

# Medicines Optimisation guidance

## Duration of prescriptions

We are frequently asked for guidance on the appropriate duration of prescriptions and thought it would be helpful to set out our advice and also consider the issue of weekly prescriptions and monitored dosage systems (MDS).

We would advise that the appropriate duration of a prescription should be decided by the prescriber, in conjunction with the patient, taking into account the medicine being prescribed, its monitoring requirements, the condition being treated and the individual patient's needs. We would also advise that a shorter duration is appropriate when a new medicine is first started or when a patient's condition or medicines regimen is likely to change. The quantities on a prescription should reflect the required frequency of dispensing. The quantity (and cost) of wasted medicines is significant and the duration of prescriptions is one factor that affects this.

With regard to the issue of weekly prescriptions the Local Pharmaceutical Committee has produced a useful briefing document on the issue of MDS and the Disability Discrimination Act (DDA). The guidance covers the adjustments that a dispenser (pharmacy or dispensing practice) might be required to make under the DDA and the fact that funding for such adjustments is included in their contract. It is the dispenser's decision as to what is the appropriate adjustment, not a carer or another healthcare professional. The guidance is available at:

[http://www.hampshirelpc.org.uk/webfm\\_send/1771](http://www.hampshirelpc.org.uk/webfm_send/1771)

The LPC website also has a number of useful resources to help pharmacists assess and support patients with disabilities:

<http://www.hampshirelpc.org.uk/node/421>

### **I would like my patient to receive their medicine on a weekly basis (for reasons of safety).**

In this situation it is necessary to prescribe weekly prescriptions. The quantity on a prescription should reflect the required frequency of dispensing.

### **A care home has asked the pharmacist to provide medicines in a MDS and the pharmacist is asking for weekly prescriptions to help cover the cost of the MDS.**

We can see no justification for practices to prescribe weekly prescriptions for patients in care homes unless the patient's clinical condition justified a weekly supply. GPs should not prescribe weekly prescriptions as a way of subsidising the cost of MDS and the pharmacist and home can enter into a private arrangement for the supply of medicines in a MDS.

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