

South East London Area Prescribing Committee  
Lidocaine plasters – Position Statement August 2018



Reference:	PS-011
Intervention:	Lidocaine plasters for the treatment of post-herpetic neuralgia (licensed use), and focal neuropathic pain with allodynia (off-label)
Date of Decision:	August 2018
Date of Issue:	August 2018
Recommendation:	<p><b>AMBER 2 – Initiation by specialist (pain services or specialist palliative care services ONLY), stabilisation for a specified time, then continuation in primary care under an individual management plan.</b></p> <p><b>NOTE: Primary care can be requested to continue supplies in patients started according to the approved criteria listed below.</b></p>
Further Information:	<ul style="list-style-type: none"> <li>• Lidocaine plasters have been widely used for other off-label indications (e.g. non-focal neuropathic pain, musculoskeletal pain or neuropathic pain without allodynia). <b>This use is no longer recommended in South East London (SEL).</b></li> <li>• A review of formulary status was prompted by the <a href="#">NHS England guidance on items which should not be routinely prescribed in primary care</a> (Nov 2017):             <ul style="list-style-type: none"> <li>- NHS England guidance recommends that prescribers in primary care should only initiate lidocaine plasters in new patients, who have been treated in line with <a href="#">NICE CG173 “Neuropathic pain in adults: pharmacological management in non-specialist settings</a> who are still experiencing neuropathic pain associated with post-herpetic neuralgia.</li> <li>- However in South East London initiation for post-herpetic neuralgia should remain with specialist pain services or specialist palliative care services.</li> </ul> </li> <li>• After consultation and review through a sub-group of the SEL Area Prescribing Committee, the Committee has agreed that lidocaine plasters would also remain an appropriate <b>treatment for patients with focal neuropathic pain with allodynia</b> (an off label indication).</li> <li>• In order to ensure appropriate use for both licensed and the off-label indications, all initiation in hospitals must be on the recommendation of <b>specialist pain services, or specialist palliative care services only.</b></li> <li>• In those patients where lidocaine is initiated (post-herpetic neuralgia OR focal neuropathic pain with allodynia) and is to be continued in primary care: The specialist must specify duration of treatment, along with clear directions for reviews to take place and criteria outlining when prescribing should be continued or stopped as part of the individual management plan.</li> <li>• Treatment for focal neuropathic pain with allodynia (off-label use) should <b>not</b> be initiated in primary care.</li> </ul>

<b>Usage Monitoring &amp; Impact Assessment</b>	<b>Trusts:</b> <ul style="list-style-type: none"> <li>• Monitor and submit usage and audit data to the APC on request.</li> </ul>
	<b>CCGs</b> <ul style="list-style-type: none"> <li>• Monitor exact data</li> <li>• Monitor exception reports from GPs if inappropriate transfer of prescribing to primary care is requested.</li> </ul>
<b>Evidence reviewed</b>	1. Items which should not routinely be prescribed in primary care: Guidance for CCGs, NHS Clinical Commissioners and NHS England: <a href="https://www.england.nhs.uk/wp-content/uploads/2017/07/Items-not-routinely-prescribed-in-primary-care.pdf">https://www.england.nhs.uk/wp-content/uploads/2017/07/Items-not-routinely-prescribed-in-primary-care.pdf</a> last accessed: 03/08/2018

**NOTES:**

- a) Area Prescribing Committee recommendations, position statements and minutes are available publicly via the [APC website](#).
- b) This Area Prescribing Committee position statement has been made on the cost effectiveness, patient outcome and safety data available at the time. The position statement will be subject to review if new data becomes available, costs are higher than expected or new NICE guidelines or technology appraisals are issued
- c) **Not to be used for commercial or marketing purposes. Strictly for use within the NHS.**