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Research and analysis

# Prescribed medicines review: what this report means for patients

Updated 3 December 2020

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### More people are taking prescribed medicines for longer

Some prescription medicines can be addictive and could cause problems for people taking them or coming off them, especially if someone has been taking them for a long time. These medicines include benzodiazepines and z-drugs, gabapentin and pregabalin, and opioid pain medicines. Antidepressants are not addictive but some people have problems coming off them.

The government asked Public Health England (PHE) to look at the evidence about this problem. We found that, since at least 10 years ago, more people are being prescribed more of these medicines and often for longer.

The prescribing of some of these medicines (like benzodiazepines and opioids) has fallen recently but others (such as gabapentin, pregabalin and antidepressants) are being prescribed more and for longer. This means more people are at risk of becoming addicted to them or having problems when they stop using them. It also costs the NHS a lot of money, some of which is wasted because the medicines do not work for everyone all the time, especially if they are used for too long.

#### Do not stop taking a prescribed medicine on your own

The medicines we looked at help to make millions of people every year feel better and recover from their illness. Doctors can prescribe them because there is good evidence that they work, but they do have some risks. If you are a patient taking one of these medicines as prescribed by your doctor (or other prescriber), but you are worried by anything in this report, you should not stop taking them on your own. Instead, make an appointment to see your doctor and talk through your worries.

PHE do not want to put anyone off safely using medicines that could help them. Stopping or limiting the use of medicines could also cause harm, including increasing the risk of suicide or making people try to get medicines or illegal alternatives from less safe sources, such as illegal websites or drug dealers.

## What your doctor should do

Because of this report – and work being done by lots of others – doctors and other healthcare professionals should:

- consider all the treatments that might work for you, including those that don't involve (or are in addition to) medicines, like talking therapies or exercise
- tell you about the benefits and risks of medicines
- regularly review whether a medicine is helping you or not
- change the treatment if it's not helping you

They might offer some patients the chance to gradually come off a medicine they have been taking for a long time.

If you need to start taking a medicine - or need to continue taking one - your doctor will always try to do what is in your best interests.

If you believe what your doctor is doing is not in your best interests you should talk to them first. You have the right to make a complaint and the right to ask for a second opinion. If you want support to make a complaint you can contact your local <u>NHS</u> Complaints Advocacy Service

(http://nhscomplaintsadvocacy.org/). Your local Healthwatch (https://www.healthwatch.co.uk/your-local-healthwatch/list) can also give you more information.

We also recommend that there should be improvements in the information, advice and support available to patients from doctors and specialist services. If you have problems coming off a medicine, tell your doctor and they should offer you more support or put you in touch with another service that can help.

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