

Co-proxamol Position Statement

NHS Mansfield & Ashfield and NHS Newark & Sherwood Clinical Commissioning Groups (CCGs) do not support the use of Co-proxamol.

Therefore it should NOT be prescribed on NHS prescription

Co-proxamol was withdrawn from the market in 2005 on the advice of the Medicines and Healthcare Regulatory Agency (MHRA) Committee on Safety of Medicines (CSM) amid serious safety concerns. The withdrawal took place over two years to allow prescribers and patients time to discuss alternative pain management regimes. However, over twelve years later, prescribing of co-proxamol is still occurring in the Mansfield and Ashfield and Newark and Sherwood (mid- Notts CCGs) areas.

Co-proxamol is an analgesic, containing a sub-therapeutic dose of paracetamol (325mg) and dextropropoxyphene 32.5mg. It was widely used for the treatment of mild-to-moderate pain but its license was withdrawn in 2005 after the Committee on the Safety of Medicines (CSM) raised concerns regarding its efficacy and toxicity. **Prescribers are reminded that when an unlicensed medicine is prescribed, the patient should be informed of this and possible risks & benefits should be discussed with them.**

Until Dec 15 co-proxamol was listed in the Drug Tariff (£21/100 tabs). However it is no longer listed and if prescribed would be charged as a “special” item, the cost of which will most likely be significantly more and cannot be contained.

Apr- Jul 17 eleven practices across mid Notts CCGs (6/5 practices in M&A/N&S respectively) prescribed co-proxamol, (nil prescriptions issued in the remaining thirty practices) at a cost of £23,000 for the period Apr- Jul 2017.

The following points summarise the reasons that co-proxamol is not recommended for prescribing in mid-Notts CCGs:

- There is no robust clinical evidence that co-proxamol is more effective than full strength paracetamol in either acute or chronic use.
- There is a risk of addiction, and abuse or misuse associated with co-proxamol.
- **No** patient group has been identified in which the risk:benefit ratio of using co-proxamol is positive.
- Clinical data from the USA has shown that dextropropoxyphene can have serious effects on the electrical activity of the heart even at normal therapeutic doses.
- The lethal dose of co-proxamol is relatively low and can be potentiated by alcohol and other CNS depressants. (Before the licence was withdrawn, it was estimated that one fifth of poisonings involving co-proxamol were accidental).
- Death from co-proxamol overdose can occur rapidly, even before hospital treatment can be received. The risk of dying after co-proxamol overdose is double that for tricyclic antidepressants and 28 times that for paracetamol.

- The risk of overdose can also extend to others in the household of the person for whom the drug is prescribed.
- Co-proxamol is an unlicensed medicine so all responsibility for prescribing, including any adverse events that may occur, rests solely with the prescriber

Any queries about this policy should be directed to the CCGs Patient Engagement Team on 0800 028 3693; email NSHCCG.Pet-North@nhs.net or in writing to Patient Experience Team, NHS Newark and Sherwood Clinical Commissioning Group, Balderton Primary Care Centre, Lowfield Lane, Balderton, Nottinghamshire NG24 3HJ