



Over the Counter Items that Should not be Routinely Prescribed in Primary Care Policy

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1.0		Paul Tyldesley	November 2019
1.1	Vaginal moisturisers added	Paul Tyldesley	June 2020
1.2	Local guidance superseded by NHSE policy	Paul Tyldesley	September 2025
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Policy Statement

Lancashire and South Cumbria ICB policy for over the counter items that should not be routinely prescribed in primary care has now been superseded by the policy recommendations of NHS England which are available at <https://www.england.nhs.uk/long-read/policy-guidance-conditions-for-which-over-the-counter-items-should-not-be-routinely-prescribed-in-primary-care/>.

In Lancashire and South Cumbria ICB the NHSE policy applies to prescribing of over-the-counter items in primary care including the prescribing of medicines to hospital out-patients.

Introduction

The NHSE policy provides recommendations for items that are available over the counter (OTC) and should not be routinely prescribed in primary care because:

- there is limited evidence of clinical effectiveness for the item
- the item would be prescribed for a condition that is self-limiting and will clear up on its own without the need for treatment
- the item would be prescribed for a condition that is appropriate for self-care.

Promoting the concept of self-care and increasing the awareness that there are alternatives to making GP appointments, or attendance at Out-of-Hours services or A&E departments with minor conditions, will encourage patients to explore self-care in the future, so changing the culture of dependency on the NHS.

Clinicians should only prescribe medicines that are known to be clinically effective and provide a health benefit to patients, at a cost which is acceptable to the local health economy.

Policy Rationale

For some medicines that are used to treat minor ailments or self-limiting conditions, a consultation with a GP is not the most appropriate means for diagnosing and treating the condition. These products can be purchased from pharmacies and supermarkets. Pharmacists are experts on the use of medicines and management of minor ailments; pharmacies are easy to access without an appointment and provide the NHS Community Pharmacist Consultation Service and/or Pharmacy First service. This will free up GP time to see more complex patients.

Some other products are clinically ineffective or are not cost effective. These treatments may not have undergone rigorous clinical trials to demonstrate that they are effective. It is inappropriate and

unaffordable to direct NHS resources towards products that have limited proven efficacy or safety in preference to medicines that have a more established evidence base.

Equality

National consultations have been undertaken to inform the development of the NHSE policy.

General exceptions

Do not prescribe unless for:

- managing a long-term condition (for example, regular pain relief for chronic arthritis or treatments for inflammatory bowel disease)
- treating more complex forms of minor illnesses (for example, severe migraines that are unresponsive to OTC medicines)
- managing presentations of symptoms that suggest the condition is not minor
- 'red flag' symptoms (for example, indigestion with very bad pain)
- patients with complex conditions (for example, immunosuppressed patients)
- treating an adverse effect or symptom of a more complex illness
- treating a minor condition suitable for self-care that has not responded sufficiently to an OTC item
- circumstances where the prescriber's clinical judgement is that these are exceptional and warrant deviation from the recommendation to use self-care
- individual patients where the prescriber considers that the patient's ability to self-care is compromised because of medical, mental health or significant social vulnerability to the extent that their health and/or wellbeing could be adversely affected if reliant on self-care
- circumstances where the product licence does not allow the item to be sold OTC to certain groups of patients. These may vary by medicine, but could include babies, children and/or women who are pregnant or breastfeeding. Community pharmacists will be aware of what these are and can advise accordingly.

Being exempt from paying a prescription charge does not automatically warrant an exception to the guidance. Consideration should also be given to safeguarding issues.

Policy Recommendations

<https://www.england.nhs.uk/long-read/policy-guidance-conditions-for-which-over-the-counter-items-should-not-be-routinely-prescribed-in-primary-care/>.

Force

This policy remains in force until it is superseded by a revised policy or by mandatory NICE guidance relating to the interventions listed, or to alternative treatments for the same conditions.

References

- [1] NHS England, "Policy Guidance: Conditions for which over the counter items should not routinely be prescribed in primary care," 12 March 2024. [Online]. Available: <https://www.england.nhs.uk/long-read/policy-guidance-conditions-for-which-over-the-counter-items-should-not-be-routinely-prescribed-in-primary-care/>. [Accessed 11 September 2025].

Appendix 1

- **Template Letter for Practices**

Dear **[Mr / Mrs Patient]**,

I am writing to you as I understand you have requested further information about the changes to the supply arrangements for **[insert name of treatment]**.

Medicines are an integral part of the health care that many patients rely on to manage their health conditions and over **[insert number of items]** prescription items are written by local clinicians every year.

Local clinicians, together with patient and carers have worked together to agree that only those treatments that are clinically effective and provide a clear health benefit to patients and are not readily available over the counter should be prescribed on an NHS prescription. This is because NHS resources are limited and we need to make sure that we use them wisely. GPs are still able to prescribe treatments for patients on the NHS in certain scenarios which are outlined in the NHS England 'Over the Counter Items that should not Routinely be Prescribed in Primary Care' policy.

Having evaluated your individual circumstances against guidelines and NHSE criteria, your GP has concluded that in the case of **[insert name of treatment]**, this treatment does not meet a clinical need / there is insufficient evidence of the clinical benefit of this treatment / your condition would naturally resolve itself without treatment **[delete as appropriate]**.

As a result, they are unable to prescribe it for you at this time.

If your clinical circumstances or condition changes, your GP will be happy to consider whether a NHS prescription would be appropriate.