

Silk Garments

Silk garments have been used in the management of eczema and allergic skin conditions.¹ Although some brands of silk garments are included in the Drug Tariff and so can be prescribed on an NHS FP10 prescription,²⁻⁴ NHS England (NHSE) and the AWMMSG advise against their routine prescribing in primary care due to a lack of robust evidence of clinical effectiveness.^{5,6} Stopping the prescribing of silk garments has the potential to release savings which could be used for other more effective treatments or service improvements.

Recommendations	Savings available
- Do not initiate silk garments as there is a lack of robust evidence of clinical effectiveness. - Deprescribe silk garments where they have already been initiated. - Provide the ‘changes to prescribing of silk garments’ leaflet to patients and/or carers for whom silk garments will no longer be prescribed. - Integrated Care Boards (ICBs)/Health Boards (HBs) should ensure that local guidance on silk garments is up to date and in line with national guidance.	In England, Wales, Northern Ireland, Isle of Man and Scotland, £570,882 is spent annually on prescribing silk garments (NHSBSA England, Wales, Northern Ireland and Isle of Man (Jan-Dec23), and Public Health Scotland (Nov22-Oct23). An 80% reduction in the prescribing of silk garments could release savings of approximately £420,373. This equates to an average saving of £565 per 100,000 population.

Rationale and supporting evidence

[NHS England guidance on items which should not be routinely prescribed in primary care](#) recommends that silk garments should not be initiated in primary care and that they should be deprescribed where they are currently prescribed. No exceptions to this guidance were identified.⁵

The [All Wales Medicines Strategy Group \(AWMSG\) guidance](#) advises HBs with no routine exemptions identified:

- That prescribers in primary care should not initiate silk garments for any new patient with eczema.
- To support prescribers in deprescribing silk garments in all patients and, where appropriate, ensure the availability of relevant services to facilitate this change.⁶

Published trials have been small and limited to infants and children. The largest trial to date was the CLOTHES trial, funded by the National Institute for Health Research (NIHR) Health Technology Assessment (HTA) programme. In this parallel group observer-blind, randomised controlled trial (RCT), 300 children aged 1 to 15 years with moderate to severe atopic eczema were randomised to receive sericin-free silk garments (Dermasilk® or Dermaskin®) plus standard care or standard care alone for six months followed by a two month observational period. Garments were worn for at least 50% of the time by 82% of participants. There was no evidence of any difference between the groups (n=141) in Eczema Area and Severity Index (EASI) score averaged over all follow-up visits adjusted for baseline EASI score, age, and centre: adjusted ratio of geometric means 0.95, 95% CI 0.85 to 1.07, (p = 0.43). For the secondary outcomes, there were no between-group differences in nurse-assessed atopic eczema severity, quality of life or medication use.⁷

Patient information

PrescQIPP resources include [patient leaflets](#) that explain why silk garments are included in the NHSE guidance.⁵ The leaflets signpost to sources of further information, such as a link to a [patient video](#) explaining the results of the CLOTHES trial.

The [National Eczema Society](#) have produced a factsheet which provides information and advice regarding clothing for eczema patients and details of possible brands and suppliers for self-ordering and purchase for those patients who wish to try this option.

This bulletin is for use within the NHS. Any commercial use of bulletins must be after the public release date, accurate, not misleading and not promotional in nature.

References

1. Joint Formulary Committee. British National Formulary (online) London: BMJ Group and Pharmaceutical Press. Wound Management - Tubular bandages & garments. Last updated 26 March 2024. <https://bnf.nice.org.uk/wound-management/bandages/>
2. NHS Business Services Authority. Drug Tariff. April 2024. <https://www.nhsbsa.nhs.uk/pharmacies-gp-practices-and-appliance-contractors/drug-tariff>
3. Public Health Scotland. Scottish Drugs Tariff Part 2 - Dressings. April 2024. <https://publichealthscotland.scot/publications/scottish-drug-tariff-sdt-files/>
4. HSC Business Services Organisation. Drug Tariff - Northern Ireland. Part III - List of Appliances. April 2024. <https://bso.hscni.net/directorates/operations/family-practitioner-services/pharmacy/contractor-information/drug-tariff-and-related-materials/drug-tariff-2/>
5. NHS England. Items which should not routinely be prescribed in primary care: policy guidance. Published: 3 August 2023, last updated 13 October 2023. <https://www.england.nhs.uk/long-read/items-which-should-not-routinely-be-prescribed-in-primary-care-policy-guidance/>
6. All Wales Medicines Strategy Group. Items Identified as Low Value for Prescribing in NHS Wales – Paper 3. Published February 2020. Last updated March 2022. <https://awttc.nhs.wales/files/guidelines-and-pils/items-identified-as-low-value-for-prescribing-in-nhs-wales-paper-3-v4-pdf/>
7. Thomas KS, Bradshaw LE, Sach TH, et al. Randomised controlled trial of silk therapeutic garments for the management of atopic eczema in children: the CLOTHES trial. Health Technology Assessment 2017;21(16) <https://njl-admin.nihr.ac.uk/document/download/2010344>

Additional resources available	Bulletin	https://www.prescqipp.info/our-resources/bulletins/bulletin-346-silk-garments/
	Tools	
	Data pack	https://data.prescqipp.info/views/B346_Silkgarments/FrontPage?%3Aembed=y&%3Aiid=1&%3AisGuestRedirectFromVizportal=y

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