North Central London
Medicines Optimisation Committee

Using Standardised Concentrations of Unlicensed Liquid Medicines in Children Position Statement

Key points

- Unlicensed liquid medicines for children should be prescribed using standard concentrations:

Drug name	Concentration	Listed in Drug Tariff Specials Tariff (July 2021)
Azathioprine	50mg/5mL	Yes
Chloral Hydrate	500mg/5mL	Yes
Clopidogrel	25mg/5mL	No. Also not listed in cBNF monograph
Ethambutol	400mg/5mL	No
Hydrocortisone	5mg/5mL	Yes
Isoniazid	50mg/5mL	Yes
Phenobarbitone (alcohol free)	50mg/5mL	Yes
Pyrazinamide	500mg/5mL	No
Sertraline	50mg/5mL	Yes
Sodium chloride	5mmol/mL	No
Spironolactone	50mg/5mL	Yes
Tacrolimus*	5mg/5mL	Yes*

* when prescribed for immunotherapy following solid organ transplantation, prescribing should be retained in secondary/tertiary care due to the ongoing specialist intervention and specialist monitoring

- NCL Provider Trusts will only supply these standard concentrations
- Community pharmacies can source the preparations via relevant wholesalers. See PSNC information on unlicensed specials and imports
- The scope of this NCL position does not include a review of the medicine formulary status or evidence base for use and does not make a recommendation on the clinical appropriateness of transfer of prescribing and/or monitoring in primary care following specialist intitiation[1]
- Where it is appropriate for prescribing to be transferred from specialists to primary care, the specialist is expected to provide the GP with sufficient clinical information/management plan to undertake safe prescribing and monitoring[1]

Background

- NPPG and RCPCH position statement on using standardised concentrations of unlicensed liquid medicines in Children aims to prevent patient harm and hospitalisation from accidental under and overdoses due to changes in concentrations of liquid medicines. Standardised concentrations will reduce the risk of errors being made in the doses given.
- These medicines should only be used in line with:
  - The respective Provider Trust formulary
  - MHRA[2] and GMC[3] (updated 5th April 2021) prescribing guidance on unlicensed/off-label medication. The prescriber should be assured there is no suitably licensed medicine that will meet the patient's need and there is sufficient evidence base and/or experience of using the medicine before taking on the prescribing and/or monitoring responsibility.

References

1. NHSE. Responsibility for prescribing between Primary & Secondary/Tertiary Care. January 2018. Access at: https://www.england.nhs.uk/wp-content/uploads/2018/03/responsibility-prescribing-between-primary-secondary-care-v2.pdf (date accessed: 21/04/2021)
2. MHRA. The supply of unlicensed medicinal products ("specials"). 2014. Access at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/373505/The_supply_of_unlicensed_medicinal_products__specials_.pdf (date accessed: 21/04/2021)
3. General Medical Council. Prescribing and managing medicines and devices content. April 2021. Access at: https://www.gmc-uk.org/ethical-guidance/ethical-guidance-for-doctors/good-practice-in-prescribing-and-managing-medicines-and-devices/prescribing-unlicensed-medicines (date accessed: 21/04/2021)

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Groups which were consulted and have given approval:	North Central London Medicines Optimisation Committee
File name:	Standardised_unlicensed_liquid_medicines_position_statement.pdf
Version number:	V1.0
Available on:	https://www.ncl-mon.nhs.uk/
Disseminated to:	All Trusts and CCGs in NCL
Equality impact assessment:	Low
NCL Medicines Optimisation Committee Approval date:	July 2021
Review date:	July 2024