

Lidocaine medicated plasters briefing

In England, Scotland, Wales, Isle of Man and Northern Ireland (NI) approximately £36million annually is spent on prescribing lidocaine medicated plasters.

Key recommendations	
- Be aware that current NICE guidance does not make a recommendation about the use of lidocaine medicated plasters for neuropathic pain (including post herpetic neuralgia (PHN)), as only very limited evidence on this treatment met their inclusion criteria.¹ - For PHN, ensure that prescribing of lidocaine medicated plasters in primary care is restricted to those in whom other interventions are clinically inappropriate. This is in accordance with guidance from NHS England, the Scottish Medicines Consortium, the All Wales Medicines Strategy Group and the Strategic Planning and Performance Group in NI (formerly the Health and Social Care Board).²⁻⁵ - For unlicensed indications including localised neuropathic pain, lidocaine medicated plasters should, in general, not be prescribed in primary care. There are some differences in guidance in different countries of the UK, so consult the relevant national guidance. - With the exception of patients with PHN in whom other interventions are clinically inappropriate, review patients prescribed lidocaine medicated plasters and consider alternatives appropriate to the indication.	- Address patients' expectations of chronic pain treatments at an early stage. Medication is unlikely to completely eliminate pain. Realistic treatment expectations should focus on reducing pain and maintaining function, with a view to improving quality of life. - Where lidocaine medicated plaster treatment is considered appropriate provide advice on cost-effective use and review of lidocaine medicated plasters. - When assessing continued need for treatment, consider if any of the following strategies are appropriate: - Attempting to reduce the amount of plaster(s) needed to cover the painful area (note that plasters can be cut) or increase the interval between plasters. - A 'trial without' e.g. ask the patient to remain lidocaine medicated plaster-free for 24 hours before review appointment. - A trial of unmedicated physical protection (e.g. with a plastic wound dressing such as Opsite).

Table 1. Savings from discontinuing or switching lidocaine plasters to alternatives

	12 months cost avoidance when lidocaine plasters are:		
	Discontinued in 50% of patients	Switched to amitriptyline tablets in 25% of patients	Switched to pregabalin capsules in 25% of patients
England	£7,300,679	£3,650,340	£3,504,326
Isle of Man	£16,756	£8,378	£8,043
Northern Ireland	£1,084,853	£542,427	£520,729
Scotland	£8,776,962	£4,388,481	£4,212,942
Wales	£804,193	£402,097	£386,013
Saving per 100,000 population	£24,134	£12,067	£11,584

Prescribing data from NHSBSA England, Wales, Isle of Man, NI (Nov23-Jan24), and Public Health Scotland (Oct-Dec23)

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. NICE. Neuropathic pain - pharmacological management. The pharmacological management of neuropathic pain in adults in non-specialist settings (full NICE guideline) [CG173]. Published 20 November 2013. Last updated 22 September 2020. www.nice.org.uk/guidance/cg173/evidence
2. 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/>
3. Scottish Medicines Consortium. Lidocaine 5% medicated plaster (Versatis). No: 334/06. 11 August 2008. <https://www.scottishmedicines.org.uk/medicines-advice/lidocaine-5-medicated-plaster-versatis-resubmission-33406/>
4. All Wales Medicines Strategy Group. Medicines Identified as Low Priority for Funding in NHS Wales – Paper 1. Published October 2017. Last updated October 2019. <https://awttc.nhs.wales/files/guidelines-and-pils/medicines-identified-as-low-priority-for-funding-in-nhs-wales-november-2019-update-pdf>
5. Health and Social Care Board. Northern Ireland Medicines Management. Newsletter: Deprescribing: Limited Evidence List and Stop List. Published April 2023. <https://niformulary.hscni.net/download/65/prescribing-stop-list/9130/stop-and-limited-evidence-list-april-2023>

Additional resources available	Bulletin	https://www.prescqipp.info/our-resources/bulletins/bulletin-350-lidocaine-plasters/
	Tools	
	Data pack	https://data.prescqipp.info/views/B350_Lidocaineplasters/FrontPage?%3Aembed=y&%3Aiid=1&%3AisGuestRedirectFromVizportal=y

Support with any queries or comments related to the content of this document is available through the PrescQIPP help centre <https://help.prescqipp.info>

This document represents the view of PrescQIPP CIC at the time of publication, which was arrived at after careful consideration of the referenced evidence, and in accordance with PrescQIPP's quality assurance framework.

The use and application of this guidance does not override the individual responsibility of health and social care professionals to make decisions appropriate to local need and the circumstances of individual patients (in consultation with the patient and/or guardian or carer). [Terms and conditions](#)