



**East Leicestershire  
and Rutland**  
Clinical Commissioning Group

**Engagement analysis report –  
Conditions for which Over The Counter (OTC) items  
should not routinely be prescribed**

**September 2018**

## Executive summary

### Introduction

This engagement report details feedback and analysis obtained during a six-week period of public engagement undertaken by East Leicestershire and Rutland Clinical Commissioning Group (ELR CCG) on conditions for which over the counter (OTC) items should not routinely be prescribed in Primary Care.

NHS England published guidance in March 2018, calling for restrictions to the prescribing of certain OTC items.

The aim is that this will lead to a more equitable process for making decisions about the CCG's policy on prescribing medicines.

### The purpose of engagement

ELR CCG's activities involved engagement rather than a public consultation because, following its own national public consultation, NHS England has already decided what changes to prescribing all Clinical Commissioning Groups (CCGs) need to implement. These changes are detailed in guidance from NHS England on its website: <https://www.england.nhs.uk/medicines/conditions-for-which-over-the-counter-items-should-not-routinely-be-prescribed/>

Whilst the CCG understands that it is required to support NHS England's recommendations, it was keen to engage with its local population first. The purpose was to inform people of the CCG's obligatory duty to apply NHS England's guidance, but also to understand from patients what they thought, whether they had any concerns and to help identify any risks which the CCG may need to address before implementing any changes.

### Who responded?

A total of 358 people responded during the engagement period via online and hardcopy surveys. The majority of respondents (90%) are registered with a practice in East Leicestershire and Rutland and the majority (76%) are also in receipt of a repeat prescription.

### What did they say?

92% of respondents agreed that they would be happy to pay for OTC items and 86% agreed that medication for self-limiting conditions should not be prescribed.

### Next steps for the CCG

This engagement analysis report evidences strong support (substantially higher than the national average) from those ELR CCG's patients who responded, to restrict the prescribing of certain OTC items. However, the CCG should consider the qualitative comments and concerns of patients before introducing any changes.

## Background

In the 12 months up to June 2017, the NHS spent approximately £569 million on prescriptions for medicines, which could otherwise be purchased over the counter (OTC), from a pharmacy and/or outlets such as petrol stations or supermarkets.

These prescriptions include items for a condition:

- That is considered to be self-limiting and so does not need treatment as it will heal or be cured of its own accord
- Which lends itself to self-care

These prescriptions can also include other common items:

- That can be purchased over the counter, sometimes at a lower cost than that which would be incurred by the NHS
- For which there is little evidence of clinical effectiveness

By reducing spend on treating conditions that are self-limiting or which lend themselves to self-care, or on items for which there is little evidence of clinical effectiveness, these resources can be used for other higher priority areas that have a greater impact for patients, support improvements in services and or deliver transformation that will ensure the long-term sustainability of the NHS.

## NHS England's consultation

NHS England undertook a 12-week public consultation between December 2017 and 14 March 2018. As a result of this work, NHS England and NHS Clinical Commissioners (NHSCC) developed restrictions based on type and severity of condition rather than products.

Feedback from this consultation showed that there was general support (65% agreed with NHS England's criteria to assess items for potential restrictions).

ELR CCG has previously stopped prescribing paracetamol as well as gluten-free products, following engagement with patients. The move to stop paracetamol being routinely prescribed was supported by the majority of people that the CCG engaged with although there was a level of concern amongst some patients with more serious or longer-term conditions.

## The engagement process

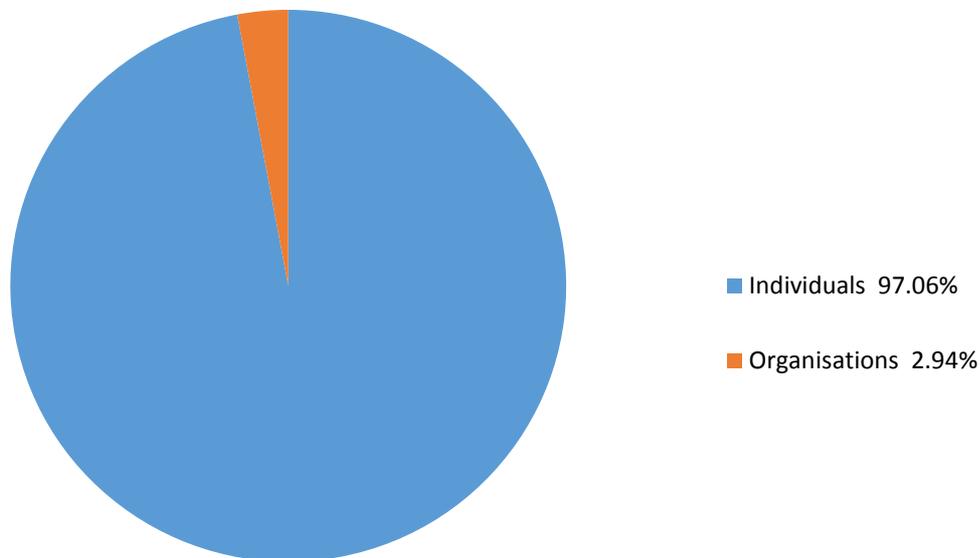
ELR CGG undertook engagement over six weeks between Monday 30 July 2018 and Sunday 9 September 2018, to gather public opinion on the proposals and to encourage people to self-care. The CCG sought to obtain feedback to:

- Educate people about the rationale behind why items may not routinely be prescribed
- Make people aware of the NHSE consultation and its findings

- Identify any other risks and themes relating to conditions or groups of people which may require further engagement or work, before any changes are implemented
- Reassure those people with long-term conditions and/or complex conditions that they will continue to receive their prescriptions
- Prepare patients for the changes so that they are aware and prepared for the changes before implementation
- Allow the CCG to determine whether people are generally in support of the proposals, so that appropriate communication and any further necessary actions can be put in place
- Achieve behavior change in patients by encouraging them to self-care

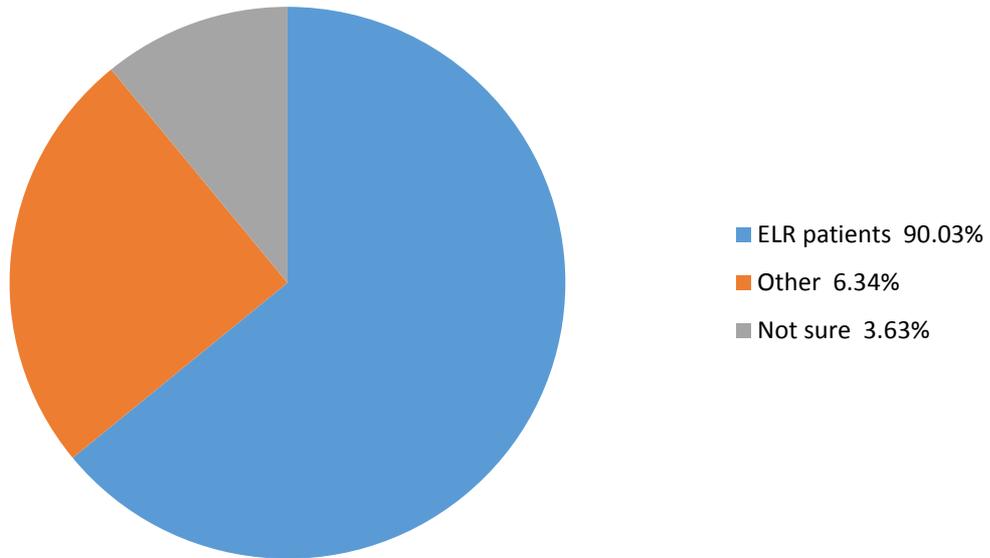
### Who did the CCG engage with?

#### Participants' details



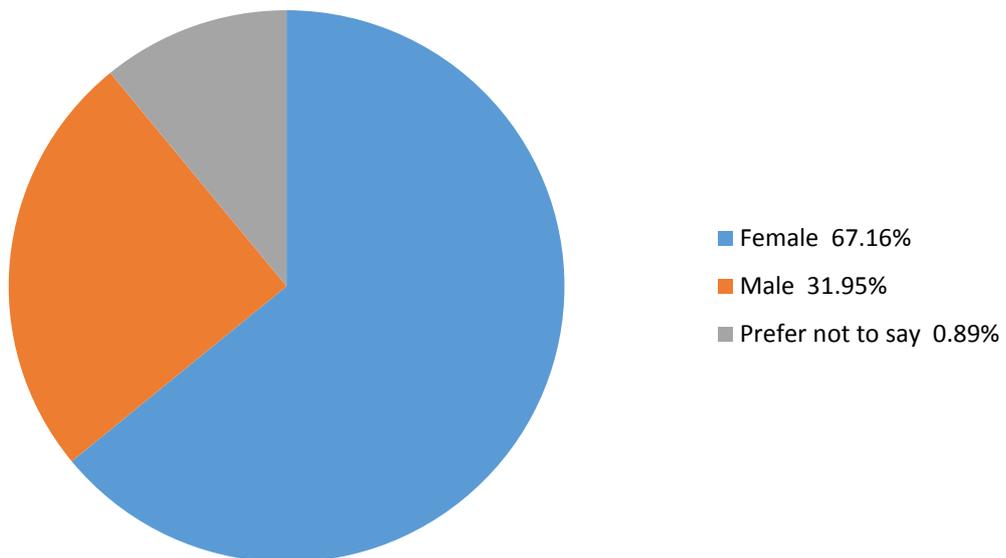
- The above pie chart shows that the majority of participants responded to the survey on behalf of themselves (330 people)
- 10 people responded on behalf of an organisation
- 18 people didn't provide these details

### Participants' details



- The majority of respondents (298 people) were ELR patients
- 21 people were not ELR patients
- 12 people were not sure whether they are ELR patients
- 27 people did not provide these details

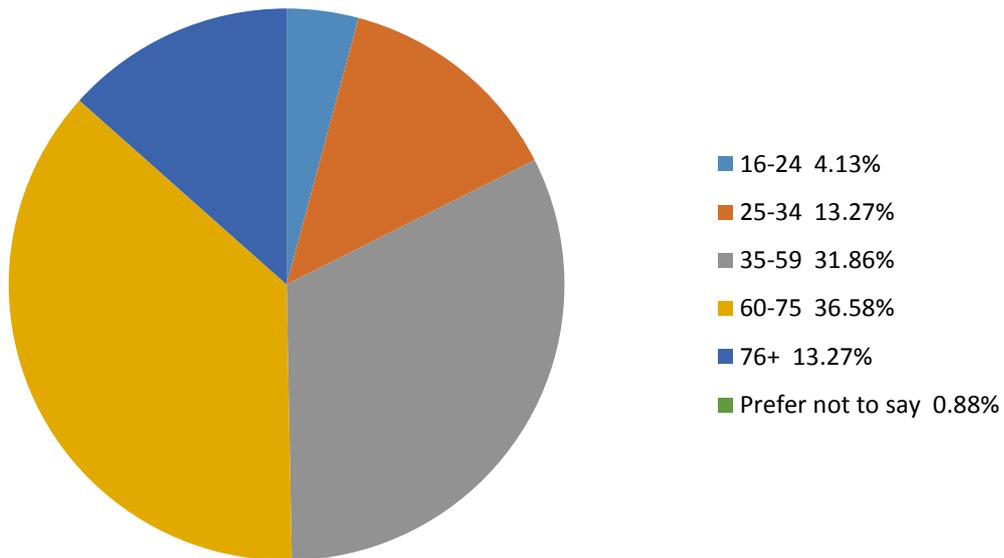
### Participants' gender



- The majority of respondents were female (227 people)

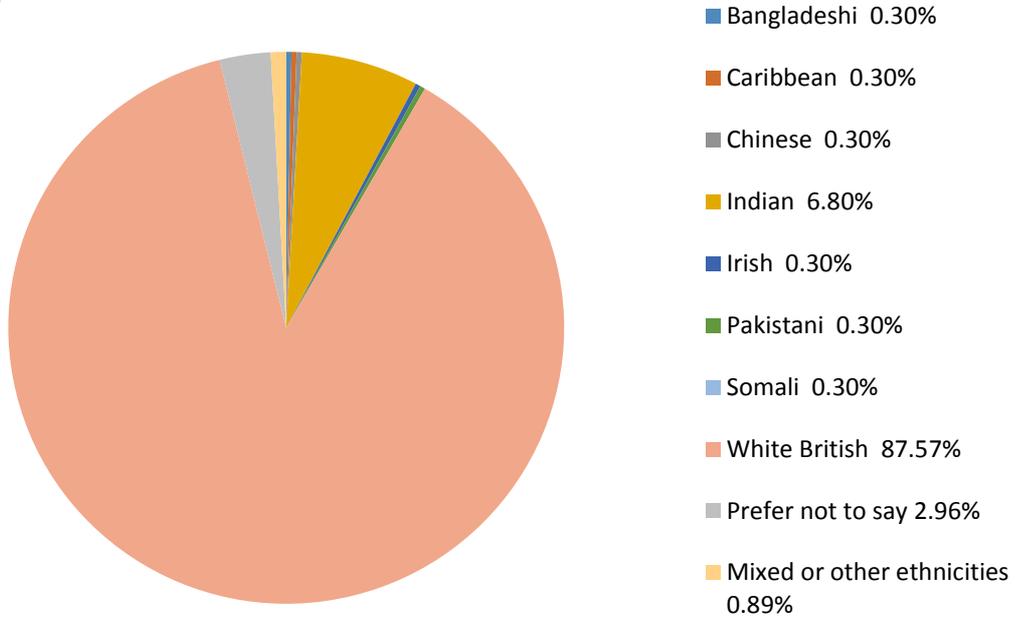
- 108 of those who responded were male
- 3 people preferred not to say
- 20 people did not provide these details

### Participants' age



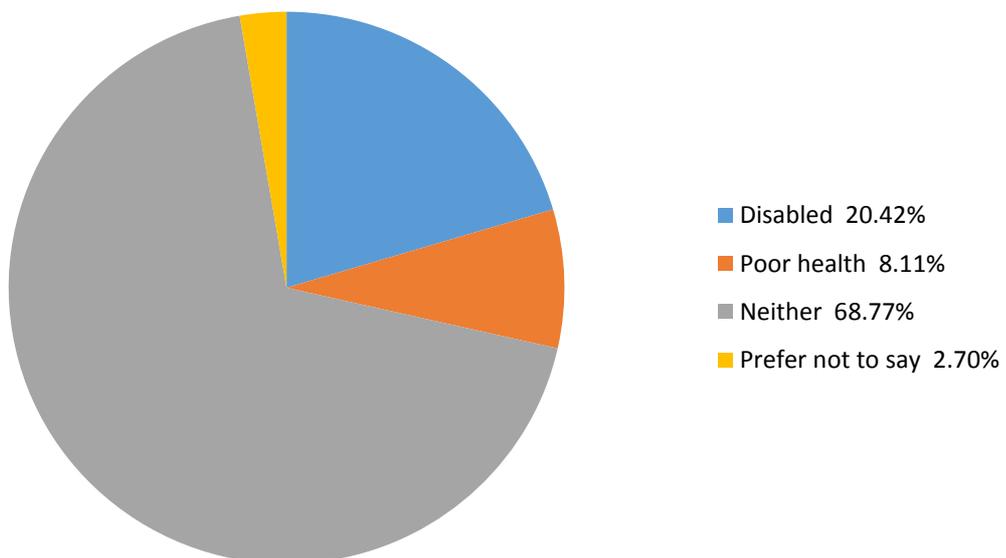
- The majority of those who responded to the survey questionnaire were aged between 60 to 75 years (124 people)
- This majority group was closely followed by people aged 35 to 59 years (108 people)
- 45 people who responded were aged above 76 years
- 45 people who responded were aged between 25 to 34
- 14 people who responded were aged between 16 to 24
- 3 people preferred not to say
- 19 people did not provide these details

### Participants' ethnicities



- The majority of those who responded were of White British ethnicity (296 people)
- 23 people were of Indian ethnicity (23 people)
- Participants also came from other ethnic backgrounds listed above, with 3 people being of dual-heritage

### Participants' health



- Of those who responded more than 20% had a disability (68 people)

- More than 8% (27 people) were in poor health
- The majority were neither disabled nor in poor health (229 people)
- 9 people preferred not to say
- 25 people did not provide this information

The data pertaining to those who the CCG engaged with and who completed a survey questionnaire demonstrates a good mix of responses from ELR's diverse communities. The CCG has engaged with patients covering each of its localities, including older people and people with disabilities.

## Channels and strategy

- **Survey**

A survey was devised to gather public opinion. The survey comprised of 13 questions relating to the initiative and how it may affect patients, followed by equality questions to enable the CCG to understand the group/background that respondents belonged to. The survey was promoted on the CCG's website, GP practice websites and through local media.

Paper copies were made available at the CCG's 31 GP practices and at six face-to-face engagement events hosted at some of ELR CCG's largest GP practices.

The survey was promoted for the duration of the engagement period on social media channels. Further information relating to social media activities is available on page 10.

- **Listening Booth events**

The Listening Booth allows the CCG to speak to patients and carers about their experiences of healthcare. It forms an integral part of the CCG's engagement and consultation activities and enables the CCG to collate both positive and negative feedback.

By visiting an ELRCCG practice in each of its six localities, the CCG was able to ensure a good mix of responses from the geographical area that it serves. The CCG took the Listening Booth to the following practices for half-day engagement events at each:

- Glenfield Surgery, North Blaby
- Northfield Medical Practice, South Blaby
- Market Harborough Medical Centre, Harborough District
- Oakham Medical Practice, Uppingham

- Latham House, Melton Mowbray
- Wigston Central Surgery, Wigston

The Listening Booth enabled direct dialogue with patients about the changes and allowed the CCG to guarantee additional qualitative verbatim comments.

- **Email**

- Emails were sent to stakeholders and seldom heard groups, briefing them on the initiative, the rationale and requirements for all CCGs to implement the changes. The email also provided contact details, should any individuals or seldom heard groups want to request more information or a meeting.
- Emails were also sent to all practices in ELR, before and during the engagement, explaining the aims of the engagement, the role of practices and GPs and instructions on how they could support the initiative through promotion

- **Electronic toolkit**

All ELR practices were emailed an electronic toolkit and instructions on how to use the toolkit. The toolkit comprised of:

- A patient-friendly one-page leaflet explaining the initiative, providing a link to the survey and CCG contact details, for use during the course of the engagement
- The survey for use during the course of the engagement
- Poster promoting the initiative for immediate and longer-term use
- Graphics for GP practice screens for immediate and longer-term use
- Web article with a link to the survey for GP websites
- Social media content for practices to use on their Facebook and Twitter pages, covering the six-week engagement period

- **Hardcopy material for GP practices**

In addition to the electronic toolkit, the CCG produced and delivered the following material to practices, encouraging them to promote the material around their sites:

- A patient-friendly one-page leaflet explaining the initiative, providing a link to the survey and CCG contact details, for use during the course of the engagement (Appendix X)
- Paper copies of the survey for use during the course of the engagement (Appendix X)
- Web article for use on practice websites and linking to the survey online
- Poster promoting the initiative for immediate and longer-term use

- **Website**

The initiative and survey was promoted on the CCG’s website as well as practice websites. The web page included links to the NHS England consultation and guidance, the survey, and e-toolkit.

- **Social media**

The CCG used Facebook and Twitter regularly during the six-week period to encourage people to participate in the survey and to explain the changes. The below table shows the number of posts, reach and level of engagement achieved through the CCG’s social media platforms alone:

	<b>Facebook</b>	<b>Twitter</b>	<b>Totals</b>
<b>Posts</b>	6	13	19
<b>Post reach</b> (people/users who saw the post)	7,100	8,129	15,229
<b>Interactions</b> (number of times people/users engaged with the posts)	<b>781</b> (389 reactions, comments, shares 392 post clicks)	96	877

\*GP practices also used their social media channels to promote the initiative therefore the actual reach and engagement across ELR is likely to be much higher.

- **Press release**

A press release was issued to local print and broadcast media to help promote the initiative and to encourage people to participate in the survey. This secured media coverage in the Leicester Mercury.

- **Media opportunity with BBC East Midlands Today**

The CCG’s Communications team proactively pitched a news item to BBC East Midlands Today. The news item included an interview with Dr. Andy Ker and was broadcast twice on the 6 o’clock and 10’clock news programmes, during the week that the engagement was launched. The piece was very positive and included supportive vox pops from several members of the public.

## Survey findings

A total of 358 survey responses were returned during the engagement period.

The results of responses to each question are as follows:

### Q1. Do you currently receive a repeat prescription from your doctor?

327 People answered this question.

Answer choices	Responses	
Yes	76.26%	273
No	23.74%	85
Not sure	0.00%	0
TOTAL		358

#### Issues for consideration

The majority of those who took part in the survey receive a repeat prescription and therefore, if they have additional concerns about their current prescriptions, more educational awareness may be necessary to explain that longer-term conditions are exempt from the initiative and that they will continue to receive their prescriptions.

### Q2. If you answered yes to question 1, what is it for?

228 people answered this question.

Repeat prescriptions listed included treatment for a range of conditions including pain, arthritis, hayfever, blood pressure, diabetes, eczema and asthma.

\*For a full list of responses of items prescribed and conditions see Annex A

#### Issues for consideration

Some of the conditions could be exempt from the changes, but other prescribed items prescribed such as nasal spray and shampoo may no longer be prescribed. This could affect patients who no longer receive prescriptions for items that are available over the counter (if their condition isn't complex or long-term) and so, they may require additional information on why the changes are happening.

### Q3. Do you pay for your prescriptions?

356 people answered this question.

Answer choices	Responses	
Yes	35.11%	125
No	64.89%	231
Not sure	0.00%	0
TOTAL		356

#### Issues for consideration

The majority of respondents (nearly 65%) do not pay for their prescriptions and so, unless their condition is complex and/or long-term, they may stop receiving

prescriptions for self-limiting or short-term conditions. Depending on their circumstances and reception, GPs may need to take a view on the items they prescribe and may also need to provide further information.

**Q4. Some over the counter medication (for example; vitamins and minerals, lotion for mild dry skin conditions, eye drops, painkillers and indigestion remedies) are available for you to buy at a considerably reduced cost, in comparison to what it would cost the NHS. Would you be happy paying for over the counter medication to treat short-term illnesses and conditions?**

343 people answered this question.

Answer choices	Responses	
Yes	92.13%	316
No	7.87%	27
TOTAL		

\*For detailed comments see Appendix B

#### Issues for consideration

An overwhelming majority of respondents (more than 92%) agreed that they would be happy paying for OTC medication to treat short-term conditions. This compares to a national response rate of 65%, during NHS England’s public consultation. Despite the majority of these respondents currently not paying for their prescriptions, the response is extremely positive and supportive of the proposed changes. The number of people who responded (343 people out of a total of 358) is significantly high too and therefore, can be used as a helpful indicator, when implementing the changes.

**Q5. Did you know a self-limiting condition is a condition which will clear up on its own without the need for medication?**

349 people answered this question.

Answer choices	Responses	
Yes	69.91%	244
No	30.09%	105
TOTAL		349

#### Issues for consideration

The majority of respondents understand what a self-limiting condition is (nearly 70%), but more awareness could be focused on those patients who are not aware of what it is. If more patients are made aware that self-limiting conditions eventually clear with time on their own, the likelihood of an increase in support for the proposed changes could also increase.

**Q6. Do you agree that medication for self-limiting conditions should not be prescribed?**

333 people answered this question.

Answer choices	Responses	
Yes	85.59%	285
No	14.41%	48
TOTAL		333

\*For additional comments relating to this question, see Appendix C.

#### Issues for consideration

The majority of patients agree that medication for self-limiting conditions should not be prescribed (nearly 86%). However the responses show that a small percentage of people still believe that medication for self-limiting conditions should be prescribed. More work can be undertaken with these patients to establish what their reasoning may be.

#### **Q7. If you were suffering from a self-limiting condition or minor illness, where would you go for more information in the first instance?**

347 people answered this question.

Answer choices	Responses	
Pharmacy	67.72%	235
NHS website	11.53%	40
Dial NHS 111	2.31%	8
GP surgery	11.82%	41
Other (please specify)	6.63%	23
TOTAL		347

The following list shows the other places that patients go to for this information:

1. Walk-in facility or chemist
2. No one
3. We do try to solve it with home remedies before going to the GP surgery
4. Internet
5. Call 111, NHS Website
6. NHS Website, G.P Surgery
7. NHS Website
8. Ask my mum
9. Online
10. Google
11. Google
12. Relative
13. Google
14. N/A

15. Google, friends and family
16. Pharmacy and NHS website
17. Pharmacy and NHS website
18. Allow it to take its course
19. Internet
20. Internet via search engine
21. Internet
22. Pharmacy, unless related to my allergies / rhinitis when I would go straight to my GP as nothing the pharmacy can offer is strong enough
23. Generally internet and pharmacy unless tonsillitis

Issues for consideration

The responses show that the majority of patients visit their pharmacy in the first instance for information and advice on self-limiting conditions. The results, including the list (although this does duplicate many of the categories offered in the specific question), are a helpful indicator in highlighting the most popular platforms. The CCG could target these, should it want to promote more information on self-limiting conditions.

**Q8. Do you currently purchase over the counter medication?**

349 people answered this question.

Answer choices	Responses	
Yes	70.20%	245
No	29.80%	104
TOTAL		349

Issues for consideration

Although the majority (70%) of respondents purchase OTC medication nearly 30% indicated that they do not. This means that either all of their medication is prescribed or they do not take any OTC medication. The results could indicate that if some patients have to pay for OTC items, they would choose not to take these items. For self-limiting conditions however, their condition would eventually clear without OTC treatments and so, the items are not absolutely necessary.

**Q9. If you answered yes to question 8, please tell us what condition the item is for, where you purchase it from, and any further comments.**

234 people answered this question and provided a list of conditions. Here is a random selection of some of the conditions:

1. Paracetamol. migraine tablets, Calpol and hayfever syrup
2. Painkillers- anti-inflammatories for general aches and pains. Tendonopathy  
Hydrocortisone and cream for dry skin
3. Paracetamol- tesco
4. Ibuprofen/ paracetamol- tesco

5. Pain, flu/cold symptoms, cold sores, dry skin conditions 9/17/2018 1:45 PM
6. Paracetamol- back pain - supermarkets Nurofen- back pain - supermarkets vitamins supermarket
7. Arthritis
8. Cod liver oil, glucosamine
9. Cetirizine recommended by GP and purchased
10. Aspirin 9/17/2018 1:27 PM
11. Cold remedies, sore throat remedies, glucosamine- from supermarkets
12. Paracetamol for various aches and pains from supermarkets
13. Back pain
14. Hayfever
15. Turmeric (arthritis)
16. Vitamin D
17. Diarrhoea from chemist
18. Pain killers, Olbas oil for sinuses
19. Co-codamol
20. Eyedrops – pharmacy

\* The full list of conditions (234) can be viewed in Appendix D.

#### Issues for consideration

The majority of respondents purchase OTC items. They provided a list of these conditions and OTC items. The results indicate that respondents use OTC items for self-limiting conditions and short-term pain relief. The cost of the items described is not excessive and this information could be provided to patients with self-limiting conditions. They would then have an option to purchase the items for relief or wait for their condition to clear on its own.

#### **Q10. If there are any medicines that you have any particular concerns about please tell us which one and why.**

98 people answered this question and provided a list of medicines. Here is a random selection of some of the conditions:

1. Emollient creams
2. Lanzoprazole (should be for limited time?)
3. Atorvastatin- side effects
4. penicillin
5. No
6. Blood pressure medication- strong painkillers should be regularly reviewed.
7. Some medications react with each other and should only be taken under suspension
8. The medications mentioned above plus the skin medications/creams which help me manage my long term condition/illness
9. Insulin, and eye drops
10. Ibuprofen as I am buying it from the supermarket, I am not monitored on this medication, I have had a dystonia for over 20 years and this, along with botox injections is the only medication for pain relief
11. Paracetamol, rheumatoid arthritis which is very painful

12. Co-codamol I take this prescribed for pain x4 tablets a day
13. All my meds
14. Statins. Concern about efficacy if no previous incidents
15. A lot of codeine products are so easily available
16. All of the medicines I am prescribed- they all carry potential side effects
17. Branded medication which advertises widely, is more costly than non-branded and costs much more
18. Why are paracetamol etc. still widely available over the counter. It's asking for trouble
19. I have to buy Neil's Sinus Rinse for my daughters long term condition the sachets cost £20 per month because they are not prescribed
20. Mild lotion cream as I can only use a few due to allergies and my condition goes from mild to severe which requires much use

\*The full list of medicines can be viewed in Appendix E.

### Issues for consideration

The list of items and conditions provided indicates that some of these items would still be available on prescription as they are for longer-term conditions. Others items may no longer be prescribed, if required for short-term conditions. GPs would have to apply their judgement when consulting with patients and decide based on the patient's condition, whether OTC medicines should be prescribed. The information also suggests that more promotion on conditions that are exempt from the changes may be helpful to reduce patients' concerns.

### **Q11. If you are aware of any groups of people who may be affected by this change more than others, please tell us which groups below.**

150 people answered this question. Here is a random selection of some of the responses:

1. Low income families
2. People with life time chronic conditions
3. Children (dosages)
4. My 20 year old special needs grandson
5. Low income
6. Low income, pensioners
7. Renal patients
8. Elderly with long-term condition with no access to local pharmacy
9. Low income families and long term illnesses
10. Disadvantaged with small resources
11. The poorest people in our society, that's why I think it's a very serious concern
12. Elderly people
13. People who can't afford
14. Elderly/ pensioners/ low income families/ single parents/ unemployed/ students
15. Diabetics and high risk patients
16. Poor families
17. Low income

18. Those who find it difficult to get to a pharmacy / we live in a village with limited bus service
19. The very elderly or people that are unable to get out. People that have their prescription delivered
20. Possible people with limited or low income

### Issues for consideration

The responses indicate that the following groups may be more affected by the changes:

- People with complex and/or long-term conditions
- People on low incomes including the unemployed
- Older people
- People who are less mobile or housebound
- People who require longer-term use of pain killers

People with complex and/or long-term conditions however, would be exempt from the changes. They could be reassured to avoid concerns.

Many of the most popular OTC items are no longer prescribed across Leicester, Leicestershire and Rutland (for example, paracetamol, cough syrups, medicated shampoo, antihistamines for hayfever), unless these are required for complex or longer-term conditions, so there would be little change for patients, regardless of their income or age.

Patients who require longer-term pain relief would also be exempt from the changes so again, there would be little impact on them.

Consideration should be given however, to vulnerable individuals with short-term conditions who are housebound or less mobile, particularly if they are likely to have to purchase OTC items more than once for the same condition (for example, paracetamol). GPs would need to apply their judgement to reduce potential adverse impact on vulnerable patients.

**Q12. If you are aware of any situations or groups of people where you think some or all of the medicines should still be prescribed, please tell us.**

140 responded to this question. Here is a random selection of some of the responses:

1. Treatment for chronic conditions
2. People who are prescribed multiple medicines
3. Those with chronic conditions
4. Low income state assisted people and their children
5. Elderly, babies and children
6. Children (antibiotics)
7. Grandson as above

8. Low income, pensioners
9. Low income
10. Elderly people on few incomes
11. Those with chronic conditions where over the counter medications are restricted in quantity
12. The poorest people are generally the most vulnerable group of people. Highly paid. GPs should not ration prescriptions.
13. For all over 60s
14. OAPs
15. Pensioners
16. All high risk patients as mentioned above as they are more prone to infection
17. Income support
18. Low income families
19. People over 75 may find it more difficult to get out to shops to collect larger quantities of painkillers
20. Those who have difficulty getting to outlets supplying the subject medication or cannot afford to buy same

A full list of responses to this question can be viewed in Appendix F.

#### Issues for consideration

The groups identified from the responses are the same as the groups identified from question 11:

- People with complex and/or long-term conditions
- People on low incomes including the unemployed
- Older people
- People who are less mobile or housebound
- People who require longer-term use of pain killers

The issues for consideration deriving from the previous responses can also be applied to mitigate adverse impact on the identified groups. GPs would need to apply their judgement to reduce potential adverse impact on these groups. It is important to acknowledge however, that self-limiting conditions would eventually clear without any OTC items, whether prescribed or purchased by the patient.

**13. Please use this space to provide additional comments, to tell us how the changes may affect you or to request any additional information.**

70 people responded to this question. The following is a snapshot of some of the comments:

**“It would be a lot more convenient for me to be able to purchase my repeat prescriptions over the counter”**

**“I think there are a lot of positive changes, but I do have concerns ”**

**“Specially prescribed drugs by the NHS for treatment only, all other medicines should be purchased and paid for by the patient”**

**“Cuts not needed”**

\*All comments relating to this question can be viewed in Appendix G.

### Issues for consideration

The comments demonstrate that although there is strong support for the proposed changes to prescribing, some people do have some concerns.

Whilst the proposed changes would not affect patients with complex and/or long-term conditions, consideration should be given to the impact on the vulnerable groups identified. Responses show that there is a lack of understanding relating to the groups of people or conditions that would be exempt from the proposed changes.

For example, some respondents were very concerned for patients with life threatening or serious conditions who may not be able to afford medication. Under the new changes, such patients would continue to receive their prescriptions and so, there would be no additional adverse effect on them when the NHS England guidance is applied.

The price of over the counter items was also a factor, with some respondents willing to purchase low cost over the counter medication. However, the results do not indicate how these same respondents would feel about purchasing more expensive items. Other respondents were fully supportive of the proposed changes regardless of the cost of OTC items.

Some patients requiring paracetamol indicated their concern relating to limitations on the amount of pain killers they would be able to purchase over the counter. However, the CCG stopped prescribing paracetamol in October 2016. Patients who require Paracetamol/Ibuprofen/Aspirin for long-term conditions are likely to be exempt from the proposed changes and GPs would be expected to make a clinical judgement to prescribe in certain cases.

### **Listening Booth analysis**

The table below shows the number of people who the CCG spoke to at each practice. These patients also completed a survey during the face-to-face engagement:

<b>Practice</b>	<b>Number of patients engaged with</b>
Glenfield Surgery	37
Northfield Medical Practice	39
Market Harborough Medical Centre	34
Oakham Medical Practice	23
Latham House	32
Wigston Central Surgery	29
<b>TOTAL</b>	<b>194</b>

## Other feedback from the Listening Booth events

- 194 surveys completed in total
- 30 people out of 194 felt that people with low incomes would be affected more than others from the proposed changes
- 54 people out of 194 felt the elderly would be affected more than others from the proposed changes
- 3 people out of 194 felt people with diabetics would be affected more than others from the proposed changes
- 3 people out of 194 were concerned that higher strength co-codamol available on prescription only, may no longer be available

The responses obtained from the completed questionnaires at the engagement events were analysed with all other questionnaires. A summary of analyses from all feedback is below:

### **Summary of engagement analysis**

- The majority of respondents (more than 92%) agree that they would be happy paying for OTC medication to treat short-term conditions. The national average is 65%, therefore support in ELR is much higher than the national average.
- There is concern from some groups (people with low incomes, older people and people who are housebound) that they will be adversely affected by the changes.
- Some patients are not aware that the proposed changes will apply to short-term and self-limiting conditions only.
- Not all patients are aware of what a self-limiting condition actually is.
- There is concern amongst some respondents that patients with long-term or more serious conditions would be affected by the proposed changes.
- A small percentage of respondents feel that OTC items should continue to be prescribed.
- Some respondents are unaware that certain OTC items ceased being prescribed two years ago.
- Pharmacies are the first point of contact for the majority of patients, when they have questions relating to short-term or self-limiting conditions. This is followed by the NHS website and GP practices.

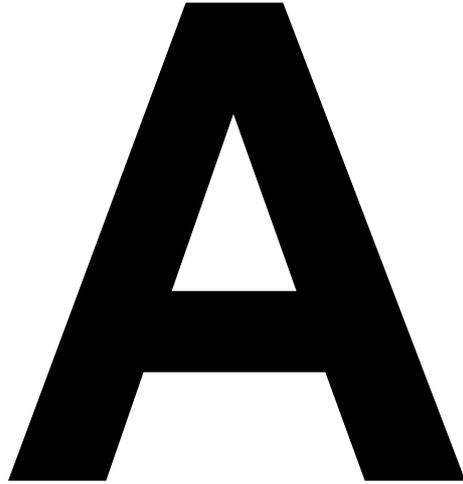
## Recommendations/key considerations for the CCG

- Further publicity and promotion of the initiative should be considered to reach as many patients as possible and on a long-term basis.
- Emphasis should be placed on what short-term conditions are in order to reduce unnecessary concerns relating to more serious and longer-term conditions that will not be affected by the changes.
- The above can be demonstrated by promoting more widely, the full list of conditions that the NHS England guidance would apply to.
- GPs will have a role in deciding when certain OTC items may still be prescribed. A patient's circumstances may need to be taken into account to reduce any potential inequalities in health provision.
- The CCG can support GPs to implement the changes by providing supporting material and/or contact details for patients who wish to ask questions or find out more.
- The CCG can ensure that GPs are fully aware of their roles in implementing the changes by writing to them and offering support.
- It should be highlighted at every opportunity that those with complex and/or longer-term and more serious conditions will be exempt from the changes. GPs will have a pivotal role in explaining this during patient consultations.

## Next steps

The recommendations and key considerations should be considered by the CCG in implementing the changes.

After a set time period following implementation, the CCG may choose to revisit the initiative to ascertain from GPs what the response has been from their patients. This may help identify any further areas of work or engagement.



**If you answered yes to question 1, what is it for? (Please skip this question if you answered no)**

**UNEDITED (sic) RESPONSES WITH DATE AND TIME OF RESPONSE**

- 1 Paracetamol, movicol haeworrroids, macrogal 9/17/2018 1:55 PM
- 2 Fedofenadine and skin creams and inhalers 9/17/2018 1:54 PM
- 3 Hypromellose and dexamethasom 9/17/2018 1:49 PM
- 4 Fluxetine 9/17/2018 1:46 PM
- 5 Chronic pain, thyroin replacement, heart problem, BP 9/17/2018 1:45 PM
- 6 Blood pressure, polymyalgia rheumatica 9/17/2018 1:44 PM
- 7 Ibandronic acid- osteoarthritis, statins- high cholestrol and angina, fluoxetine- depression 9/17/2018 1:42 PM
- 8 Losartan and atorvastatin 9/17/2018 1:37 PM
- 9 Paracetamol, citalopram, amitriptyline 9/17/2018 1:37 PM
- 10 Statins 9/17/2018 1:29 PM
- 11 Risk of stroke 9/17/2018 1:27 PM
- 12 Phenelzine, levothyroxine and naratriptan 9/17/2018 1:23 PM
- 13 Diclofenac sodium fluoxetine, lansoprazok, latanoprost eye drops 9/17/2018 1:16 PM
- 14 Blood pressure 9/17/2018 1:16 PM
- 15 Hayfever 9/17/2018 1:14 PM
- 16 ramipril, tamsulosin, co-codamol 9/17/2018 1:13 PM
- 17 Hypertension 9/17/2018 1:12 PM
- 18 Insulin, statin and levothyroxine 9/17/2018 1:10 PM
- 19 Heart faliture 9/17/2018 12:57 PM
- 20 Asthma, enlarged prostate, nose blockage and heart condition 9/17/2018 12:55 PM
- 21 Various aliments atm 9/17/2018 12:44 PM
- 22 Several things 9/12/2018 4:27 PM
- 23 Heart/ stomach and arthritis 9/12/2018 4:19 PM
- 24 Mononitane 9/12/2018 4:19 PM
- 25 All my regular prescription 9/12/2018 4:15 PM
- 26 Condesartan 9/12/2018 4:03 PM
- 27 metaformin tablets, latanprost eye drops and azopt eye drops 9/12/2018 4:02 PM
- 28 Venofaxin lamsoprol 9/12/2018 3:54 PM
- 29 Bendiofluazido, amlodipine, adcol, disoprolol, lansoprazole 9/12/2018 3:52 PM
- 30 various 9/12/2018 3:49 PM
- 31 Amlodidine, aspirin, atorvastatin, bisoprolol 9/12/2018 3:48 PM
- 32 Asthma and hayfever 9/12/2018 3:39 PM
- 33 Latanaprost eye drops 9/12/2018 3:37 PM
- 34 Heart, pain relief, blood pressure 9/12/2018 3:33 PM
- 35 For eczema berodouble gel, atorvastin, mouthwash, toothpaste, biotene saliver gel, alfobosin, for side effects of head/neck cancer treatment for prostate condition 9/12/2018 3:30 PM
- 36 Zolmitripton 9/12/2018 3:26 PM
- 37 Eliquis, axtal, various stofia supplies 9/12/2018 3:23 PM
- 38 Type 2 diabetes 9/12/2018 3:19 PM
- 39 Thyroid 9/12/2018 3:13 PM
- 40 Blood pressure and vertigo shingles in head, numb scalp 9/12/2018 3:12 PM

41 Diabetic 9/12/2018 3:10 PM  
42 HRT 9/12/2018 3:09 PM  
43 Several 9/12/2018 3:08 PM  
44 Statins, Hipitor 9/12/2018 3:07 PM  
45 My meds 9/12/2018 2:59 PM  
46 Quite a few medications for COPd and Rhumatoid arthritis 9/12/2018 2:52 PM  
47 Diabetes Glaucoma 9/12/2018 2:42 PM  
48 Asthma, raised BP and bone density pills 9/12/2018 2:41 PM  
49 Metformin and spironolactone 9/12/2018 2:40 PM  
50 Regular diabetic medicine 9/12/2018 2:36 PM  
51 Thyroxin, Amlopodin, lanzaroprol, Bisopiol, Losantin, Clopidegrel 9/12/2018 2:31 PM  
52 Amlodogine 5Mlg 9/12/2018 2:26 PM  
53 Inhaler 9/12/2018 2:23 PM  
54 Levothyroxine 9/12/2018 2:11 PM  
55 Lansoprole Fursuide 9/12/2018 2:08 PM  
56 Angina, utiania, blood pressure 9/12/2018 2:06 PM  
57 Multiple issues 9/12/2018 2:03 PM  
58 Type 2 diabetes, statins, blood pressure 9/12/2018 2:00 PM  
59 Evorel patches, Omeprazole and bisopropolol 9/12/2018 1:47 PM  
60 Statins 9/12/2018 1:33 PM  
61 Thyroid function, osteo arthritis, osteo malacia, oesophagul problems and heart flutters due to thyroxine  
62 Glacoma, Hypertension 9/12/2018 1:31 PM  
63 Thyroxide, Fexafenadine 9/12/2018 1:23 PM  
64 High Blood pressure, Cholesterol, Blood thinning 9/12/2018 1:21 PM  
65 Digoxin, Bisoprol and rivaroxaban 9/12/2018 1:18 PM  
66 Contraceptve pill 9/12/2018 1:16 PM  
67 Fibromyalgia and chronic back pain 9/12/2018 1:14 PM  
68 Romipril Levothyroxine 9/12/2018 1:12 PM  
69 Blood pressure Control 9/12/2018 1:09 PM  
70 Psoriasis 9/12/2018 1:06 PM  
71 Citalopram, fexafendadine 9/12/2018 1:05 PM  
72 Amitriptyline for muscle spasm, Tolterodine for bladder control both connected to MS 9/12/2018 1:01 PM  
73 Shampoo 9/12/2018 12:53 PM  
74 High blood pressure 9/12/2018 12:49 PM  
75 Prosifired 9/12/2018 12:49 PM  
76 Nasal spray 9/12/2018 12:46 PM  
77 Sertraline, Sumatriptan, Neditol 9/12/2018 12:46 PM  
78 High chloolesterol 9/12/2018 12:43 PM  
79 Inhaler and co-codamol 9/12/2018 12:37 PM  
80 Diabetes Hyperterusion 9/12/2018 12:35 PM  
81 Thyiziod 9/12/2018 12:30 PM  
82 Blood pressure 9/12/2018 11:58 AM  
83 Thyroid and Anytriplene 9/12/2018 11:54 AM  
84 Sertraline 9/12/2018 11:42 AM  
85 Too many to list 9/12/2018 11:38 AM  
86 Tramadol and anti-depressants 9/12/2018 11:36 AM  
87 Blood pressure 9/12/2018 11:15 AM

88 Epilepsy 9/12/2018 11:14 AM  
89 Heart failiure 9/12/2018 11:13 AM  
90 Various 9/12/2018 10:52 AM  
91 LVD AF 9/12/2018 10:46 AM  
92 Blood pressure and cholestrol 9/12/2018 10:41 AM  
93 A.F 9/12/2018 10:39 AM  
94 Lavzaprazole 9/12/2018 10:33 AM  
95 HRT Migrane prevent 9/12/2018 10:21 AM  
96 Reeumatid arthritis 9/12/2018 10:16 AM  
97 Various 9/12/2018 9:57 AM  
98 Seroxat and femoston 9/12/2018 9:56 AM  
99 Diabetes 9/12/2018 9:54 AM  
100 High blood pressure and high cholestrol 9/12/2018 9:44 AM  
101 Arthritus 9/12/2018 9:40 AM  
102 Alendronic acid, amlodipine and lansoprazole 9/12/2018 9:37 AM  
103 Rivaroxaban 9/12/2018 9:33 AM  
104 Paracetamol 9/12/2018 9:31 AM  
105 POM 9/12/2018 9:29 AM  
106 Co-codomol and Celuizine hydrochloride 9/12/2018 9:27 AM  
107 High Cholestrol 9/12/2018 9:23 AM  
108 Seretide inhaler, Betnovate, nasal spray and hydrocorstitode cream 9/11/2018  
4:25 PM  
109 Various- blood thinning and heart 9/11/2018 4:18 PM  
110 Epilepsy 9/11/2018 4:15 PM  
111 Bratius, Ventolin, Atimos, Eyedrops 9/11/2018 4:12 PM  
112 Contraceptive pill and anxiety tablets 9/11/2018 4:10 PM  
113 Contraceptive pill 9/11/2018 4:08 PM  
114 Ganfort, Eye drops, Lisinopril, Rheumatoid arthens 9/11/2018 4:01 PM  
115 High Blood pressure 9/11/2018 3:58 PM  
116 Prefer not to state 9/11/2018 3:55 PM  
117 Blood pressure 9/11/2018 3:51 PM  
118 Anti-depressant, my children have have movacol, senna, gluten free bread,  
sertlaline, microgejnon for mood fluctuation (not contraception)  
119 Ramapril- eye drops 9/11/2018 3:34 PM  
120 Paracetamol and Codene 9/11/2018 3:14 PM  
121 Crohns Disease 9/11/2018 3:12 PM  
122 Propranolol 9/11/2018 3:01 PM  
123 Various POM's 9/11/2018 2:57 PM  
124 Fexofenadine 9/11/2018 2:51 PM  
125 Asprin, Atov astatin, Brattus, Salbutamol 9/11/2018 2:42 PM  
126 Blood pressure, thyroid-hypo 9/11/2018 2:31 PM  
127 Bisopodol and apixaban 9/11/2018 2:29 PM  
128 Contraception 9/11/2018 2:24 PM  
129 Heart Problems 9/11/2018 2:22 PM  
130 Itlylo tear drops, hay fever tablets and nasal spray sestraline 9/11/2018 1:59 PM  
131 BP Tablets, thyroxine, fluoxetine, pain relief meds 9/11/2018 1:54 PM  
132 Blood pressure / chlorestrol 9/11/2018 1:52 PM  
133 Levothyroxine and pregabalin 9/11/2018 1:38 PM  
134 Asthma 9/11/2018 1:34 PM  
135 Ramipril 9/11/2018 1:16 PM

136 Furosemide 9/11/2018 1:13 PM  
137 Various conditions 9/11/2018 1:05 PM  
138 Salbutamol 9/11/2018 1:01 PM  
139 Lansoprazole, naproxen, paracetamol, pregabalin, tramadol, antidepressants  
9/11/2018 12:59 PM  
140 Sertraline and the contraceptive pill 9/11/2018 12:56 PM  
141 Acid reflux 9/11/2018 12:47 PM  
142 AF 9/11/2018 12:37 PM  
143 atorvastatin and amlodipine 9/11/2018 12:05 PM  
144 Too many 9/11/2018 11:58 AM  
145 Depression 9/11/2018 11:54 AM  
146 Inhalers for asthma 9/11/2018 11:51 AM  
147 Tamoxifen 9/11/2018 11:41 AM  
148 Fibromyalgia Asthma 9/11/2018 11:29 AM  
149 Heart attack 9/11/2018 10:50 AM  
150 Blood pressure 9/11/2018 10:47 AM  
151 Inhaler 9/11/2018 10:41 AM  
152 BP and DVT 9/11/2018 10:39 AM  
153 Diabetic 9/11/2018 10:37 AM  
154 Skin conditions 9/11/2018 10:16 AM  
155 Gasapentin, fostair, ventolin, flu 9/11/2018 10:05 AM  
156 Several 9/11/2018 10:02 AM  
157 IBS, BP 9/11/2018 9:58 AM  
158 Ursodeoxycholic acid, Citalopram, Ferrus sulphate, Alovastatin, Eye drops  
(Glaucoma) 9/11/2018 9:54 AM  
159 Loratadine and fluticasone 9/11/2018 9:51 AM  
160 Cancer/ BP 9/11/2018 9:46 AM  
161 Inhalers 9/11/2018 9:18 AM  
162 Pain Relief- store products, Anti-depressant 9/11/2018 8:57 AM  
163 Blood pressure 9/11/2018 8:40 AM  
164 Sertraline 9/10/2018 12:29 PM  
165 polychistic ovarian 9/10/2018 12:24 PM  
166 BP, Cholesterol R, Prostate fentanyl, tramadol, paracetamol 9/10/2018 12:19  
PM  
167 Anxiety & Depression 9/10/2018 12:14 PM  
168 Asthma 9/10/2018 11:36 AM  
169 All my needs 9/10/2018 11:34 AM  
170 Cholesterol 9/10/2018 11:25 AM  
171 Boots blood pressure tablets & Anti Depressants 9/10/2018 11:18 AM  
172 Heart Valve Leak Blood pressure AF 9/10/2018 10:58 AM  
173 Depression 9/10/2018 10:54 AM  
174 Statins 9/10/2018 10:51 AM  
175 Sertraline, Atenolol, Doxazosin, Amitriptyline, Symbicort 9/10/2018 10:43 AM  
176 Desloratadine Hayfever tablets 9/10/2018 10:31 AM  
177 Escitalopram 9/10/2018 10:25 AM  
178 Lanotrogine 9/10/2018 10:22 AM  
179 Anti-depressants statins & Pain relief for MS 9/10/2018 9:50 AM  
180 Asthma medications 9/10/2018 9:41 AM  
181 Allopurinol 9/10/2018 7:28 AM  
182 Citalopram 9/9/2018 1:48 PM

183 Long term illness 9/7/2018 4:07 PM  
184 Diabetes 2, High BP, Chronic Back Pain (Stenosis), Asthma 9/7/2018 3:44 PM  
185 T.I.A 9/6/2018 11:50 AM  
186 Blood pressure, Cholesterol 9/5/2018 8:30 PM  
187 diabetes,cholesterol 9/5/2018 10:33 AM  
188 Various 9/4/2018 11:53 AM  
189 Lanzoprazole 9/3/2018 6:39 PM  
190 Asthma meds, meberverine and ppis 9/3/2018 5:57 PM  
191 Ulcerative colitis asacol 9/3/2018 3:56 PM  
192 Degenerative spinal problem 9/3/2018 2:32 PM  
193 Multiple medications 9/3/2018 2:16 PM  
194 Asthma and hayfever 8/30/2018 4:36 PM  
195 High blood pressure 8/30/2018 4:00 PM  
196 asthma cholesterol high blood pressure 8/30/2018 10:36 AM  
197 many conditions long term 8/29/2018 2:13 PM  
198 multiple 8/29/2018 1:40 PM  
199 Reflux Esophagitis, Hypertension, Arthritis, Ischaemia of the heart 8/28/2018 11:16 AM  
200 Metformin500mg Clopidogrel.75mg  
Levothyroxine.75mgAmlodipine5mg.Bezafibrat200mge  
Isossorbide mononitrate 30mg Pavastatin40mg Aspirin 75mg Glyceryl trinitrate  
spray  
201 Lamotrigine 8/21/2018 6:16 PM  
202 COPD/Heart Failure/Diabetes/High Cholesterol/Anxiety/Blepharitis/Disseminated  
superficial porokeratosis 8/21/2018 5:08 PM  
203 Anal fissure 8/20/2018 6:28 PM  
204 Allergies 8/20/2018 3:10 PM  
205 Hay fever medicine, diabetic medicine, cramp, cholesterol 8/20/2018 3:08 PM  
206 Paroxetine and Amitriptyline 8/17/2018 5:35 PM  
207 Cocodamol30/500 Sulfasalazine, nasonex spray, ceterizine , Ramipril,  
Amlodipine 8/16/2018 1:10 PM  
208 High blood pressure 8/16/2018 9:51 AM  
209 Hay fever allergy 8/14/2018 8:50 PM  
210 Depression 8/14/2018 2:27 PM  
211 Menopausal night sweats 8/14/2018 9:01 AM  
212 Roaccutane and amitriptyline 8/13/2018 9:53 PM  
213 Lamotrigine 8/13/2018 11:10 AM  
214 Hypertension 8/10/2018 7:43 PM  
215 Simvastatin; Hylo-forte; Xailin 8/10/2018 2:39 PM  
216 Back,leg,arm and shoulder pain 8/10/2018 2:17 PM  
217 Son's serious hayfever 8/9/2018 6:07 PM  
218 Mental health, fibromyalgia, chronic migraine, to combat side effects from other  
medications. 8/4/2018 11:38 AM  
219 statin 8/3/2018 3:10 PM  
220 Asthma, constipation, patch for menopause and reflux (duodenal ulcer) 8/3/2018  
10:30 AM  
221 Diclafenac ointment 8/2/2018 11:57 PM  
222 osteoporosis 8/2/2018 4:20 PM  
223 Roscea 8/1/2018 2:00 PM

224 methotrexate, folic acid, tramadol, amitriptyline, lansaprazole, Lisinopril  
levothyroxine,simvastatin. I am also vitamin D deficient, and agreed with the doctor  
that I will buy my own tablets for that. 8/1/2018 8:30 AM

225 Thyroxine 7/31/2018 8:42 PM

226 Inhaler 7/31/2018 7:43 PM

227 Underactive Thyroid 7/31/2018 7:30 PM

228 None 7/31/2018 6:56 PM

**B**

## **FURTHER UNEDITED COMMENTS (*sic*) AND DATE AND TIME OF COMMENT**

- 1 The hypromellose eye drops 9/17/2018 1:49 PM
- 2 But I can afford it. It might be different for someone who cannot afford it. 9/17/2018 1:37 PM
- 3 Already do 9/17/2018 1:23 PM
- 4 Do so already 9/17/2018 1:13 PM
- 5 Advised to take colecalciferol due to renal disease 9/17/2018 1:06 PM
- 6 However, it is worrying that this is happening. Surely there should be a middle ground. NHS should only pay what it costs the pharmacy not prescription charge. Further, the responsibility is put on the pharmacist to give the correct medication- this should be responsibility of the GP as he has the records.9/17/2018 12:55 PM
- 7 Medication for headaches as such. I don't mind paying over the counter 9/12/2018 4:27 PM
- 8 If medicines cost cheaper, I would be happy to pay for them. However it would be discriminatory towards the elderly/ disabled/ single parents/ low paid and unemployed 9/12/2018 4:15 PM
- 9 We already pay enough national insurance contributions, just because we work we are being punished, yet people on benefits get everything free. Unfair to the working class 9/12/2018 4:02 PM
- 10 Definitely for short term, would the medication be better from the NHS if needed for long term 9/12/2018 3:52 PM
- 11 Pharmacy and GSL medicines should be for purchase from the appropriate outlet from medicines should be the principal ones on prescription 9/12/2018 3:46 PM
- 12 Gaviscon 9/12/2018 3:33 PM
- 13 as long as sufficient notice is given to the patient of any withdrawal of prescribed items. As long as the items withdrawn from prescription are available locally (it is important that older people who cannot drive or have no means of travelling a mile or two are not made to suffer 9/12/2018 3:30 PM
- 14 Because I have several long term conditions EDS/ME/CFS/ The NHS needs to negotiate and get their medications as cheaply as Boots and, therefore they will not cost me 9/12/2018 3:18 PM
- 15 Totally agree with purchasing over the counter medication 9/12/2018 3:08 PM
- 16 I have paid it to the service all my life so I am entitled 9/12/2018 2:59 PM
- 17 I need antiacid tablets on a regular basis 9/12/2018 2:31 PM
- 18 N/A the issues are not short term 9/12/2018 2:03 PM
- 19 Always do now, consult local pharmacist at chemist 9/12/2018 2:00 PM
- 20 Unless the symptoms get worse 9/12/2018 1:50 PM
- 21 I already do this- laxatives, gaviscon and eye drops etc 9/12/2018 1:31 PM
- 22 The NHS as a major buyer should negotiate equal or lower purchase prices 9/12/2018 1:21 PM
- 23 I do require 200 co-codamol every month for pain so would this be affected by this change? 9/12/2018 1:14 PM
- 24 I already purchased aspirin rather than getting on prescription 9/12/2018 1:09 PM
- 25 I could not afford over the counter medicines that I would need on benefits 9/12/2018 1:06 PM
- 26 absolutely no problems with this paracetamol is only zap 101 9/12/2018 12:57 PM
- 27 Always have done this 9/12/2018 12:32 PM
- 28 Don't know 9/12/2018 11:14 AM

29 If it helps the NHS then yes I would pay for these things. I am only on sick pay at the moment so I do find this hard but if I was working yes I would be willing  
9/12/2018 11:13 AM

30 I already do! 9/12/2018 10:58 AM

31 Why does it cost the NHS more? 9/12/2018 10:37 AM

32 It will help 9/12/2018 10:18 AM

33 Rarely pay for these so happy to pay 9/11/2018 4:15 PM

34 Usually a similar price if not cheaper over the counter 9/11/2018 4:13 PM

35 For myself not a problem, however having a son with excema and hay fever I would prefer for him to still receive these on prescription

36 I do anyway- However as someone who has had no choice but to claim benefits due to being a carer, I now have to pay for GF bread and pasta and so on. This can cost me £20 or more a month. For people on benefits this will affect them. 9/11/2018 3:50 PM

37 There is too much waste in the NHS it works to be sorted out and run properly  
9/11/2018 3:34 PM

38 Only up to a certain amount e.g. £10 and for a limited period. 9/11/2018 2:57 PM

39 Vitamins, moisturisers- aveeno 9/11/2018 2:51 PM

40 Short term I do, but e.g. hay fever etc ongoing 9/11/2018 1:59 PM

41 As long as vulnerable people still have access via NHS 9/11/2018 1:45 PM

42 I am 60 years old and always paid for my tablets e.t. Why should I have to pay now? 9/11/2018 12:59 PM

43 Happy to continue to purchase anything that doesn't need a prescription  
9/11/2018 12:42 PM

44 Regular use of all 9/11/2018 11:58 AM

45 If the prescription can be bought e.g. paracetamo. It shouldn't be prescribed at such a cost to patient and the NHS 9/11/2018 11:24 AM

46 Find it easier to have on prescription 9/11/2018 10:50 AM

47 It depends on what the illness is and the cost of the medication 9/11/2018 9:43 AM

48 Pain relief medication is only available in boxes of 16, this is not enough for me as I use more and 500G 9/11/2018 8:57 AM

49 I do this anyway 9/10/2018 11:40 AM

50 These should be paid for by the user and not the NHS 9/7/2018 4:07 PM

51 So long as not a slippery slope to all prescriptions. 9/6/2018 11:50 AM

52 If I can still get out to do this 9/5/2018 8:30 PM

53 feel this is reasonable 9/4/2018 2:55 PM

54 I didn't even realise I could go to my gp for a prescription for these things.  
9/3/2018 7:03 PM

55 I don't think my GARD medication is available over the counter so I am concerned where this will leave me. I am happy to pay for my medication. 9/3/2018 6:39 PM

56 Being on a fixed income with ever rising living costs, I feel that this is the thin end of a very big wedge. 9/3/2018 2:32 PM

57 I have said "no" - in general I don't have an issue with this for short-term conditions (even though if it was prescribed I wouldn't need to pay for it) but my father-in-law, who is end of life, is still being told to take paracetamol but that it can't be prescribed, so we have to buy it. I don't think that is right at all. 9/1/2018 6:42 PM

58 It makes sense, most of them are not the £8 of the prescription cost and it would clearly benefit the NHS 8/30/2018 4:00 PM

59 Yes only if short term 8/29/2018 2:13 PM

60 Not always about cost, something mild ie. infant colic may be an opportunity for the GP to check mums well-being. If mums are stopped visiting for something that keeps them awake all night this could have a detrimental impact on a person the 8/28/2018 11:09 PM

61 personally it makes sense to buy otc as it's cheaper for me, but also where medications are available otc they shouldn't need patients to see a Dr in the first place. Patients should be educated to seek help from a pharmacist or 111 initially and treat themselves so that resources can focus on patients who do need Dr intervention 8/21/2018 6:16 PM

62 Why can't the nhs give them at this cost? 8/20/2018 6:28 PM

63 Yes, but my medication is fexofenadine for allergies, particularly hayfever between April - September when it is very bad. No other anti-histamines work to reduce my symptoms and without fexofen I am sneezing constantly and this then turns in to a sinus infection. 8/20/2018 3:10 PM

64 Yes as this helps the NHS. 8/20/2018 3:08 PM

65 No - because due to my progressive illness (MS) I am unable to work and I have an exemption certificate for prescriptions as I am on a low income. Making certain exemptions for the prescribing of medication that is available over the counter will be detrimental to my health as I will not be able to afford it. 8/17/2018 5:35 PM

66 This depends very much on what it is for. There is one probiotic, VSL#3 which is prescribable for the maintenance of pouchitis. This is a serious condition and affects a very small number of patients so the economic burden to the CCG is insignificant. However you can save money by prescribing Vivomixx as this is not only less expensive than VSL#3 but also contains the original De Simone formulation, or DSF which VSL#3 does not as they changed the formulation 2 years ago. The CCG can therefore reduce costs and ensure that patients who really need this product to treat their condition receives a genuine product at a low price 8/16/2018 6:39 PM

67 Please ask yourself this very simple question - WHY CAN THIS MEDICATION BE BOUGHT OVER THE COUNTER MUCH MORE CHEAPLY THAN IT CAN BE OBTAINED BY THE NHS??? ..... my suggested answer is that you (the NHS) have done a very bad job over the years at negotiating competitive costs and now you are reaping the rewards of your previous incompetence in that the drugs concerned are being blocked. What else would anyone do???? 8/14/2018 10:17 PM

68 I believe everyday items should be bought over the counter by everyone ie even those with hypothesis problems and diabetes etc. Patients just order prescriptions each month without considering the cost. Oh yes I will have another inhaler at £62 (or more) I think I lost the other one! 8/14/2018 9:01 AM

69 Most people would, I believe buy such items from pharmacies. 8/10/2018 7:43 PM

70 I buy that type of item already over the counter, but it is expensive if you are on a tight budget. 8/10/2018 2:39 PM

71 I do now anyway always have even for things for the children . My gp has always told me what to get 8/10/2018 2:17 PM

72 Concerned that Son, Daughter and Husbands serious / severe hay fever and allergies will still be available on prescription as they need max dose fexofenadine 8/9/2018 6:07 PM

73 I already get a lot of medications on prescription that I cannot get OTC that help keep me stable and in regards to me mental health, keep me safe and alive, so I do

not have a problem with paying for OTC treatments for short term or mild illness.

8/4/2018 11:38 AM

74 Already do so 8/2/2018 11:57 PM

75 This is a silly question, it is not as clear as yes or no. A real example is vitamin D. When first diagnosed with deficiency I was put on a very high dose for a while (I think a couple of months but certainly several weeks), which was then reduced to a lower dose for maintenance. The GP asked if I would be prepared to buy them myself and I 'negotiated' that the practice would give me prescriptions for the high doses, as the amount I was prescribed initially would have cost me in excess of about £30 per week, as the doses sold in pharmacies and other legitimate shops are low dose, so would have needed more than 10 pills a day. Not only that but getting enough dosage would require either a good stock of money lying around to afford all the pills needed, or necessitate very frequent trips to buy them, which is not compatible with full time working. It is interesting you use the term 'short term illnesses and conditions' because Vit D deficiency is treated for life. Does that mean it will remain as a prescription available item? This would need to be clarified before implementation. That said, there are some treatments which I feel can be bought rather than prescribed which are low cost. Has consideration been given to none financial implications? Again a real life example is that paracetamol is cheap and readily available but I am prescribed up to 8 a day as needed. That means a minimum of 2 trips to buy enough for a week, when my conditions flare up. When they flare up is the time I am least able to get out of the house. Could there be a generic letter that comes from GP practices that explains the need for the patient to buy more than 32 pills, which can be shown to pharmacists (not other shops)?

Getting enough supplies is very aggravating, paying for them is not. 8/1/2018 8:30 AM

76 I already spend a fair amount on vitamins and minerals and have never expected the NHS to fund these. However I find the current restrictions on the purchase of paracetamol inconvenient, especially when, if I also buy Calpol for my Grandson I'm precluded from buying two packets of 16 paracetamol!!! 7/31/2018 8:42 PM

**C**

**Do you agree that medication for self-limiting conditions should not be prescribed?**

**FURTHER UNEDITED COMMENTS (*sic*) WITH DATE AND TIME OF COMMENT**

- 1 They should never have been prescribed, I have bought my own for years  
9/17/2018 1:42 PM
- 2 Depends on the person e.g age and their condition 9/17/2018 1:16 PM
- 3 Dependent on illness or condition for example, cold sores, sinuses. 9/17/2018 1:08 PM
- 4 Self limiting conditions can be uncomfortable and painful. The correct medicine needs to be prescribed by a doctor. Again, the doctors knows the medical history.  
9/17/2018 12:55 PM
- 5 Allow the body to heal it self 9/17/2018 12:44 PM
- 6 There are many medications which are available upon prescription only 9/12/2018 4:15 PM
- 7 For certain patients who have certain illnesses should be granted every medication that they need 9/12/2018 4:02 PM
- 8 The major saving is not in the cost of otc medicines but the cost of consultation with a GP so a system e.g. triage needs to be delivered to avoid unnecessary GP consultation 9/12/2018 3:46 PM
- 9 Depends what other conditions the patient has 9/12/2018 3:37 PM
- 10 But not for me because of my long term illnesses 9/12/2018 3:18 PM
- 11 So why prescribe if this is the case, penny pinching NHS 9/12/2018 2:59 PM
- 12 In general yes, but there could be exceptions for people with weak immune system which does not clear up quickly 9/12/2018 2:57 PM
- 13 That depends E.G; if painfully ill or long term it ought to be on prescription 9/12/2018 2:49 PM
- 14 Need to have a uniform policy for this, it varies so much between each surgery and the CCG's 9/12/2018 2:36 PM
- 15 This question should be answered by professionals 9/12/2018 2:03 PM
- 16 Unless you have a low immune system like myself 9/12/2018 1:50 PM
- 17 Unless the patient is at risk from some other condition 9/12/2018 1:47 PM
- 18 Although I worry that by the time some people may not realise a condition is not self limiting it may be too late to treat the same serious condition e.g brain tumor. The least time to get to G.P appointment make this extremely dangerous 9/12/2018 1:31 PM
- 19 Depends on the condition and the short term impact on the patient 9/12/2018 1:21 PM
- 20 Fexafindine only works for my hayfever and I cannot buy over the counter 9/12/2018 1:05 PM
- 21 Yes makes perfect sense 9/12/2018 12:57 PM
- 22 I don't like to go to the doctors, it is easier to go for example to Tesco and buy it straight away 9/12/2018 11:18 AM
- 23 Unless it comes back 9/12/2018 11:14 AM
- 24 Special needs people don't have capacity to buy or know if what is needed so to stop them or anyone trying to cure patients is ridiculous 9/12/2018 10:52 AM
- 25 Life- changes should be followed 9/12/2018 10:33 AM
- 26 There is no need 9/12/2018 10:18 AM
- 27 Depends how bad it is 9/12/2018 9:31 AM
- 28 As long as the individual can afford to purchase it themselves- otherwise then I agree 9/11/2018 4:08 PM

29 providing it is not causing pain/ anxiety 9/11/2018 3:58 PM

30 I agree that the NHS needs to save money. For above/ many people this will not be a problem, but this will hit the poor and the vulnerable. 9/11/2018 3:50 PM

31 People on a low income / benefits would struggle to pay especially if they had to have time off work for appointment / illness and cannot afford to pay 9/11/2018 3:20 PM

32 Depends what the condition is 9/11/2018 2:27 PM

33 Need is to allow virus etc to have time to go through system 9/11/2018 1:59 PM

34 Depends on level of pain having 9/11/2018 1:54 PM

35 Depends on the type of pain you (the person) are going through 9/11/2018 1:50 PM

36 If it clears up quicker and there's a patient need it should be available 9/11/2018 1:45 PM

37 As long as the higher strength pain killer is available on prescription only and I would be able to get more from a doctor, letter or pharmacy 9/11/2018 1:28 PM

38 Depends on if deliberating for the time period 9/11/2018 12:50 PM

39 May cause a reaction with other meds being prescribed 9/11/2018 12:47 PM

40 Some people can't always afford these medications 9/11/2018 11:43 AM

41 Depends on the condition 9/11/2018 11:41 AM

42 Depends on the patients circumstances 9/11/2018 11:37 AM

43 Depends if you get free prescriptions- i.e elderly/ children 9/11/2018 11:22 AM

44 Depending on time it takes to clear up, if short-term then ok. 9/10/2018 12:29 PM

45 Don't know 9/10/2018 11:59 AM

46 Depends on the severity of the condition 9/10/2018 11:40 AM

47 Depends on patient 9/10/2018 11:34 AM

48 Personally if I get a cold I often succumb to a chest infection due to my asthma. 9/10/2018 10:43 AM

49 Unless causing discomfort/embarrassement 9/10/2018 10:22 AM

50 In principle yes but some conditions, depending on patient age, severity etc, can take a long time to clear up. So maybe exceptions to a blanket policy. 9/6/2018 11:50 AM

51 Unless there are overriding reasons why this should happen in the opinion of a doctor 9/5/2018 8:30 PM

52 use funds for more appropriate treatments 9/5/2018 10:33 AM

53 But not all patients have the knowledge or understanding about this and what alternatives are available, especially vulnerable people. 9/4/2018 11:53 AM

54 Will guidance be issued for if it does not clear up ie bacterial infection instead of a virus. 9/3/2018 6:39 PM

55 As long as there are alternative, funded methods available to help cope with the condition until it heals. 9/3/2018 2:32 PM

56 People should not be going to the doctors for coughs/colds etc unless they have had symptoms for 3+ weeks. 8/30/2018 4:00 PM

57 The fact they are no longer prescribed may confuse patients when to visit the GP, so are more likely to not to visit anyway as they don't want to bother the doctor. The medicine actually states not to use more than 3 days in a row... 8/28/2018 11:09 PM

58 We shouldn't provide anything on the NHS that isn't necessary. 8/21/2018 6:16 PM

59 Although things may clear up they may be very painful before they do, or take longer to clear up without medication 8/20/2018 6:28 PM

60 Surely medication speeds up the process of recovery? If you have to go to work a self-limiting condition can cause you to feel awful and risk having sick days.

8/20/2018 3:10 PM

61 Yes because it's a short term use and you can save the NHS money. 8/20/2018 3:08 PM

62 Except as above 8/16/2018 6:39 PM

63 Tell the patient what's required and leave them to get it themselves - it will probably be cheaper than the Prescription Charge anyway. 8/14/2018 10:17 PM

64 Sometimes seems unfair though, as some patients with out long term conditions still get these medications - it really all depends on which doctor you see 8/14/2018 2:27 PM

65 So many minor illnesses get better on their own. 8/14/2018 9:01 AM

66 I had not heard that phrase before. It is a complex idea to put forward. The condition might well go on its own but could be very painful in the process (eg cold sore) 8/10/2018 2:39 PM

67 OTC medicine should be sought if needed. 8/4/2018 11:38 AM

68 Generally yes, however I get strep throat and I get very ill temperatures of 39.8, throat swelling with strep and without antibiotics I'm really really scared what will happen. It started after a serious bout of glandular fever in my teens and comes once or twice a year. I'm a carer for a disabled child and it's usually at times when she's got ill with something different I get so run down that I get ill with tonsillitis. 8/3/2018 10:30 AM

69 However those in poverty who cannot buy over the counter need support especially if children vulnerable adults involved 8/2/2018 11:57 PM

70 Depends on the timescale and the person's other medical needs and conditions. 8/1/2018 2:00 PM

71 I think this is travelling into a shady area. A torn muscle could be described as self-limiting but is exceptionally painful. Everyone I know who has had this (I am linked to a mens hockey team) has required pain relief stronger than can be bought over the counter. Therefore, it may be self-limiting but a GP could (and many would) decline a request for painkillers as it is a self-limiting condition. This is just one example off the top of my head, there will be many more, but there is a very fine line when it comes to the difference between 'want' and 'need' and I don't think this has been sufficiently ironed out yet. 8/1/2018 8:30 AM

72 Prescribing a medicine for a condition that will clear up on its own is quite clearly a waste of money.

**D**

### **Q9. UNEDITED RESPONSE (sic) AND RESPONSE DATE AND TIME**

- 1 Paracetamol. migrane tablets, calpol and hayfever syrup 9/17/2018 1:54 PM
- 2 Painkillers- anti inflammatories for general aches and pains. Tendonopathy. Hydrocortisone and cream for dry skin 9/17/2018 1:52 PM
- 3 Paracetamol- tesco 9/17/2018 1:49 PM
- 4 Ibuprofen/ paracetamol- tesco 9/17/2018 1:46 PM
- 5 Pain, flu/cold symptoms, cold sores, dry skin conditions 9/17/2018 1:45 PM
- 6 Paracetamol- back pain - supermarkets Neurofen- back pain - supermarkets vitamins supermarket 9/17/2018 1:42 PM
- 7 Arthritis 9/17/2018 1:37 PM
- 8 Cod liver oil, glucosomine 9/17/2018 1:37 PM
- 9 Cetrizine recommended by GP and purchased 9/17/2018 1:34 PM
- 10 Asprin 9/17/2018 1:27 PM
- 11 Cold remedies, sore throat remedies, glucosamine- from supermarkets 9/17/2018 1:23 PM
- 12 Paracetamol for various aches and pains from supermarkets 9/17/2018 1:16 PM
- 13 Back pain 9/17/2018 1:16 PM
- 14 Hayfever 9/17/2018 1:14 PM
- 15 Turmeric (arthiritis) 9/17/2018 1:13 PM
- 16 Vitamin D 9/17/2018 1:12 PM
- 17 Diarrhoea from chemist 9/17/2018 1:10 PM
- 18 Pain killers Olbas oil for sinuses 9/17/2018 1:08 PM
- 19 Cocodamol 9/17/2018 1:06 PM
- 20 Eyedrops- pharmacy 9/17/2018 1:02 PM
- 21 Paracetamol for occasional aches and pains Chemist and supermarket Anusol - piles Glycerine and honey - irritable coughs 9/17/2018 1:01 PM
- 22 Cough and cold- chemist 9/17/2018 12:59 PM
- 23 Headache/joint pain 9/17/2018 12:55 PM
- 24 Ibuprofen, paracetamol, cold and flu syrups. 9/17/2018 12:44 PM
- 25 Any medicine you don't need a prescription for 9/12/2018 4:27 PM
- 26 Hayfever, vitamins, iron supplement 9/12/2018 4:15 PM
- 27 Skin, mouth ulcers 9/12/2018 4:06 PM
- 28 Bad knee and ankle etc 9/12/2018 4:03 PM
- 29 paracetamol, ibuprofen, cough remedies 9/12/2018 4:02 PM
- 30 ibuprofen and paracetamol 9/12/2018 3:54 PM
- 31 Paracetamol from local shops 9/12/2018 3:52 PM
- 32 paracetamol 9/12/2018 3:49 PM
- 33 Pain relief, antihistamines for stings etc OTC hand cream all from pharmacy 9/12/2018 3:46 PM
- 34 Colds or headaches 9/12/2018 3:39 PM
- 35 General aspirin 9/12/2018 3:37 PM
- 36 Retimax Max for mocular degeneration 9/12/2018 3:30 PM
- 37 Vicks sinex, ibuprofen and paracetamol 9/12/2018 3:26 PM
- 38 Paracetamol from supermarkets 9/12/2018 3:23 PM
- 39 Dry Skin Condition 9/12/2018 3:20 PM
- 40 paracetamol and ibuprofen 9/12/2018 3:19 PM
- 41 NeilMed Sinus rinse for rhinitis, cost £20. Some items magnesium, vitamins B1 and 12, Rennie for indigestion. Pharmacy or grocery wherever the cheaper 9/12/2018 3:18 PM
- 42 Vitamins, Painkillers, Cold and flu remedies 9/12/2018 3:13 PM

43 Cough, initial pain relief and thrush 9/12/2018 3:08 PM  
44 Ibuprofen for neck and joint pain. Along with the statins it is the only thing I take it is the only medication that helps with my pain 9/12/2018 3:07 PM  
45 Dry skin 9/12/2018 2:59 PM  
46 Skin Conditions, athlete's foot 9/12/2018 2:57 PM  
47 Vitamin D, Vitamin C, Pain Killers, Votorol from the chemist 9/12/2018 2:52 PM  
48 Vitamins Glucosamine 9/12/2018 2:49 PM  
49 Just general pain killers etc as and when needed 9/12/2018 2:46 PM  
50 Paracetamol 9/12/2018 2:41 PM  
51 Hayfever, insect Bites, headaches 9/12/2018 2:40 PM  
52 General painkillers, indigestion remedies and creams for insect bites 9/12/2018 2:36 PM  
53 Paracetamol occasional headache 9/12/2018 2:35 PM  
54 Paracetamol for pain relief 9/12/2018 2:31 PM  
55 Vitamin D- Pharmacy. Cod liver oil- pharmacy or Holland Barrett 9/12/2018 2:26 PM  
56 Paracetamol Headaches, Ibuprofen, Stiff joints 9/12/2018 2:23 PM  
57 Ibuprofen for arthritic pain from supermarket. Paracetamol for arthritic pain from supermarket. Calcium carbonate for acid reflux from supermarket. 9/12/2018 2:11 PM  
58 Ibuprofen and paracetamol bought from the supermarket 9/12/2018 2:06 PM  
59 Visionaid- Boots/ chemist/ H & Barrat 9/12/2018 2:03 PM  
60 Golden eye cream, Dry eye mist spray, Paracetamol, Votorol, travel pills and pile treatment 9/12/2018 2:00 PM  
61 Paracetamol- painkillers. Indigestion tablets- heart burn and indigestion 9/12/2018 1:50 PM  
62 Vocal cones from the pharmacy 9/12/2018 1:47 PM  
63 Aspirin 9/12/2018 1:33 PM  
64 I purchase Gaviscon from the supermarket when I have forgotten to buy any from the Eppingham dispensary 9/12/2018 1:31 PM  
65 Insect bites rashes headaches, supermarket or pharmacy (least likely) 9/12/2018 1:31 PM  
66 Headaches/Migrain, Pharmacy 9/12/2018 1:23 PM  
67 Ibuprofen from the pharmacy 9/12/2018 1:22 PM  
68 Pain relief ibuprofen, vitamins, pharmacy or supermarket where they are cheaper 9/12/2018 1:21 PM  
69 Dry eyes 9/12/2018 1:18 PM  
70 Cold remedies and Votorol 9/12/2018 1:14 PM  
71 Paracetamol, headache, Lloyds chemist 9/12/2018 1:12 PM  
72 Aspirin to work in conjunction with B.P medication purchased at pharmacy 9/12/2018 1:09 PM  
73 Painkillers with codeine from Boots for bad bones and pain from psoriasis 9/12/2018 1:06 PM  
74 Paracetamol general pain, local chemist/supermarket 9/12/2018 1:05 PM  
75 Vitamin D 3 Boots recommended by hospital many years ago for potential osteoporosis 9/12/2018 1:01 PM  
76 Headaches 9/12/2018 12:58 PM  
77 Paracetamol, Ibuprofen, Vitamins, cough/flu medication 9/12/2018 12:57 PM  
78 Paracetamol for headaches and OTC ear drops 9/12/2018 12:53 PM  
79 Dry skin and pain killers 9/12/2018 12:49 PM

80 Hayfever 9/12/2018 12:46 PM  
81 Pharmacy or supermarket 9/12/2018 12:43 PM  
82 Paracetamol- to have at home if needed Antihistamines- for allergies 9/12/2018 12:37 PM  
83 Dry skin cream- Tesco's Hay fever tablets- supermarket/ local shop 9/12/2018 12:32 PM  
84 Pain killers, cold and flu tablets 9/12/2018 12:30 PM  
85 Painkillers 9/12/2018 11:58 AM  
86 Co-codomol 9/12/2018 11:51 AM  
87 Paracetamol and anti-diarrhoea from boots or wilko's 9/12/2018 11:42 AM  
88 Painkillers- cream etc All from various supermarkets 9/12/2018 11:36 AM  
89 Tesco- pregnancy vitamins 9/12/2018 11:18 AM  
90 Vitamin D 9/12/2018 11:13 AM  
91 Paracetamol and ibuprofen 9/12/2018 10:58 AM  
92 Ibuprofen and hay fever tablets 9/12/2018 10:52 AM  
93 Paracetamol from Sainsbury's 9/12/2018 10:44 AM  
94 Day eye drops, anti-histamine tablets and vitamin tablets 9/12/2018 10:43 AM  
95 Headaches and general aches and pains 9/12/2018 10:41 AM  
96 Headaches and hay fever 9/12/2018 10:37 AM  
97 If needed, co-codamol 9/12/2018 10:34 AM  
98 Paracetamol 9/12/2018 10:30 AM  
99 Gum disease, fungal nail infections- purchased from any chemist 9/12/2018 10:24 AM  
100 Allergy tablets 9/12/2018 10:21 AM  
101 Pain killers- local chemist and asthma tablets 9/12/2018 10:16 AM  
102 Probiotics, paracetamol, ibuprofen and vitamins 9/12/2018 9:56 AM  
103 Pain relief from supermarkets 9/12/2018 9:54 AM  
104 Paracetamol tablets and liquid, ibuprofen 9/12/2018 9:53 AM  
105 Sciatica, menstrual problems, headaches, aches and pains, anti-histamines, athletes foot, fungal nail infection, toothaches etc 9/12/2018 9:51 AM  
106 Paracetamol 9/12/2018 9:40 AM  
107 Gaviscon, anti-histamines, pain relief 9/12/2018 9:37 AM  
108 Zantac- pain relief 9/12/2018 9:29 AM  
109 Gaviscon and ibuprofen 9/12/2018 9:21 AM  
110 Cough medicine, painkillers and baby ointment 9/12/2018 9:20 AM  
111 Paracetamol and hay fever relief 9/11/2018 4:25 PM  
112 Co-codamol 9/11/2018 4:22 PM  
113 Paracetamol 9/11/2018 4:18 PM  
114 Ad hoc for coughs 9/11/2018 4:15 PM  
115 Gaviscon and paracetamol 9/11/2018 4:13 PM  
116 paracetamol, cough relief, hayever relief, all from supermarkets 9/11/2018 4:08 PM  
117 Germaline 9/11/2018 4:01 PM  
118 Blocked sinus 9/11/2018 3:58 PM  
119 Pain Relief- supermarkets 9/11/2018 3:55 PM  
120 Cold and flu 9/11/2018 3:51 PM  
121 Painkillers and cold remedies. My daughter has a long term pain condition which won't go away and I have arthritis which won't go away. 9/11/2018 3:50 PM  
122 Vitamins, child pain relief, headaches 9/11/2018 3:26 PM

123 Paracetamol/ ibuprofen general aches/ pains e.g. headaches 9/11/2018 3:20 PM  
124 Oral thrush, hay fever 9/11/2018 3:12 PM  
125 Paracetamol, calpol 9/11/2018 3:02 PM  
126 Paracetamol/ ibuprofen for aches and pains, cold medications 9/11/2018 3:01 PM  
127 Eczema, hayfever 9/11/2018 2:51 PM  
128 Vitamins, Digestive things, Skin dryness, Hayfever and pain relief 9/11/2018 2:46 PM  
129 Various 9/11/2018 2:42 PM  
130 Anti acid medication, steroid cream for skin, boots pharmacy 9/11/2018 2:40 PM  
131 Mild pain- paracetamol 9/11/2018 2:31 PM  
132 Antihistamine and paracetamol 9/11/2018 2:27 PM  
133 Coughs, cold and thrush 9/11/2018 2:24 PM  
134 Aches and pains 9/11/2018 2:22 PM  
135 Hayfever tablets 9/11/2018 2:02 PM  
136 Paracetamol, ibuprofen for headaches and back pain 9/11/2018 1:59 PM  
137 Antihistamine for hay fever. Sudafed for sinus congestion etc. Purchased in pharmacy 9/11/2018 1:38 PM  
138 Ibuprofen and paracetamol 9/11/2018 1:34 PM  
139 Cold, cough 9/11/2018 1:28 PM  
140 Vitamin D 9/11/2018 12:59 PM  
141 Ibuprofen 9/11/2018 12:48 PM  
142 Vitamin supplement and ibuprofen from chemist 9/11/2018 12:39 PM  
143 Cough and cold/ flu medication. Cold sores, insect bites. Mainly bought from boots or supermarkets. Whichever is cheapest! 9/11/2018 12:35 PM  
144 Paracetamol 9/11/2018 12:05 PM  
145 Painkillers and vitamins for zinc deficiency 9/11/2018 11:51 AM  
146 Aspirin and antihistamines 9/11/2018 11:44 AM  
147 Hayfever, ibuprofen, paracetamol 9/11/2018 11:43 AM  
148 Sometimes 9/11/2018 11:41 AM  
149 Paracetamol- pain Loratadine- allergy 9/11/2018 11:37 AM  
150 Pain killers and vitamins 9/11/2018 11:32 AM  
151 Pain relief (arthritic) 9/11/2018 11:29 AM  
152 Ibuprofen for pain relief 9/11/2018 11:01 AM  
153 Cough and cold medications purchased from pharmacy 9/11/2018 10:58 AM  
154 Tension Headphones- supermarket 9/11/2018 10:55 AM  
155 N/a 9/11/2018 10:50 AM  
156 Paracetamol for headaches, cough syrups for cough/ cold 9/11/2018 10:41 AM  
157 Paracetamol 9/11/2018 10:39 AM  
158 Paracetamol- migrane/ headaches 9/11/2018 10:35 AM  
159 Headaches/ period pain- paracetamol/ ibuprofen - any shops that sell them 9/11/2018 10:12 AM  
160 Painkillers- local shops 9/11/2018 10:07 AM  
161 Nurofen Plus 9/11/2018 10:04 AM  
162 Imodium 9/11/2018 10:02 AM  
163 Paracetamol 9/11/2018 9:58 AM  
164 Paracetamol, ibuprofen, athletes foot treatment 9/11/2018 9:51 AM  
165 Cough mixture 9/11/2018 9:46 AM  
166 paracetamol 9/11/2018 9:42 AM

167 Anadin, gaviscon 9/11/2018 9:28 AM  
168 Paracetamol, calpol, vitamin C 9/11/2018 9:24 AM  
169 Eye drops for dry eyes, Antihistamines- hayfever, painkillers- occasional headkillers 9/11/2018 9:20 AM  
170 Creams 9/11/2018 8:57 AM  
171 Calpol/ beconase 9/11/2018 8:43 AM  
172 Nasal spray/ anti-histamine/ painkiller - supermarkets 9/11/2018 8:40 AM  
173 Hospital prescribed and I purchased from pharmacy buy my GP prescribed. 9/10/2018 12:24 PM  
174 Dermatitis - I buy steroid cream over the counter. Also painkillers 9/10/2018 12:14 PM  
175 Cough medicine & Paracetamol. chemist 9/10/2018 12:07 PM  
176 Pain relief 9/10/2018 11:40 AM  
177 My business 9/10/2018 11:34 AM  
178 Purchase from the pharmacy for coughs/colds 9/10/2018 11:31 AM  
179 Ear wax, Boots 9/10/2018 11:21 AM  
180 Anti histamines at market Harborough pharmacy 9/10/2018 11:18 AM  
181 Paracetamol - Back & Leg pain 9/10/2018 10:58 AM  
182 Boots skin cream 9/10/2018 10:51 AM  
183 Gaviscon for occasional heartburn 9/10/2018 10:43 AM  
184 cracked heels 9/10/2018 10:31 AM  
185 Pain & pharmacy 9/10/2018 10:25 AM  
186 Aches & pains paracetamol, cold relief medication. insect bite cream pharmacy 9/10/2018 10:22 AM  
187 Eye drops/Hay Fever tablets 9/10/2018 10:12 AM  
188 Paracetamol - Pain relief 9/10/2018 9:57 AM  
189 Paracetamol Ibuprophen from Wilinsons 9/10/2018 9:50 AM  
190 Paracetamol - For headaches and minor aches and pains 9/10/2018 9:41 AM  
191 Dry skin 9/9/2018 1:48 PM  
192 Regurgitation, acid reflux Gaviscon Double Action 9/7/2018 3:44 PM  
193 Mild painkillers for occasional headaches. 9/6/2018 11:50 AM  
194 Hayfever/allergy- Supermarket 9/5/2018 8:30 PM  
195 colds and flu like symptoms 9/4/2018 2:55 PM  
196 Migraine tablets, migraine balm, antihistamines, pain relief creams and gels and patches, eye drops. Purchase from a pharmacy. 9/4/2018 11:53 AM  
197 I go to the pharmacy or supermarket for: Calpol for kids temperature Cough medicine in winter. Thrush treatment from time to time Travel sickness tablets Antihistamines for occasional hives. Treatment for boils Sudocreme for nappy rash/ sunburn/ grazes 9/3/2018 7:03 PM  
198 Cystitis 9/3/2018 6:39 PM  
199 Painkillers 9/3/2018 5:57 PM  
200 Painkillers from supermarket for joint pains; allergy relief. 9/3/2018 2:16 PM  
201 I buy standard painkillers such as Paracetamol and anti-inflammatories such as Ibuprofen 9/1/2018 6:42 PM  
202 Hayfever - anti hystamines from various supermarkets and chemists 8/30/2018 4:36 PM  
203 cough medicine, eye drops, paracetamol 8/30/2018 10:36 AM  
204 cold remedies dioreha 8/29/2018 1:40 PM  
205 Liquid piriton for my daughters allergy, but didn't realise as this was drowsy this was more problematic than her over the prescription 8/28/2018 11:09 PM

206 Analgesics. Cold and cough remedies. Indigestion. eye drops etc. 8/26/2018 3:57 PM

207 Hayfever tablets Painkillers Eyedrops Purchased from chemist 8/24/2018 3:26 PM

208 Paracetamol Ibuprofen Gastro medication for dietary intolerance symptoms (if accidentally eaten) Vitamin D Hydrocortisone cream for eczema All purchased from pharmacies 8/22/2018 10:18 AM

209 Ibuprofen etc for occasional pain relief 8/21/2018 6:16 PM

210 Dry Itchy Scalp. Purchased from a Chemist. Recommended by the GP. 8/21/2018 5:08 PM

211 Painkillers, antihistamines and teething medication 8/20/2018 6:28 PM

212 Eye drops - hayfever 8/20/2018 3:10 PM

213 Cough and cold, fever, thrush, pain relief for carpal tunnel. 8/20/2018 3:08 PM

214 The items I currently buy over the counter are paracetamol and ibuprofen for pain relief. I can purchase these cheaply at supermarkets and high street stores. 8/17/2018 5:35 PM

215 NSAIDs, cold remedy 8/16/2018 6:39 PM

216 Germolene / plasters / eyewash / cold and flu remedies / painkillers / moisturising cream /cough medicine etc 8/14/2018 10:17 PM

217 Headaches, medication bought from pharmacies/supermarkets 8/14/2018 8:50 PM

218 Vitamin D - purchased from superdrug Hypromellose eye drops for dry eye - Lloyds Pharmacy Loratadine - hayfever tablets – Aldi 8/14/2018 2:27 PM

219 Coughs and colds, painkillers 8/13/2018 6:27 PM

220 eczema - hydrocortisone cream 8/13/2018 9:37 AM

221 Antihistamine cream for stings 8/10/2018 7:43 PM

222 Hay Fever 8/10/2018 2:53 PM

223 Vitamins, Gaviscon 8/10/2018 2:39 PM

224 Paracetamol, idpudeanin, capol, cough meds, exma cream. Bum cream all for different things 8/10/2018 2:17 PM

225 purchase OTC from Boots or other pharmacy for most self limiting and minor conditions where OTC available 8/9/2018 6:07 PM

226 Vitamin D - I buy it from somewhere such as Wilkinson or a store that sells OTC medicine cheaply. 8/4/2018 11:38 AM

227 warts, insect bites, sinusitis, athletes goit, headaches etc 8/3/2018 3:10 PM

228 Paracetamol taken once daily before bed re back pain as otherwise can't sleep with pain. Vitamins to support menopause Canestan for infection 8/3/2018 10:30 AM

229 Emollient bath oil and creams vitamins / supplements seasonal items eg for colds hay fever- supermarkets and pharmacies 8/2/2018 11:57 PM

230 Indigestion remedy 8/2/2018 4:20 PM

231 Paracetamol for headaches Ibuprofen for strains Anti-histamine for bites and stings All from Boots 8/1/2018 2:00 PM

232 Most of the items below are from Superdrug I buy Vitamin D tablets for diagnosed deficiency. I buy paracetamol to be taken alongside tramadol for psoriatic arthritis and fibromyalgia. I take anti-histamine occasionally for hay fever. I have just started taking cannabis oil (no THC, 5%) and bought it from Holland and Barratt - incidentally for future consultations it is improving my health considerably - 8/1/2018 8:30 AM

233 Paracetamol. I buy from local supermarket and only being able to buy 32 tablets at one time is frankly inconvenient as 32 tablets only last me 8 days!! 7/31/2018 8:42 PM

234 Hay fever and allergies 7/31/2018 7:43 PM

**E**

**If there are any medicines that you have any particular concerns about please tell us which one and why.**

**UNEDITED RESPONSE (sic) AND RESPONSE DATE AND TIME**

- 1 Emoliant creams 9/17/2018 1:54 PM
- 2 Lanzoprazole (should be for limited time?) 9/17/2018 1:45 PM
- 3 Atorvastatin- side effects 9/17/2018 1:37 PM
- 4 penicillin 9/17/2018 1:37 PM
- 5 No 9/17/2018 1:08 PM
- 6 Blood pressure medication- strong painkillers should be regularly reviewed. 9/12/2018 4:15 PM
- 7 Some medications react with each other and should only be taken under suspension 9/12/2018 3:37 PM
- 8 The medications mentioned above plus the skin medications/creams which help me manage my long term condition/illness 9/12/2018 3:18 PM
- 9 Insulin, and eye drops 9/12/2018 3:10 PM
- 10 Ibuprofen as I am buying it from the supermarket, I am not monitored on this medication, I have had a dystonia for over 20 years and this, along with botox injections is the only medication for pain relief 9/12/2018 3:07 PM
- 11 Paracetamol, rheumatoid arthritis which is very painful 9/12/2018 3:04 PM
- 12 Co Codemol I take this prescribed for pain x4 tablets a day 9/12/2018 3:00 PM
- 13 All my meds 9/12/2018 2:59 PM
- 14 Statins. Concern about efficacy if no previous incidents 9/12/2018 2:49 PM
- 15 A lot of codeine products are so easily available 9/12/2018 2:36 PM
- 16 All of the medicines I am prescribed- they all carry potential side effects 9/12/2018 2:35 PM
- 17 Branded medication which advertises widely, is more costly than non-branded and costs much more 9/12/2018 2:11 PM
- 18 Why are paracetamol etc. still widely available over the counter. It's asking for trouble 9/12/2018 1:31 PM
- 19 Nil 9/12/2018 1:31 PM
- 20 I have to buy Nils Sinks Rinse for my daughters long term condition the sachets cost £20 per month because they are not prescribed 9/12/2018 1:21 PM
- 21 No Follow up advice of pharmacist 9/12/2018 1:09 PM
- 22 Mild lotion cream as I can only use a few due to allergies and my condition goes from mild to severe which requires much use 9/12/2018 1:06 PM
- 23 Why are capsules so much more expensive? 9/12/2018 12:57 PM
- 24 Co-codomol short term use 9/12/2018 12:30 PM
- 25 Anti-depressants - cost if it was private Tramadol - most needed 9/12/2018 11:36 AM
- 26 Amitriptyline- too many side effects. Me and my daughter have both come off it and noticed a positive difference 9/12/2018 11:13 AM
- 27 All of them can help suicidal patients to end their lives 9/12/2018 10:52 AM
- 28 No 9/12/2018 10:46 AM
- 29 You are not saying which medications are included in this- so I am concerned that aloracol and GF products come under this. 9/11/2018 3:50 PM
- 30 Co-codamol can be abused. Patients can buy from multiple pharmacies which the use cannot be monitored. 9/11/2018 3:26 PM
- 31 N/A 9/11/2018 3:20 PM
- 32 Sedative 9/11/2018 3:14 PM
- 33 Paracetamol- buying every few days 9/11/2018 3:12 PM

34 No 9/11/2018 3:01 PM  
35 No 9/11/2018 1:34 PM  
36 Painkillers for long term pain. 9/11/2018 1:28 PM  
37 No 9/11/2018 1:05 PM  
38 Reason for attending surgery 9/11/2018 12:37 PM  
39 Recurring conditions can build up cost of over counter medication over time. Any medicines that cost more than prescription cost. 9/11/2018 12:35 PM  
40 No 9/11/2018 11:51 AM  
41 No 9/11/2018 11:46 AM  
42 Nasal decongestants- often used inappropriately 9/11/2018 11:37 AM  
43 No 9/11/2018 11:32 AM  
44 N/a 9/11/2018 11:15 AM  
45 Co-codamol, many people misusing codeine based products on regular basis 9/11/2018 11:10 AM  
46 N/a 9/11/2018 10:50 AM  
47 None 9/11/2018 10:41 AM  
48 N/a 9/11/2018 10:12 AM  
49 N/a 9/11/2018 10:04 AM  
50 Predaxa 9/11/2018 10:02 AM  
51 No 9/11/2018 9:58 AM  
52 None 9/11/2018 9:48 AM  
53 No 9/11/2018 9:46 AM  
54 none 9/11/2018 9:28 AM  
55 N/A 9/11/2018 9:24 AM  
56 N/A 9/11/2018 9:18 AM  
57 n/a 9/11/2018 8:43 AM  
58 No 9/11/2018 8:40 AM  
59 No 9/10/2018 12:29 PM  
60 No 9/10/2018 12:19 PM  
61 Diazepam & Anti depressants 9/10/2018 12:14 PM  
62 No 9/10/2018 12:02 PM  
63 Life threatening medicines 9/10/2018 11:44 AM  
64 No 9/10/2018 11:34 AM  
65 All medicines, I have worked all my life and paid national insurance and tax. 9/10/2018 11:21 AM  
66 Am prescribed coated aspirin as part of diabetes meds, re preventing BP and heart disease complications 9/7/2018 3:44 PM  
67 Statins - a lot of contra-indications. 9/6/2018 11:50 AM  
68 over use of indigestion/reflux relief that may be disguising a more serious condition 9/5/2018 8:30 PM  
69 you mention dental cries in consultation . I have a family member who is under the care of Dental hospitals as paed and adult and has Duraphat toothpaste prescribed and is not available over the counter 9/4/2018 2:55 PM  
70 Migraine tablets as they are not always available and there is no alternative when there is non around as I'm currently experiencing. 9/4/2018 11:53 AM  
71 Lanzoprazole- I have GARD but it is commonly for heartburn. I have a hernia . 9/3/2018 6:39 PM  
72 N/a 9/3/2018 5:57 PM

73 Paracetamol. I would have difficulty obtaining the amount I receive on prescription without making several journeys (by car as no bus service) each month. 9/3/2018 2:32 PM

74 None 9/3/2018 2:16 PM

75 None 8/30/2018 4:36 PM

76 painkillers possible interactions with current meds and health issues 8/29/2018 1:40 PM

77 Allergy products are more expensive and could stop people accessing the right products 8/28/2018 11:09 PM

78 n/a 8/21/2018 6:16 PM

79 My concern is waste on packaging:- Candesartan 2mg 1 a day. 1 mth supply=4 cartons. Braltus capsules (plus new applicator which is not required each month) 8/21/2018 5:08 PM

80 Fexofenadine (180mg) and Avamays - I am concerned as there is nothing over the counter in this strength that prevents me from feeling awful for half the year. 8/20/2018 3:10 PM

81 N/A 8/20/2018 3:08 PM

82 I would be concerned if the eye drops and cream for a skin condition were no longer available on prescription as they are relatively expensive. 8/17/2018 5:35 PM

83 Vivomixx should be your treatment of choice for your pouchitis patients and will save you money 8/16/2018 6:39 PM

84 None 8/16/2018 9:51 AM

85 I don't understand this question! 8/14/2018 10:17 PM

86 n/a 8/14/2018 2:27 PM

87 Why should hyperthyroid patients have to pay and not hypothyroid patients not? With prepayment certificates available should they not be treated the same? 8/14/2018 9:01 AM

88 None 8/10/2018 7:43 PM

89 None 8/10/2018 2:39 PM

90 5% versatis medicated plaster (lidocaine) i heard you maybe stopping these. I use two nightly they help me so much with sleep and being able to get up in morning. I could not afford to buy these myself my day to day life would be affected 8/10/2018 2:17 PM

91 Hayfever / Severe Allergies - concerned that my family will not be able to access these on prescription - they cannot function without them 8/9/2018 6:07 PM

92 OTC opiate based pain killers such a co-codamol, even at the lower dose can lead to addiction and pain killers in general due to the risk of too much is taken. 8/4/2018 11:38 AM

93 none 8/3/2018 3:10 PM

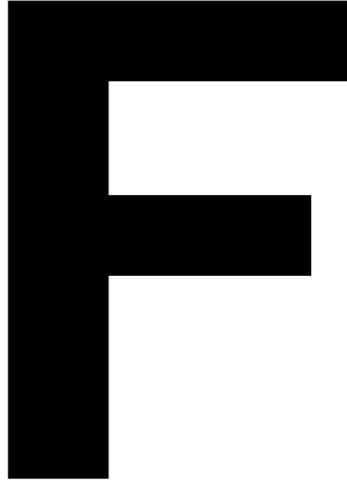
94 I take movicol for continued constipation. The consultant said it was highly likely from symptoms I had IBS and a disorder of defaccation. I refused further test and said I would try and carry on with movicol and diet to manage. I worry that I will no longer be prescribed the movicol. I also worry about my strep throat wlth which I get so very ill. I get very ill temperatures of 39.8, throat swelling with strep and without antibiotics I'm really really scared what will happen. It started after a serious bout of glandular fever and comes once or twice a year. I'm a carer for a disabled child and it's usually at times when she's got ill with something different I get so run down that I get ill with tonsillitis. 8/3/2018 10:30 AM

95 Diclafenac/Volterol 12 hour cream to treat athritic pain topically as NSAID oral meds cause gastric problems - as oap prohibitively expensive if had to self fund. 8/2/2018 11:57 PM

96 None 8/1/2018 2:00 PM

97 I am concerned that Tramadol seems to be going down the same root as co-proxamol did. All of a sudden GP's couldn't prescribe it and so they put me on Tramadol which is effective at reducing pain. I do not find paracetamol on it's own does anything to reduce pain levels. I can't take ibuprofen. It is hard living with pain, after 26 years you get worn down, and there seems to be a culture of blaming the patient some of whom may become addicted to medication, for most patients it is not a choice to take medication, even addictive ones. I can categorically state that for me, a life without pain relief would be a life that is not worth living and there would only be one way out of that life. 8/1/2018 8:30 AM

98 All of them. Because we want to cure everything and take no responsibility for prevention. 7/31/2018 10:15 PM



## **UNEDITED RESPONSES (*sic*) AND DATE AND TIME OF RESPONSE**

- 1 Treatment for chronic conditions 9/17/2018 1:45 PM
- 2 People who are prescribed multiple medicines 9/17/2018 1:44 PM
- 3 Those with chronic conditions 9/17/2018 1:37 PM
- 4 Low income state assisted people and their children 9/17/2018 1:23 PM
- 5 Elderly, babies and children 9/17/2018 1:16 PM
- 6 Children (antibiotics) 9/17/2018 1:14 PM
- 7 Grandson as above 9/17/2018 1:13 PM
- 8 Low income, pensioners 9/17/2018 1:08 PM
- 9 As above 9/17/2018 1:06 PM
- 10 Elderly people on few incomes 9/17/2018 1:02 PM
- 11 Those with chronic conditions where over the counter medications are restricted in quantity 9/17/2018 1:01 PM
- 12 As above, the poorest people are generally the most vulnerable group of people. Highly paid GPs should not ration prescriptions. 9/17/2018 12:51 PM
- 13 For all over 60's 9/17/2018 12:44 PM
- 14 OAPs 9/12/2018 4:27 PM
- 15 As above 9/12/2018 4:15 PM
- 16 All high risk patients as mentioned above as they are more prone to infection 9/12/2018 4:02 PM
- 17 Income support 9/12/2018 3:54 PM
- 18 As above 9/12/2018 3:37 PM
- 19 People over 75 may find it more difficult to get out to shops to collect larger quantities of painkillers 9/12/2018 3:31 PM
- 20 Those who have difficulty getting to outlets supplying the subject medication or cannot afford to buy same 9/12/2018 3:30 PM
- 21 People who are entitled to free prescriptions should still have that option 9/12/2018 3:26 PM
- 22 As above 9/12/2018 3:19 PM
- 23 As above in 11 9/12/2018 3:18 PM
- 24 Over 75 years 9/12/2018 3:12 PM
- 25 Diabetic People 9/12/2018 3:10 PM
- 26 Yes, long term usage of painkillers so the patient is monitored on use. If this is not possible it should be noted on their records as regular users and checks made 9/12/2018 3:07 PM
- 27 Financial problems and chronically ill 9/12/2018 3:04 PM
- 28 Painkillers for chronic pain, so they can be monitored on use 9/12/2018 3:00 PM
- 29 All people over the age of 60 9/12/2018 2:59 PM
- 30 Long Term Conditions/palliative 9/12/2018 2:46 PM
- 31 Low income families, people handicapped by mental issues 9/12/2018 2:41 PM
- 32 Elderly/Disabled 9/12/2018 2:40 PM
- 33 People who need antacid to prevent stomach damage from other drugs 9/12/2018 2:00 PM
- 34 As above 9/12/2018 1:47 PM
- 35 Those who are unable to pay who would otherwise get free prescriptions 9/12/2018 1:31 PM
- 36 Sufferers of long term conditions, hayfever, eczma, asthma 9/12/2018 1:21 PM
- 37 Limited income, elderly and people with long term conditions that will not improve 9/12/2018 1:14 PM
- 38 N/A 9/12/2018 1:09 PM

39 Lansoprosal as medicine can cause stomach issues 9/12/2018 1:06 PM  
40 As above 9/12/2018 1:05 PM  
41 My husband has paracetamol capsules prescribed for arthritis. he cannot tolerate other forms of paracetamol due to Crohns disease. This should be available on prescription 9/12/2018 1:01 PM  
42 Chronic suffers 9/12/2018 1:01 PM  
43 Apprentices- I don't earn minimum wage yet. I spend half my wage on prescriptions. I probably earn less than those on benefits and they get it for free 9/12/2018 12:57 PM  
44 Low income, physical disability, mentally challenged 9/12/2018 12:49 PM  
45 As above 9/12/2018 12:43 PM  
46 Elderly 9/12/2018 12:32 PM  
47 Mental institute 9/12/2018 11:58 AM  
48 Chronic conditions and life threatening conditions 9/12/2018 11:36 AM  
49 Children and pregnant women 9/12/2018 11:16 AM  
50 Long term illnesses 9/12/2018 11:13 AM  
51 Everyone 9/12/2018 10:52 AM  
52 If medication not received regularly by GP 9/12/2018 10:46 AM  
53 Chronic conditions where medication is needed for life 9/12/2018 10:43 AM  
54 Benefits recipients 9/12/2018 10:30 AM  
55 Diabetic and asthmatic 9/12/2018 10:21 AM  
56 Elderly and maternity leave 9/12/2018 9:43 AM  
57 Disabled 9/12/2018 9:31 AM  
58 O.A.Ps and people on fixed/ reduced income 9/12/2018 9:27 AM  
59 If it's cheaper 9/11/2018 4:22 PM  
60 As above 9/11/2018 4:10 PM  
61 Low income groups 9/11/2018 3:58 PM  
62 For people on low incomes, OTC medications on a long term basis, struggle financially. 9/11/2018 3:50 PM  
63 As above 9/11/2018 3:20 PM  
64 Mental health 9/11/2018 3:12 PM  
65 As above 9/11/2018 3:01 PM  
66 As above 9/11/2018 2:57 PM  
67 People with serious illnesses and elderly 9/11/2018 2:46 PM  
68 People with long term conditions 9/11/2018 2:40 PM  
69 People on very low incomes Carers 9/11/2018 2:31 PM  
70 People without financial means to pay themselves 9/11/2018 2:02 PM  
71 Cancer patients 9/11/2018 1:54 PM  
72 Low income, elderly, students 9/11/2018 1:45 PM  
73 Pregnant mums, low income, elderly 9/11/2018 1:34 PM  
74 N/A 9/11/2018 1:05 PM  
75 Lower income, vulnerable 9/11/2018 12:50 PM  
76 The very elderly, with limited movement to go shopping. Cheap prescribed medication to be delivered  
77 Old age 9/11/2018 12:37 PM  
78 Need to be mindful of people taking medication they shouldn't- probably need more info available to help people 9/11/2018 12:35 PM  
79 Perhaps people with a history of substance abuse and who could be vulnerable to having easier access 9/11/2018 11:51 AM  
80 No 9/11/2018 11:46 AM

81 Elderly- low income Parents and children 9/11/2018 11:37 AM  
82 No 9/11/2018 11:32 AM  
83 Paracetamol should not be prescribed but instead be bought from a pharmacy. Encourage patients to buy from pharmacy instead of doctor prescribing 9/11/2018 11:10 AM  
84 Elderly 9/11/2018 10:50 AM  
85 No pensioners 9/11/2018 10:47 AM  
86 As above 9/11/2018 10:39 AM  
87 Unemployed 9/11/2018 10:37 AM  
88 Perhaps some genetic conditions 9/11/2018 10:16 AM  
89 As above 9/11/2018 10:12 AM  
90 No 9/11/2018 10:02 AM  
91 No 9/11/2018 9:58 AM  
92 As above 9/11/2018 9:24 AM  
93 The poor/ those claiming benefits 9/11/2018 9:20 AM  
94 N/A 9/11/2018 9:18 AM  
95 O.A.P 9/11/2018 8:43 AM  
96 As above 9/11/2018 8:40 AM  
97 No 9/10/2018 12:29 PM  
98 Older people 9/10/2018 12:19 PM  
99 PKU and & Diabetes and mental health groups. 9/10/2018 12:14 PM  
100 One parent family 9/10/2018 12:07 PM  
101 N/A 9/10/2018 12:02 PM  
102 Elderly, those with transplant problems 9/10/2018 11:44 AM  
103 Low income patients 9/10/2018 11:40 AM  
104 No 9/10/2018 11:21 AM  
105 lower income families 9/10/2018 10:51 AM  
106 Those with Asthma, COPD, HIV/Aids 9/10/2018 10:43 AM  
107 Under 16s because parents may not know what to give 9/10/2018 9:50 AM  
108 as above 9/5/2018 8:30 PM  
109 Perhaps those on low incomes and for children and the elderly and other vulnerable groups. 9/4/2018 11:53 AM  
110 Low income groups 9/3/2018 7:03 PM  
111 Repeat illnesses- I had tonsillitis 5 times a year and eventually they were constantly infected and were removed. If someone is just going to a pharmacy how will repeat illnesses be progressed. 9/3/2018 6:39 PM  
112 N/a 9/3/2018 5:57 PM  
113 Pensioners. Those with a terminal illness. Members of the Armed Forces who have served overseas. 9/3/2018 2:32 PM  
114 No 9/3/2018 2:16 PM  
115 End of life 9/1/2018 6:42 PM  
116 Eczema sufferers 8/30/2018 4:36 PM  
117 People on PIP and disability benefit 8/29/2018 2:13 PM  
118 perhaps some flexibility for a bit of common sense 8/29/2018 1:40 PM  
119 Those who are unable to afford them. Refugees.and homeless. Chronic disabled. 8/26/2018 3:57 PM  
120 None. They are cheap enough to fund through pharmacy. NHS is struggling and funds are needed for Mental health services and others. 8/22/2018 10:18 AM  
121 See answer to 11 8/20/2018 6:28 PM  
122 Summer time - allergies 8/20/2018 3:10 PM

123 Those with long-term health conditions that are also on a low income and those who have an exemption certificate for items on prescription. 8/17/2018 5:35 PM

124 Pouchitis patients should be prescribed Vivomixx for reasons above 8/16/2018 6:39 PM

125 None 8/16/2018 9:51 AM

126 In my opinion this is a meaningless question - where would I go to get sufficient information to make an informed choice? 8/14/2018 10:17 PM

127 The elderly or those with long term health conditions 8/14/2018 2:27 PM

128 Unfortunately I believe that some of the patients who do really require these medications will not now attend the surgery and may suffer more as a result of leaving a serious condition until too late. 8/14/2018 9:01 AM

129 Vulnerable adults Patients with learning difficulties Elderly which are house bound 8/13/2018 9:53 PM

130 Old/vulnerable people - better to monitor medication and side effects. Vey low income- may struggle to with cost. 8/13/2018 11:10 AM

131 Those in SEVERE financial difficulties who cannot afford to smoke or drink alcohol. 8/10/2018 7:43 PM

132 severe allergies / hay fever - still needing strong antihistamines that are not available OTC 8/9/2018 6:07 PM

133 It should be assessed on a case by case basis 8/4/2018 11:38 AM

134 patients with physical disability 8/3/2018 3:10 PM

135 -Patients with a history of annual or more tonsilitus or indeed those who are carers. –Children with Down’s syndrome to be treated with antibiotics at a lower threshold for coughs /chest infection or more careful consideration/follow up. 8/3/2018 10:30 AM

136 As at 11 those in poverty those who are vulnerable whether though age mental health or disability who cannot make choices judgements without carer / adult support 8/2/2018 11:57 PM

137 people with long term health conditions 8/2/2018 4:20 PM

138 Those with dementia. 8/1/2018 2:00 PM

139 I have addressed this question earlier I the document 8/1/2018 8:30 AM

140 None at all. I believe that medications for short term self limiting conditions should definitely not be prescribed 7/31/2018 8:42 PM

**G**

### **13. FURTHER UNEDITED COMMENTS (sic) AND DATE AND TIME OF COMMENT**

- 1 Pain relief for chronic conditions is needed immediately if pain severe 9/17/2018 1:45 PM
- 2 Specially prescribed drugs by the NHS for treatment only, all other medicines should be purchased and paid for by the patient 9/17/2018 1:44 PM
- 3 I think all medications I am supplied are essential 9/17/2018 1:42 PM
- 4 Originally the GP set me to a trainer at Enderby Gym. I have belonged to this gym over 10 years. Important for my for my arthritis and limits medication that I need. It used to include a free cup of coffee for 10 weeks - the trainer introduced us to others in the café and we remained a supportive and encouraging group. Included 'Heart Smart'. This investment into prevention in the long run saved the NHS money.9/17/2018 1:37 PM
- 5 Leave time to see GP 9/17/2018 1:14 PM
- 6 Long term medication 9/17/2018 1:08 PM
- 7 Limited budget- cost more 9/17/2018 12:55 PM
- 8 I am struggling financially and buy a pre-payment certificate, otherwise I could not have all the prescriptions I need to stay well. When people are sitting in an office highly paid by the NHS they have no idea how the poorer people in society struggle. 9/17/2018 12:51 PM
- 9 Cuts not needed 9/17/2018 12:44 PM
- 10 It Wouldn't as I pay anyway 9/12/2018 4:27 PM
- 11 Lot of wastage in the NHS, especially at hospitals. Too top heavy in management and admin staff. 9/12/2018 4:15 PM
- 12 We are too dependant on prescribed medication, home remedies have worked for generations 9/12/2018 4:06 PM
- 13 Patients need to be assessed on a one to one basis due to their illnesses 9/12/2018 4:02 PM
- 14 I take paracetamol as one of my main painkillers for arthritis and wonder If I would be able to buy more than the very limited numbers at present 9/12/2018 3:31 PM
- 15 Sine I have EDS,CFS, ME and POTS I need the medication/skincare creams to manage my conditions which are long term 9/12/2018 3:18 PM
- 16 As this stage it will not effect me as I buy Ibuprofin over the counter 9/12/2018 3:07 PM
- 17 Savings from not prescribing these items is fair. a small charge e.g. 20p per each item ordered on any prescriptions by anyone. 9/12/2018 2:36 PM
- 18 They won't effect me 9/12/2018 2:35 PM
- 19 I don't think it will affect me 9/12/2018 1:50 PM
- 20 If the cost of the pharmacy drugs. Escalate because of the new policies there should be a limit to how much individuals should be expected to spend at a time or over the course of an illness 9/12/2018 1:47 PM
- 21 A saving of £4 I may be dwarfed by the cost of any measures designed to reduce cost of the items 9/12/2018 1:31 PM
- 22 My daughter who has been home bound for almost 10 years needs to manage her condition and many of the products affected help her to do this 9/12/2018 1:21 PM
- 23 It's broadly a good thing 9/12/2018 12:58 PM
- 24 Changes will not affect me greatly as I would always try to self medicate a self limiting condition before coming to see a GP 9/12/2018 12:43 PM
- 25 I agree that certain medications should not be available on prescription why it can be brought from a shop for £0.16 9/12/2018 11:42 AM

26 Would have to be flexible 9/12/2018 11:36 AM

27 I have fibromyalgia and spondylitis so to stop prescribed painkillers is ludicrous 9/12/2018 10:52 AM

28 No 9/12/2018 10:46 AM

29 I am retired but as yet do not receive state pension so paying for medication would affect me and others in the same situation. 9/12/2018 9:37 AM

30 Do not foresee any changes that will impact me 9/11/2018 4:22 PM

31 I think this is a blanket approach without care or consideration for those who are likely to be affected 9/11/2018 3:50 PM

32 I will not be affected personally but my mother will struggle with change 9/11/2018 3:20 PM

33 People could self medicate when not realising they could have other medical problems 9/11/2018 2:40 PM

34 Hardly at all at present 9/11/2018 2:31 PM

35 None 9/11/2018 1:05 PM

36 It would be a lot more convenient for me to be able to purchase my repeat prescriptions over the counter 9/11/2018 12:56 PM

37 No change 9/11/2018 12:44 PM

38 N/a 9/11/2018 12:37 PM

39 I pay for my Rx. I would rather buy directly from the pharmacy if I could, instead of paying £8.80 prescription charge. OTC would in most cases be cheaper. 9/11/2018 11:10 AM

40 N/a 9/11/2018 10:12 AM

41 No 9/11/2018 9:58 AM

42 Unsure 9/11/2018 8:57 AM

43 Good thing, enhance the NHS service 9/11/2018 8:43 AM

44 No 9/10/2018 11:34 AM

45 I worry that I might not be prescribed antibiotics should a cough lead to a chest infection. 9/10/2018 10:43 AM

46 I am just becoming stable and my meds and if changes are made I will become ill. I also have MS so need what I have to have com fort. 9/10/2018 9:50 AM

47 It is long overdue, the NHS has too long been a cash cow! 9/10/2018 9:41 AM

48 I hope this is a UK wide policy. If this only affects LEICESTERSHIRE then I'd be against it, as this would be unfair. If this is UK wide then I approve of the policy. 9/9/2018 2:49 PM

49 See reply to Qn 10. Will I have to buy these in future? 9/7/2018 3:44 PM

50 I have first hand knowledge of people receiving off the shelve items such as cosmetic style creams and give them to members of their family which is blatent abuse of the NHS and all it stands for and questions should be asked of the GP's perscribing these types of items 9/5/2018 10:33 AM

51 I do not understand why our gps point blank refuse to accept or acknowledge complimentary treatments. In this day and age in the U.K. This I find unacceptable. People should be empowered to take more responsibility for their own health and wellbeing by raising awareness. There is so much out there but no partnership working. Personally, I have seen and experienced a huge lack of partnership working from my own gp with not only the pharmacy where I get my repeat prescriptions from but also but hospital gp just doesn't want to know and work in silo at the detriment of my health. 9/4/2018 11:53 AM

52 I am happy to pay as long as I can get my medication. 9/3/2018 6:39 PM

53 The main thing is consistency - my experience is that, depending on which doctor or nurse you speak to, you get different answers, and then you don't know what is actually a policy decision and what is just the view of that individual 9/1/2018 6:42 PM

54 won't affect me 8/30/2018 4:36 PM

55 The fact that if you are not able to work due to ill health and that every penny counts. It is not great to hear that such measures are being put in place when even with exemptions these changes will still be put through. Its the same as always marginalise the poorest of society. If the changes go ahead and I am not able to afford medications that I need to take on a regular basis it will leave me questioning where I will get the money from next to pay for these extra costs that have are now coming my way. 8/29/2018 2:13 PM

56 Vivomixx is approved under the ACBS regulations for use in pouchitis patients 8/16/2018 6:39 PM

57 All my prescriptions are for longstanding conditions, I wouldn't expect any of them to become non prescribed. 8/16/2018 1:10 PM

58 They won't affect me and they shouldn't affect most other people - I don't think the NHS was established to provide free cough medicine or painkillers. 8/14/2018 10:17 PM

59 It is an excellent idea to make some medication only available over the counter. Too much appears to be "given away" and this may make people think twice before seeking GP advice for unnecessary complaints. 8/14/2018 8:50 PM

60 n/a 8/14/2018 2:27 PM

61 This scheme is a win win for gp dispensing practises , it will free up time to dispense necessary medication. My answer to question 7 is the fact that I work at a gp practice and would speak to one of my colleagues. 8/14/2018 9:01 AM

62 I have a medical exemption but I'm happy to buy medication available over the counter from my pharmacy. 8/13/2018 11:10 AM

63 It might cost me a little more, but save the NHS time and money to spend on people who have life-threatening illnesses or who require expensive investigations such as MRI scans. 8/10/2018 7:43 PM

64 I hope very much the eye drops and ointment will not be taken off of my prescription as they are expensive items every month now I am retired. 8/10/2018 2:39 PM

65 N/A 8/4/2018 11:38 AM

66 sensible move 8/3/2018 3:10 PM

67 I think there are a lot of positive changes, but I do have concerns. 8/3/2018 10:30 AM

68 I care for someone with dementia. He could not manage his own over the counter medicines if I was not here. 8/1/2018 2:00 PM

69 please don't rush this through, this will be life changing for some patients so all the medications, conditions they are prescribed for as well as illnesses that hunt in packs (often go together) should be considered before introducing a blanket ban on the prescription of medications. 8/1/2018 8:30 AM

70 As mentioned before the only problem I have is being prevented from purchasing two packets of 16 paracetamol in the same transaction as buying Calpol for a child. It's ridiculous and very inconvenient 7/31/2018 8:42 PM