



Medicines of Low and Limited Clinical Value (MOLLCV)

Classification - Items of low clinical effectiveness, where there is a lack of robust evidence of clinical effectiveness or there are significant safety concerns.

CO-PROXAMOL do not prescribe

ACTIONS

SHARE – Ensure all prescribers are aware of these national recommendations
STOP – Do not prescribe co-proxamol
REVIEW – Deprescribe in those currently prescribed, switching to a suitable

alternative

Background Information:

- Co-proxamol was fully withdrawn from the UK market in 2007 by the Medicines and Healthcare products Regulatory Agency (MHRA) due to safety concerns regarding toxicity and risk of fatal overdose.
- There is no licensed preparation available in the UK therefore any existing prescribing is on an unlicensed basis
- The cost of prescribing co-proxamol as an unlicensed 'special' is significantly higher than the licensed cost-effective alternatives as it requires to be imported for individual use at a cost to the NHS and the environment.
- The paracetamol dose in each tablet is at a lower dose (325mg) than in standard paracetamol preparations (500mg).
- There is no robust evidence that co-proxamol is more effective than full strength paracetamol.
- There is a risk of addiction and abuse associated with co-proxamol.
- Co-proxamol is potentially fatal in overdose. The lethal dose of is relatively low and can be potentiated by alcohol and other central nervous system depressants

Prescribing of co-proxamol is not supported by NHS Grampian or NHS Scotland.

Individuals currently prescribed co-proxamol should be reviewed and deprescribed, with suitable alternative analgesics prescribed.

Prescribing Information:

Only 7 patients remain prescribed co-proxamol across Grampian. These patients should be reviewed and changed to suitable alternative analgesic therapy.