, lupus erythematosus, psychosis BNF  | None Foreseen                          |
| Promazine IM                      | Antipsychotic                 | Not recommended       | Non-formulary for EPUT as difficult to obtain and unlicensed in UK.   | None Foreseen                          |
| Promazine oral (formerly Sparine) | Antipsychotic                 | Not recommended       | Non-formulary for EPUT. Erratic unpredictable absorption, not normally recommended by BNF. Alternatives include promethazine, levomepromazine, pericyazine, chlorpromazine, fluphenazine EPUT | None Foreseen                          |
| PUVASoralen-8 1.2% Bath Additive  | Psoriasis                     | Specialist Only       | NHS West Essex Dermatology Formulary – an unlicensed medicine prescribed under the supervision of a specialist for photochemotherapy of psoriasis   | None Foreseen                          |
| Pyrazinamide                      | Tuberculosis                  | Specialist Only       | Under specialist supervision only. Specialist monitoring required   | None Foreseen                          |



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| Qtern 5mg/10mg film coated tablets (Saxagliptin/ Dapagliflozin) | Type 2 diabetes       | Not recommended | MOPB December 2017- Not recommended for prescribing in primary or secondary care   | None Foreseen  |
| Rabies Vaccines   | Travel purposes       | Not recommended | NHS England guidance for items which should not be routinely prescribed in Primary Care advises prescribers in primary care should not initiate the stated vaccines exclusively for the purposes of travel for any new patient. MOPB Jan 2018    | Vaccine may continue to be administered for purposes other than travel, if clinically appropriate. |
| Ranibizumab   | Ocular disorders      | Specialist Only | Under specialist administration only. Specialist monitoring and funding required   | None Foreseen  |
| Ribavirin   | All indications       | Specialist Only | Under specialist supervision only. Specialist monitoring and funding required  | None Foreseen  |
| Rifampicin  | Tuberculosis          | Specialist Only | Under specialist supervision only. Specialist monitoring required  | None Foreseen  |
| Rifaximin 200mg Xifaxanta®                                      | Traveller's diarrhoea | Not recommended | MOPB August 2016 - Xifaxanta® 200mg is not recommended for prescribing in Primary or Secondary Care as the limited spectrum of bacterial activity means it is unclear how rifaximin can be used empirically when the causative agent is unknown. | None Foreseen  |
| Rituximab   | All indications       | Specialist Only | Under specialist supervision only. Specialist monitoring and funding required.   | None Foreseen  |
| Risankizumab  | All indications       | Specialist Only | Under specialist supervision only as affects immune response. Specialist monitoring and funding required.  | None Foreseen  |

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| Roflumilast                    | COPD            | Specialist Only | Specialist Prescribing only in line with NICE TA461 (July 2017)   | None Foreseen |
| Romiplostim                    | ITP             | Specialist Only | Under specialist supervision only. Specialist monitoring and funding required   | None Foreseen |
| Rubefacients                   | Analgesics      | Not recommended | There is lack of evidence to support the use of rubefacients in acute or chronic musculoskeletal pain. The BNF states "The evidence available does not support the use of topical rubefacients in acute or chronic musculoskeletal pain." NICE have issued the following "Do not do" recommendation: Do not offer rubefacients for treating osteoarthritis. Details available on the website: Treatment of Unproven Value | None Foreseen |
| Rufinamide                     | All indications | Not recommended | Non-formulary EPUT. Decision confirmed MOPB Nov 2016  | None Foreseen |
| Sarilumab                      | All indications | Not recommended | Under specialist supervision only. Specialist monitoring and funding required   | None foreseen |
| Sativex cannabis spray         | MS              | Not recommended | "JPG Sept 2010 MTRAC – Not recommended - current evidence for its efficacy and safety considered to be inadequate to support use."  | None Foreseen |
| Secukinumab                    | All indications | Specialist Only | Under specialist supervision only; affects immune response, monitoring and funding required.  | None Foreseen |
| Shower gels and bath additives | All indications | Not Recommended | Not recommended, no evidence to support the use of bath additives in children with eczema BMJ 2018;361 MOPB Aug 2018  | None Foreseen |

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| Sildenafil 20mg tablets                        | Pulmonary arterial hypertension | Specialist Only                           | Under specialist supervision only. Specialist monitoring and NHSE funding required.  | None foreseen |
| Silk Garments                                  | All indications                 | Not Recommended                           | MOPB July 2019 Not recommended for prescribing as recommended within NHSE 'Items which should not routinely be prescribed in primary care' July 2019   | None Foreseen |
| Smoking cessation nicotine replacement therapy | Smoking Cessation               | Specialist smoking cessation service only | Not normally recommended for prescribing in primary care. It is recommended that e-cigarettes and other novel nicotine containing products only be considered for funding as part of a formal smoking cessation programme once they have been fully evaluated, their place in therapy established, and formulary processes have been followed. | None Foreseen |
| Sodium benzoate                                | Metabolic disease               | Specialist Only                           | MOPB April 2018 Hospital only prescribing requires specialist prescribing and monitoring   | None Foreseen |
| Sodium cromoglicate capsules                   | Food Allergy                    | Specialist Only                           | Not normally recommended for prescribing in primary care. Evidence supporting use is limited, usually initiated in infants under 2 years which is outside of license and use is short term, therefore prescribing should remain with the Specialist. MOPB Feb 2017.  | None Foreseen |
| Sodium Oxybate                                 | All indications                 | Specialist Only                           | Not normally recommended for prescribing in primary care. Not considered cost-effective in terms of cost per quality adjusted life year (QALY) when assessed against conventional limits.  | None Foreseen |

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| Sodium phenylbutyrate           | Metabolic disease                      | Specialist Only | MOPB April 2018 Hospital only prescribing requires specialist prescribing and monitoring  | None Foreseen |
| Stiripentol                     | All indications                        | Specialist Only | Not usually recommended for prescribing in Primary Care, rare condition requiring specialised monitoring MOPB Mar 2017  | None Foreseen |
| St. John's Wort Herbal Medicine | Antidepressant                         | Not recommended | Non formulary for EPUT due to variation in potency and interactions with other drugs, (an enzyme inducer). <b>EPUT</b>  | None Foreseen |
| Tadalafil                       | For Benign Prostatic Hyperplasia (BPH) | Not recommended | Tadalafil for the treatment of the signs and symptoms of benign prostatic hyperplasia in adult males is <b>NOT NORMALLY RECOMMENDED</b> for Primary, Secondary or Tertiary Care prescribing   | None Foreseen |
| Tadalafil                       | For Penile Rehabilitation              | Not recommended | Tadalafil for penile rehabilitation is <b>NOT NORMALLY RECOMMENDED</b> for Primary Care prescribing   | None Foreseen |
| Tadalafil                       | Once daily for ED                      | Not recommended | Tadalafil once daily is <b>NOT</b> recommended for prescribing in Primary or Secondary Care. Do not choose tadalafil once daily for treating ED on the basis of favourable efficacy. The evidence suggests that tadalafil 5mg daily has a similar efficacy to tadalafil 10mg or 20mg taken on demand for ED. MOPB Sept 2017 | None Foreseen |
| Teicoplanin                     | Infections                             | Specialist Only | Patient@Home will prescribe and monitor if long term antibiotic are required. District Nurses have agreed to administer under shared care. MOPB June 2017   | None Foreseen |

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| Teriparatide  | Osteoporosis, Pagets disease, hypercalcaemia of malignancy | Specialist Only | Restricted to initiation by specialists experienced in the treatment of osteoporosis following assessment of fracture risk including measurement of BMD. Specialist funding required.   | None Foreseen  |
| Thalidomide   | All indications  | Specialist Only | Under specialist supervision only. Safety concerns – VTE, neutropenia, thrombocytopenia, peripheral neuropathy and funding required BNF   | None Foreseen  |
| Thickeners (sachets)                                  | All indications  | Not recommended | Prescribing of sachets is not routinely recommended as these are not cost effective   | None Foreseen  |
| Tick-borne encephalitis vaccine                       | Travel purposes  | Not recommended | NHS England guidance for items which should not be not routinely prescribed in Primary Care advises prescribers in primary care should not initiate the stated vaccines exclusively for the purposes of travel for any new patient. MOPB Jan 2018 | Vaccine may continue to be administered for purposes other than travel, if clinically appropriate. |
| Tildrakizumab   | All indications  | Specialist Only | Under specialist supervision only; affects immune response, monitoring and funding required.  | None Foreseen  |
| Tobramycin (Tobi® Podhaler) dry powder for inhalation | Cystic fibrosis  | Specialist Only | GP prescribing of Tobi® Podhaler not normally recommended as Patient Access Scheme not available in primary care. NHSE  | None Foreseen  |

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| Tocilizumab                | All indications     | Specialist Only | Under specialist supervision only; affects immune response, monitoring and funding required.   | None Foreseen |
| Tofacitinib                | All indications     | Specialist Only | Under specialist supervision only, safety issues and specialist funding required.  | None foreseen |
| Tolvaptan                  | Low Sodium          | Specialist Only | Specialist use only; rapid correction of hyponatraemia can cause osmotic demyelination, leading to serious neurological events; close monitoring of serum sodium concentration and fluid balance is essential. BNF | None Foreseen |
| Total Parenteral Nutrition | IV feed             | Specialist Only | Specialist monitoring and funding required   | None Foreseen |
| Tranlycypromine            | Antidepressant MAOI | Not recommended | Non-formulary for EPUT as safety concerns with hypertensive crisis BNF   | None Foreseen |
| Trimipramine               | All indications     | Not recommended | Not an EPUT formulary. SSRIs are first line for management of depression. If TCA is required, Imipramine is a more cost effective alternative. MOPB August 2017  | None Foreseen |
| Ulipristal (Esmya®)        | Uterine fibroids    | Not recommended | <a href="#">MHRA August 2018 Esmya (ulipristal acetate) and risk of serious liver injury: new restrictions to use and requirements for liver function monitoring before, during, and after treatment</a>           | None foreseen |
| Ustekinumab                | All indications     | Specialist Only | Under specialist supervision only as affects immune response. Specialist monitoring and funding required.  | None Foreseen |

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| VACOCast                         | All indications | Not recommended       | MOPB Sept 2019 VACOCast Diabetic boot is not recommended for prescribing in Primary or Secondary Care until a business case has been considered and approved by West Essex CCG.   | None Foreseen  |
| Vedolizumab                      | All indications | Specialist Only       | Under specialist supervision only; affects immune response, monitoring and funding required.  | None Foreseen  |
| Vigabatrin                       | Epilepsy        | Not recommended       | Non-formulary for EPUT as risk of visual fields defects - BNF   | None Foreseen  |
| Vitamin B Compound               | All indications | Not recommended       | MOPB August 2019 Not recommended for prescribing in primary or secondary care.  | None Foreseen  |
| Vitamin B Compound Strong        | All indications | Specialist Only       | MOPB August 2019 Specialist only for refeeding syndrome (10 days treatment) and treatment of identified Vitamin B deficiency states. Not recommended for prescribing in primary care.   | None Foreseen  |
| Yellow fever vaccine             | Travel purposes | Not recommended       | NHS England guidance for items which should not be routinely prescribed in Primary Care advises prescribers in primary care should not initiate the stated vaccines exclusively for the purposes of travel for any new patient. MOPB Jan 2018 | Vaccine may continue to be administered for purposes other than travel, if clinically appropriate. |
| Zoledronic Acid                  | All indications | Specialist Only       | IV infusion, biochemical monitoring required BNF  | None Foreseen  |
| Zuclopenthixol acetate injection | Antipsychotic   | EPUT prescribers only | RED formulary for EPUT, few RCT and no evidence to suggest it is more effective than standard care, Cochrane  | None Foreseen  |