Appendix 2: current editorial policy for the VMP prescribing status

Virtual Medicinal Product Prescribing Status

Field Population:

- valid as a prescribable product,
- invalid to prescribe in NHS primary care,
- never valid to prescribe as a VMP
- VMP not recommended to prescribe - brands not bioequivalent,
- VMP not recommended to prescribe - patient training required,
- VMP not recommended to prescribe -no published specification

Additional Information:

Valid as a prescribable product — all products that do not fall into the following five numbered categories will be valid as a prescribable product:

1. Invalid to prescribe in NHS primary care:
    - VMPs included in Schedule 1 of the NHS (General Medical Services Contracts) (Prescription of Drugs etc.) Regulations 2004 and VMPs where all of the AMPPs are Schedule 1 will be annotated as invalid unless the VMP is a recognised official title.
    - Components of a multipack that are not individually marketed will also be annotated as invalid to prescribe,
        - e.g. Terazosin 1mg x 7 tablets is a component of the combination 'Hytrin tablets starter pack' but Terazosin 1mg tablets are not available on their own and so are invalid to be prescribed.
    - Appliances where all of the AMPPs are no longer reimbursable (i.e. not included in the Drug Tariff (for England and Wales)) then the VMP will be set to invalid.

Note: Even though some products (e.g. Yellow Fever Vaccine) should not be prescribed on an FP10 prescription form, they can be prescribed and administered in primary care and are valid as a prescribable product.

2. Never valid to prescribe as a VMP:
    - Products for which the VMP is not prescribable by a generic name i.e. there is no approved non-proprietary name (e.g. Generic XXXX) will be annotated never valid to prescribe as a VMP.

- Investigational Medicinal Products (IMPs) will have a prescribing status of never valid to prescribe as a VMP.
- Historically Drug Tariff approved medical devices with no official DT specification (or not specified by a BP or EP monograph) will be never valid to prescribe as a VMP (see also VMP not recommended to prescribe –no published specification).

3. VMP not recommended to prescribe – brands not bioequivalent
    - Products for which the British National Formulary (BNF) or Summary of Product Characteristics (SmPC) recommends prescribing by a brand name e.g. diltiazem modified-release preparations. Reference is often made to differences between products in terms of bioavailability. Products will only be annotated where there is a clear statement that different manufacturers' products are not bioequivalent in the BNF or from the MHRA (Medicines and Healthcare Products Regulatory Agency). There are some products where prescribers should make a decision as to whether an individual patient would benefit from being maintained on a specific manufacturer's product. Where the decision depends on an assessment of the individual patient and of the strength of clinical evidence to support benefit for that individual, it is not appropriate to annotate these products with VMP not recommended to prescribe — brands not bioequivalent.
    - Antiepileptic drugs for which the Commission on Human Medicines (CHM) has advised doctors to ensure that their patient is maintained on a specific manufacturer's product (Category 1). The CHM has classified antiepileptic drugs into three categories, based on therapeutic index (a comparison of the amount of a therapeutic agent that causes a therapeutic effect to the amount that causes toxicity), solubility and absorption to help prescribers and patients decide whether it is necessary to keep using a supply of a specific manufacturer's product. (Antiepileptic drugs in Categories 2 and 3 are not annotated.)
    - The BNF now also refers to some products as being 'biosimilar medicines' and where this label is used, it is considered good practice to use the brand name for such products. Biosimilar medicines will therefore also be assigned this value.
    - Where there is only one AMP available and the VMP has an 'approved' generic name then that product should **NOT** be marked with any of the VMP not recommended to prescribe flags.

4. VMP not recommended to prescribe – patient training required

- This value is used for products that the BNF or SmPC indicates that patient-training is required in their use e.g. insulin devices, dry powder inhalers, and some appliances. References may be made in the BNF to patient use of a product, the need for patient instruction and some patient counselling messages.
- Evidence for patient training in an SmPC can be found in section 4.2, Posology and Method of Administration.
- Where there is only one AMP available and the VMP has an ‘approved’ generic name then that product should **NOT** be marked with any of the VMP not recommended to prescribe flags.

5. VMP not recommended to prescribe –no published specification
    - This value is used for appliances including dressings and bandages that have an approved non-proprietary name but do not have an official Drug Tariff specification. Medical devices with approved non-proprietary names do not have to demonstrate that they meet Drug Tariff specifications unless they are prescribed on an FP10 prescription when Drug Tariff Part 1 Clause 2 requires products listed in Drug Tariff Part IX to conform to the specifications shown in Part IX. Where there is no specification it cannot be assumed that devices prescribed by a non-proprietary name will be equivalent.
    - When a VMP has an ‘approved’ generic name but no Drug Tariff specification, even if there is only one AMP available, this VMP prescribing status should be authored.

Note: Some products e.g. CFC free beclometasone inhalers and lithium carbonate modified-release tablets could be eligible to have both the brands not bioequivalent indicator and the patient training required flag; in such a scenario, the ‘brands not bioequivalent ‘indicator will take precedence.