

Changes to the prescribing regulations for generic sildenafil for erectile dysfunction

Key Message

Generic sildenafil is now no longer in the SLS list (Part XVIII B of the Drug Tariff) meaning that restrictions on its use are lifted. It no longer needs to be annotated "SLS" and can be prescribed by GPs on FP10 for any indication for erectile dysfunction including severe distress. Guidance on suggested quantities to prescribe has not changed. The most cost effective treatment for erectile dysfunction at present is generic sildenafil.

Background

As of 1st August 2014, changes to the SLS regulations for England mean that **generic sildenafil** has been removed from the list of medicines that may only be prescribed on the NHS when SLS requirements are met. Generically written FP10 prescriptions for sildenafil no longer require the prescriber to annotate "SLS".

The generic drugs of apomorphine hydrochloride, moxisylyte hydrochloride and thymoxamine hydrochloride have also been removed from the list and can be prescribed in their generic form without annotating "SLS". Viagra and Avanafil have been *added to the SLS list*, so must be prescribed within SLS criteria and must be annotated "SLS" in order to be valid; only in exceptional circumstances should these be prescribed by brand on the NHS.

What does this mean for my patient?

The restricted list of indications no longer applies to generic sildenafil (or apomorphine, moxisylyte or thymoxamine), therefore they can be prescribed on FP10 by GPs without the need for "SLS" endorsement. This enables GPs to prescribe on FP10 for those who previously may not have been eligible for treatment under the NHS criteria such as those who may have been receiving a prescription privately or those attending specialist service/clinics to receive treatment on the basis of suffering severe distress as a result of erectile dysfunction.

What if the patient cannot tolerate generic sildenafil and requests Viagra?

Viagra can only be prescribed on the NHS according to the SLS criteria specified in the NHS Drug Tariff and must then be endorsed "SLS". This is an important distinction within the new national arrangements. Your CCG does not routinely support the prescribing of branded drugs where low cost generic versions are available. Viagra remains significantly more expensive than generic sildenafil (average cost £20 per 4 tablets compared to £1.10 for generic sildenafil).

What quantity of tablets should be issued on prescription?

National advice regarding suggested quantities (i.e. one treatment per week) has not changed.

Where do I find up to date information on this?

The September Drug Tariff has been updated to reflect these changes. <http://www.nhsbsa.nhs.uk/924.aspx>