

## Self-care: Vitamins and Minerals Factsheet for Medicines Optimisation Section 2023-24

### Aim:

To support patients to practice self-care and understand how to manage minor and self-limiting conditions without visiting a GP practice:

1. To review patients prescribed vitamins and minerals WITHOUT a medically diagnosed vitamin and/or mineral deficiency and recommend the purchasing of the vitamin and/or mineral over the counter (OTC) in line with NHS England and Improvement guidance.
2. To review patients prescribed vitamins and minerals WITH a medically diagnosed vitamin and/or mineral deficiency and review prescribing in line with South East London (SEL) and/or national guidance.

### The self-care section asks practices to:

- Decrease the % of patients (of practice list size) prescribed self-care products to below or equal to 7.62%

### Key Messages: Self-care

- The prescribing of items available OTC for minor and self-limiting conditions is not routinely supported in SEL in line with [NHS England and Improvement guidance](#) and the [South East London Integrated Medicines Optimisation Committee Position Statement for items available OTC for self-care](#)
- The national and local guidance for self-care applies to all patients, unless they fall under the exceptions listed in the national and local guidance. Further information regarding exceptions to self-care can be found in the [SEL self-care frequently asked questions](#)
- Patients should be encouraged to speak to a community pharmacist about self-care advice and the purchasing of OTC items. The [General Practice Community Pharmacist Consultation Service](#) (GP CPCS) can also support GP practices with this
- OTC items are available for patients to buy in a community pharmacy as well as other outlets e.g., supermarkets and health and beauty retailers

### Key Messages: Vitamins & Minerals

- Vitamins and minerals should not be routinely prescribed due to limited evidence of clinical effectiveness
- Initiation of vitamins and minerals are not recommended unless for the management of a medically diagnosed vitamin and/or mineral deficiency
- Vitamins and minerals are essential nutrients which can be obtained by eating a healthy, varied, and balanced diet, consider this medicines optimisation intervention as an opportunity to encourage healthy eating to all patients
- If patients want to take vitamins and minerals for dietary supplementation, they should be advised to purchase this OTC and seek advice on appropriate products from a community pharmacist
- Vitamins and minerals can be prescribed for the following exceptions:
  - Medically diagnosed deficiency, including patients who may have a lifelong or chronic condition e.g. iron deficiency in inflammatory bowel disease or have undergone surgery that results in malabsorption e.g. bariatric surgery. However, continual need for the vitamin and/or mineral should be reviewed on a regular basis.
  - Osteoporosis (calcium and vitamin D)
  - Malnutrition including alcoholism
  - Iron deficiency in pregnancy

### Recommendations to support the self-care indicator: A focus on vitamin D & vitamin B

#### Vitamin D

Recommended Action	Supporting Resource
Identify patients prescribed vitamin D maintenance therapy (<2000 IU) <u>WITHOUT</u> a medically diagnosed deficiency using the <a href="#">EMIS vitamin D search (M0194)</a> and review if appropriate patients can be advised to purchase vitamin D maintenance therapy OTC	<a href="#">SEL Vitamin D guideline for adults</a> <a href="#">SEL Vitamin D guideline for children</a> <a href="#">SEL Vitamin D patient leaflet</a>
Identify patients prescribed vitamin D <u>WITH</u> a medically diagnosed deficiency using the <a href="#">EMIS vitamin D search (M0194)</a> and review the vitamin D preparation to ensure the preparation is a licensed product in line with local guidance.	

### Thiamine (Vitamin B1)

Recommended Action	Supporting Resource
<p>Identify adult patients (≥ 18 years old) prescribed oral thiamine for the management of alcoholism (to prevent Wernicke’s Encephalopathy) using the <a href="#">EMIS vitamins and minerals search (M0172)</a>.</p> <p>Review patients for the continual need of oral thiamine in line with <a href="#">NICE guidance</a> and the <a href="#">Regional Medicines Optimisation Position (RMOC) Statement</a>.</p> <p><b>Recommendation from RMOC position statement:</b></p> <ul style="list-style-type: none"> <li>• <i>Following successful alcohol withdrawal, thiamine should be continued for 6 weeks.</i></li> <li>• <i>If after this time the patient remains abstinent and has regained adequate nutritional status, thiamine should be discontinued.</i></li> <li>• <i>Thiamine should be restarted if the patient starts drinking again.</i></li> </ul>	<p><a href="#">NICE CG 100, Alcohol-use disorders: diagnosis and management of physical complication</a></p> <p><a href="#">Regional Medicines Optimisation Committee (RMOC) Position Statement</a></p> <p><a href="#">Oral vitamin B supplementation in alcoholism</a></p> <p><a href="#">PrescQIPP Vitamins and minerals bulletin</a></p>

### Vitamin B Complex

Recommended Action	Supporting Resource
<p>Identify adult patients (≥ 18 years old) prescribed oral vitamin B complex preparations (vitamin B compound or vitamin B compound strong tablets) using the EMIS vitamin B complex search (M0193).</p> <p>Review patients for the continual need of vitamin B complex preparations in line with the <a href="#">Regional Medicines Optimisation Position (RMOC) Statement</a>.</p> <p><b>Recommendation from RMOC position statement:</b></p> <ul style="list-style-type: none"> <li>• <i>Due to a lack of evidence, vitamin B complex should not be prescribed for prevention of Wernicke’s Encephalopathy (WE) in alcoholism.</i></li> <li>• <i>All patients prescribed vitamin B complex preparations should be reviewed with a view to stop treatment in all, but exceptional circumstances e.g., medically diagnosed deficiency caused by lifelong chronic condition or surgery which results in malabsorption.</i></li> <li>• <i>For patients who require continual prescribing of vitamin B complex, vitamin B compound strong should be prescribed <b>and not</b> vitamin B compound (vitamin B compound strong is more cost effective).</i></li> <li>• <i>Advise patients who wish to use vitamin B complex preparations as dietary supplements to purchase OTC.</i></li> </ul>	<p><a href="#">NICE CG 100, Alcohol-use disorders: diagnosis and management of physical complication</a></p> <p><a href="#">Regional Medicines Optimisation Committee (RMOC) Position Statement</a></p> <p><a href="#">Oral vitamin B supplementation in alcoholism</a></p> <p><a href="#">PrescQIPP Vitamins and minerals bulletin</a></p> <p><a href="#">South East London Joint Medicines Formulary – vitamin B compound strong</a></p>

#### References

1. Conditions for which over the counter items should not routinely be prescribed in primary care: Guidance for CCGs, NHS England and Improvement. March 2018 <https://www.england.nhs.uk/publication/conditions-for-which-over-the-counter-items-should-not-routinely-be-prescribed-in-primary-care-guidance-for-ccgs/>
2. South East London Integrated Medicines Optimisation Committee Position Statement for items available OTC for self-care. February 2019 <https://selondonccg.nhs.uk/download/11683/>
3. Community Pharmacy Consultation Service web page, SEL CCG. <https://selondonccg.nhs.uk/healthcare-professionals/primary-care/lambeth/community-pharmacy-consultation-service-cpcs/>
4. Self-care: Frequently asked questions about changes to prescribing of over the counter (OTC) medicines and products in South East London. April 2019 <https://selondonccg.nhs.uk/download/12365/>
5. Vitamins and Minerals Bulletin- 296 2.0. PrescQIPP. November 2021 <https://www.prescqipp.info/umbraco/surface/authorisedmediasurface/index?url=%2fmedia%2f5831%2f296-vitamins-and-minerals-20.pdf>
6. South East London Clinical Guideline for the Management of Vitamin D Deficiency in ADULTS (including pregnancy and breastfeeding). July 2020 <https://selondonccg.nhs.uk/download/12269/>
7. South East London Clinical Guidance for the Management of Vitamin D Deficiency and Insufficiency in Children up to the age of 18 years - excluding neonates in Neonatal Units. July 2020. <https://selondonccg.nhs.uk/download/12272/>
8. South East London Vitamin D Patient Information Leaflet. July 2020. <https://selondonccg.nhs.uk/download/12275/>
9. Alcohol-use disorders: diagnosis and management of physical complication, CG100, NICE. June 2010. <https://www.nice.org.uk/guidance/cg100/resources/alcoholuse-disorders-diagnosis-and-management-of-physical-complications-pdf-35109322251973>
10. Oral vitamin B supplementation in alcoholism Position Statement, Regional Medicines Optimisation Committee (RMOC). November 2019. <https://www.sps.nhs.uk/wp-content/uploads/2019/12/RMOC-position-statement-oral-vitamin-b-supplementation-in-alcoholism-v1.0-1.pdf>