

Lincolnshire Prescribing and Clinical Effectiveness Bulletin – Lidocaine 700mg medicated plasters 5% w/w (Versatis®, Ralvo®) Vol 13 No 7

Optum in association with Lincolnshire Clinical Commissioning Groups, Lincolnshire Community Health Services, United Lincolnshire Hospitals Trust and Lincolnshire Partnership Foundation Trust

Introduction

In 2017, NHS England produced guidance for commissioners on 'Items which should not be routinely prescribed in primary care'. Within this guidance was a statement regarding Lidocaine 700mg medicated plasters 5% w/w (proprietary names Versatis® or Ralvo®), which was classified as a product of low clinical effectiveness, where there is a lack of robust evidence of clinical effectiveness.

NHS England Recommendations

Recommendation	<ul style="list-style-type: none"> Prescribers in primary care should not initiate lidocaine plasters for any new patient (apart from exceptions below) Support prescribers in deprescribing lidocaine plasters in all patients and, where appropriate, ensure the availability of relevant services to facilitate this change. In exceptional circumstances, if there is a clinical need for lidocaine plasters to be prescribed in primary care, this should be undertaken in a cooperation arrangement with a multi-disciplinary team and/or other healthcare professional (under consultation with specialist pain services).
Exceptions and further recommendations	<ul style="list-style-type: none"> These recommendations do not apply to patients who have been treated in line with NICE CG173 <i>Neuropathic pain in adults: pharmacological management in non-specialist settings</i> but are still experiencing neuropathic pain associated with previous herpes zoster infection (post-herpetic neuralgia).
Category	<ul style="list-style-type: none"> Item of low clinical effectiveness, where there is a lack of robust evidence of clinical effectiveness or there are significant safety concerns
Annual Spend (Lincolnshire)	<ul style="list-style-type: none"> £326,356 (NHS Digital, extrapolated from January-March 2019 prescribing data)

<p>Background and Rationale</p>	<ul style="list-style-type: none"> • Lidocaine plasters can be applied for pain relief and are licensed for symptomatic relief of neuropathic pain associated with previous herpes zoster infection (post-herpetic neuralgia, PHN) in adults. • NICE CG173 Neuropathic pain in adults: pharmacological management in non-specialist settings does not recommend lidocaine plasters for treating neuropathic pain. • The joint clinical working group also considered a PrescQIPP CIC review, and during the consultation more evidence was provided and an up to date evidence summary was deemed necessary and prepared by the Specialist Pharmacy Service to inform the joint clinical working group's recommendations. Based on this review and non-inclusion, the lidocaine plasters are included with defined exceptions.
<p>Further Resources and Guidance for CCGs and prescribers</p>	<ul style="list-style-type: none"> • NICE Clinical Knowledge Summaries - Post-herpetic neuralgia • Patient information leaflets: https://www.prescqipp.info/items-which-should-not-routinely-be-prescribed-patient-leaflets • Specialist Pharmacy Service lidocaine plasters evidence review: https://www.england.nhs.uk/medicines/items-which-should-not-be-routinely-prescribed

Actions for practices and clinicians

- Identify all patients currently prescribed lidocaine medicated plasters – review and rationalise prescribing. Continued prescribing is only recommended for symptomatic relief of neuropathic pain associated with previous herpes zoster infection (post-herpetic neuralgia, PHN) in adults.
- Many patients prescribed lidocaine medicated plasters off-licence may be experiencing chronic or persistent pain (pain greater than three months in duration) and may benefit from referral to specialist pain services. Discuss this with the patient and refer as appropriate.

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