

Medical devices and appliances not recommended and not commissioned for routine prescribing

The list below details devices split into 2 categories, items not recommended to be prescribed, including items suitable for self-care, and items only to be prescribed in specific circumstances.

The recommendation is:

- Items on list one should not be routinely commissioned and therefore not routinely prescribed in primary care.
- Items on list two should only be commissioned and prescribed for the treatment exceptions as listed.

This list is taken from PrescQIPP DROP-List (Drugs to Review for Optimised Prescribing) which incorporates medicines prescribed across the NHS that are considered low priority and poor value for money. It also incorporates medicines that could potentially be provided as self-care, with advice and support from community pharmacists.

LIST ONE - Items not recommended for routine prescribing:

PrescQIPP - Summary of	Recommendations
other areas DROP-List	
Acne Treatment (Aknicare	Not recommended for routine prescribing (self-care).
cream and lotion, Aknicare sr	Self-care recommended for topical benzoyl peroxide
skin roller)	products.
Belladonna adhesive plaster	Not recommended; there is insufficient evidence to
	recommend the use of belladonna adhesive plasters.
	Prescribing on FP10 should be discontinued.
	Do not initiate new prescriptions for belladonna adhesive
	plasters.
Cycloidal vibration	Not recommended ; there is currently insufficient evidence
accessories	to recommend the use of cycloidal vibration therapy.
(Vibro-pulse® accessories)	
Ear wax softening medical	Not recommended for routine prescribing (self-care).
devices (Olive oil ear drops,	Ear wax softening drops should be purchased for self-care ,
sodium bicarb ear drops etc)	or obtained via NHS minor ailments schemes through
	participating community pharmacies.
Electrical stimulating wound	Not recommended ; there is currently insufficient evidence
device	to recommend the use of the Accel-Heal® electrical
(Accel-heal®)	stimulating device.
Eye compress (Hot eye	Not recommended ; there is no evidence of additional
compress, Meibopatch,	benefit compared to using a clean flannel and warm water
MGDRx Eye Bag)	as an eye compress.
Head lice treatment devices	Not recommended for routine prescribing.
	Self-care recommended for treatments for head lice
Independence Wound	Not recommended – unless commissioning agreed at local
protection/collection pouch	level. High cost, used for haemodialysis patients to protect
	dressing and insertion site to enable showering whilst using



	central venous catheter or tesio line. Renal unit can supply
	for patients.
Insert for female stress	Not recommended; there is currently insufficient evidence
incontinence	to recommend the use of the Contiform® device, or other
Contiform	intravaginal or intraurethral devices for female stress
	incontinence. NICE do not recommend their routine use.
Nasal products	Not recommended for routine prescribing (self-care)
(The majority of prescribing	limited evidence favours a different treatment -
is for saline nasal sprays, e.g.	Where indicated, large volume saline douches (saline
Sterimar [®] , Aqua maris [®] .)	irrigation) are thought to be more effective than saline nasal
	sprays.
	For managing the nasal symptoms of self-limiting
	conditions, saline nasal sprays can be purchased OTC for
	self-care by those that wish to try them.
Pelvic toning devices	Not recommended; there is no evidence of additional
PelvicToner®	benefit compared to undertaking pelvic floor exercises
• Kegel8®	alone.
Aquaflex®	Those that wish to use pelvic toning devices may purchase
	them from a pharmacy or on-line.
Potassium hydroxide	Not recommended in primary care; there is currently
solution	insufficient evidence of efficacy and a risk of side-effects.
(For treating molluscum	There are some circumstances where specialist referral is
contagiosum) e.g Molludab	indicated, and a specialist may consider the use of
Mollutrex	potassium hydroxide solution

LIST TWO -Items where prescribing should only be considered in specific circumstances:

Autoinflation may be considered during or after an active observation period following diagnosis of otitis media with effusion (OME, or glue ear), in children (from age 3) who are likely to cooperate with the procedure. Adults wishing to use the device to equalise the air pressure in the middle ear, e.g. for air travel, can purchase the device for self-care.
Not recommended for routine use Selection and prescribing of products for bacterial decolonisation should be in accordance with local guidelines as dependant on patterns of resistance.
Not recommended for routine use; deodorants should not be required. If correctly fitted, no odour should be apparent except when bag is emptied or changed. Household airfresheners are sufficient in most cases. If odour is present at times other than changing or emptying, refer the individual for review. Prescribing may be considered where it is deemed to be



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	clinically necessary by a specialist stoma nurse, after
	individual review. The reason why household air-fresheners
	are insufficient must be documented.
	Do not add to repeat prescribing systems.
Dry mouth products	Not recommended for routine prescribing (self-care)
	Dry mouth products such as artificial saliva or salivary
	stimulants should only be prescribed if simple measures
	alone have been inadequate. These products can be
	purchased OTC.
Inhalation solutions	Use outside of hospital considered for those with cystic
(Hypertonic sodium	fibrosis (CF) or non-CF bronchiectasis, where recommended
Chloride solutions for	by a specialist. Initiation must take place in secondary care
nebulisation)	to ensure safety and suitability for the individual.
Inspiratory muscle training	Not recommended for routine use, but inspiratory muscle
devices	training may be considered in those with COPD, non-CF
POWERbreathe Medic,	bronchiectasis and upper spinal cord injuries.
Threshold IMT,	
Ultrabreathe	
Ostomy underwear	Not recommended for routine use; Specific ostomy
	underwear for general use is not needed. There is currently
	insufficient evidence to recommend routine use of support
	ostomy underwear for parastomal hernia prevention after
	stoma surgery and should only be prescribed where they
	have been recommended by a specialist stoma nurse for
	managing parastomal hernias in some individuals, e.g. those
	undertaking strenuous activities. Do not add to repeat
	prescribing systems.
Plantar pressure offloading	Ensure the use of plantar pressure offloading devices is part
device	of a robust and clear local pathway for the prevention and
BeneFoot® Medical Shoe	management of diabetic foot problems.
Cellona® Shoe	Plantar pressure offloading devices should only be
Kerraped® All Purpose Boot	prescribed after individual assessment by an appropriately
Kerraped® Plantar Ulcer	skilled practitioner. This is likely to be via a foot protection
Shoe System	service or a multidisciplinary foot care service.
Liqua Care® Diabetic	
FlowGel Orthotics	