

Wales Safer Communities Network response to: Medicines and Healthcare Products Regulatory Agency (MHRA) Consultation on the proposal to make Codeine Linctus available as a prescription-only medicine (POM)

Closed 15 August 2023 Response submitted via the online survey.

Questions:

1) Do you agree that Codeine Linctus should only be available as a Prescription Only (POM) medicine?

Agree- Yes, we feel this is a sensible approach to safeguard against the increasing trend of using Codeine Linctus for recreational purposes in whichever form, and to limit the risk of addiction through longer use. With the increased use and spread of Purple Drank there is increased risk of more young people getting involved and abusing through this method. There is increased discussion on cocktails with substance misuse where more than one substance is taken with Purple Drank being one of the parts. Given how widespread knowledge is of Purple Drank (or any of its other names) there is the potential that it may become the go to recreational replacement for Nitrous Oxide if the proposal to re-classify it as a class-C drug proceeds.

2) Do you agree that the proposal to reclassify to POM would limit the potential for recreational use or use for illegal purposes

Agree- Yes, it has the potential to reduce recreational use or other illegal purposes by making access more difficult; maintaining records of individuals who were prescribed no matter which Doctor or pharmacy they use; all of which should limit the opportunities for it to be used irresponsibly and/or inappropriately. As a prescription medication there is a risk that it could be a target of cuckooing and exploitation. However, we deem this risk to be low and with the recording of prescriptions and potential increased engagement with a patient by a Doctor this should be mitigated against in many instances.

3) Do you agree that the proposal to reclassify to POM would help the pharmacist to monitor use in patients who would benefit from the prescription of codeine linctus?

Agree-Yes, potentially it does as there is no system to record patients who access codeine linctus, and which are shared between pharmacies. There is nothing



currently stopping any individual from purchasing from multiple pharmacists who are close geographically or further afield. This we hope will reduce the current complexity for pharmacists who may see hundreds of people in any one day. The current system places an expectation on them to offer advice and suggest making an appointment with the GP or alternative medicine- a discussion that may not be easy and the person may disagree and argue about the frequency of purchase. It should enable the responsibility to be shared of monitoring by both Primary Care and the pharmacists with both having access to the same records on frequency of prescription and a warning could be included with prescriptions or when ordering within a certain time period or a number within a time period for the monitoring of the condition and if the most appropriate medication.

4) Do you agree that pharmacist training materials would help to educate pharmacists and patients

Agree - Yes, the more people who are aware of the current information and risks then the better educated pharmacists and patients will be. There is a danger that will need to be managed about the type of information as it may bring Codeine Linctus and ways to take it such as Purple Drank into more common knowledge and by unintended consequence lead to an increase in demand and misuse as a recreational oral substance. We therefore think the messaging needs to be carefully considered to mitigate any risk.

5) Do you think that the proposal could risk impacting people differently, or could impact adversely on any of the protected characteristics (covered by the Public Sector Equality Duty set out in section 149 of the Equality Act 2010 or by section 75 of the Northern Ireland Act 1998)?

Unsure- We are unsure as we are not currently aware of how wide spread the use of the medications are and if they are being utilised by certain groups within the population to treat dry coughs. For example, if they are more frequently used by older people then they may be more adversely affected by needing to access the GP for a prescription at a time when Primary Care are already under pressure and accessing physical appointments is limited with an increase in on-line assessment and review. The use of technology for GP appointments and assessments has an adverse impact on those who are digitally excluded whether due to age, cognitive capacity or socioeconomic issues which mean they have limited or no access to the internet and smart phones or tablets.

The positive should be for all characteristics that if there is an illness which is causing the dry cough that earlier engagement with Primary Care should enable



earlier diagnosis of the cause and any possible treatment which could lead to improved prognosis and patient outcomes.

6) Do you agree that the proposal to reclassify would have little impact on primary care?

Not sure- Primary Care is already under pressure with capacity with one in five GP surgeries closing between 2012 and 2022 in Wales. It is also reported publicly that there are a number of GP surgeries with only one GP partner with ageing GPs who are retiring at a higher rate than new doctors are entering into Primary Care.

The impact on primary care will depend on how much the common ailment scheme running in Wales pharmacists is able to prescribe Codeine Linctus products, with appropriate permission and training. It could also be impacted if there is a need for more appointments linked to potential substance misuse and the need for referral where there appears to be prolonged use where a consultancy with a doctor is appropriate to identify any underlying health issues.

7) The MHRA may publish consultation responses. Do you want your response to remain confidential?

No

8) Are you?

Other- Wales Safer Communities Network (which is made up of members from Policing, Local Authorities, Fire and Rescue, Probation and Third Sector)

9) You live in? Wales

10) Demographics

Prefer not to say