

Changes to prescribing of generic sildenafil

Summary

- The cost of sildenafil has fallen substantially since generics were first marketed in 2013.
- Generic sildenafil is no longer subject to SLS restrictions for prescribing and dispensing.
- Sildenafil may now be prescribed for patients with erectile dysfunction who do not meet SLS criteria. Some of these patients may be currently receiving private prescriptions for the drug within GP practices, they should be reviewed.

Background

Sildenafil was first introduced in 1998 and prescribing restrictions were issued by the Department of Health (DH) in 1999 to restrict prescribing, known as the 'Selected List Scheme' (SLS)¹. This identified the conditions that men had to be suffering from to qualify for NHS prescribing for erectile dysfunction (ED). These categories were broadly as follows: diabetes, renal failure on dialysis or after renal transplant, prostatectomy or radical pelvic surgery, spinal cord injury and a number of specified neurological conditions.

Guidance at the time recommended that patients should normally receive four tablets a month unless the GP felt more frequent use was appropriate.

Recent changes

The cost of the drug has fallen substantially since it was first launched in 1998, following introduction of generics in 2013. The current Drug Tariff price (September 2014) for generic sildenafil 100mg tablets is £1.20 for 4 tablets, less for the lower strengths.

After a consultation earlier this year and in the light of the reduced cost, it was concluded by DH that generic sildenafil should be made available to men with ED without them having to meet the criteria for SLS prescribing (2).

Changes introduced in August 2014 have only removed restricted SLS status for generic sildenafil (3). Prescriptions for this no longer have to be endorsed 'SLS' and NHS prescriptions may be issued for patients with ED who previously did not meet SLS criteria. Prescribing of branded sildenafil (Viagra[®]) and all other phosphodiesterase inhibitors remains unchanged and prescriptions for these drugs still needs to be endorsed with 'SLS'. Patients who prefer branded sildenafil (Viagra[®]) may remain on private prescriptions issued by their GP.

Two other drugs were also deregulated for ED by the same legislation, apomorphine and thymoxamine (moxisylyte) but these are rarely used.

Action for practices and GPs

Action for GP practices

1. GPs do not need to endorse prescriptions for generic sildenafil with 'SLS', though prescriptions for other drugs to treat ED including Viagra[®] do remain under SLS regulation.
2. Men who are currently being prescribed sildenafil for ED within GP practices on private prescription who do not meet SLS criteria should be reviewed with a view to issuing NHS prescriptions. If they are currently receiving branded Viagra[®] on private prescription, they can either remain on this if they prefer, or switch to NHS prescriptions for generic sildenafil.

Action for CCGs

CCGs may wish to advise GPs on appropriate amounts of generic sildenafil to prescribe.

They may also wish to review their arrangements for prescribing sildenafil and other phosphodiesterase inhibitors initiated by local Mental Health Trusts on the grounds of 'severe distress' caused by ED.

References

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3. Statutory Instrument (SI) for change in prescribing status of sildenafil, accessed via http://www.legislation.gov.uk/ukSI/2014/1625/pdfs/ukSI_20141625_en.pdf, September 2014