



Pan Mersey
Area Prescribing Committee

Guidance for Dental Prescribing in Primary Care

This Guidance does not include prescribing advice to primary care from secondary care specialists e.g. oral medicine, special care dentistry or oral and maxillofacial surgery, regarding the management of complex conditions and patients with multiple co-morbidities.

Pan Mersey APC agrees a policy to support national recommendations for treatment of dental conditions. It is the recommendation of Pan Mersey APC that:

- Non-dental prescribers should not accept requests from dentists to prescribe medicines that the dentist could prescribe.
- Non-dental prescribers should not accept requests from patients to issue FP10 prescriptions for items prescribed on a private prescription by their dentist during dental treatment as a private patient.
- Patients should seek a dental appointment if toothache persists for more than one or two days, and take painkillers such as paracetamol or ibuprofen, which can be purchased over the counter, until they see the dentist.¹
- Non-dental prescribers are advised that dental abscesses must be treated by dentists, and that antibiotic prescribing is not routinely recommended.² Prescribers should not prescribe antibiotics while patients await definitive treatment, unless there is evidence of systemic sepsis, facial cellulitis or swelling or a background of systemic immune suppression.
- Patients should be advised of self-care measures and signposted to purchase over the counter remedies for dental conditions where appropriate.
- Mouthwashes and toothpaste are DENTAL prescription only; long term treatment should be under their usual dentist. However they may be prescribed on advice from secondary care specialists e.g. following radiotherapy during active management, haematological malignancies or oral dermatological diseases.
- General Practice should not prescribe dental items if a patient has no dentist as they are not solely responsible. Patients should be directed to find an available dentist via NHS England <http://www.nhs.uk/NHSEngland/AboutNHSservices/dentists/Pages/find-an-NHS-dentist.aspx>
- Non-dental prescribers are reminded that they are neither covered by their defence organisation nor regulatory body when treating dental conditions.

Background:

Medicines for dental conditions are usually more appropriately obtained via the patient's dentist, or should be purchased over the counter, rather than prescribed on FP10 prescriptions. It is recommended by NHS Choices that patients should seek a dental appointment if toothache persists for more than one or two days, and take painkillers such as paracetamol or ibuprofen until they see the dentist.¹

Rationale for Non-Prescribing of medicines for dental conditions on FP10:

Prescribing medicines is an integral aspect of many dental treatment plans.³ UK prescribing data indicates that dental products are prescribed by General Practice. Also, General Practice anecdotally report that they receive requests from dentists and patients to prescribe acute or repeat medicines for dental conditions. For example, high-strength prescription-only fluoride toothpastes, mouth ulcer healing preparations, antibiotics and analgesics.

Prescribers are responsible for all prescribing decisions they make and for any consequent monitoring that is needed as a result of the prescription given.⁴ Dentists are responsible for assessing their patient's condition and prescribing within their competence.³ If a dentist deems that a medicine is required to treat their patient's dental condition, and they are able to prescribe or direct the patient to that medicine via an appropriate route (see 'Obtaining medicines for dental conditions' below) then it is reasonable to expect the dentist to do so. In addition, some dental medicines require ongoing monitoring and clinical assessment by the dentist; therefore the dentist should retain clinical responsibility and prescribing.

The involvement of General Practice in prescribing medicines for dental conditions is usually unnecessary, using up valuable appointments and General Practice time.

Key points to obtaining medicines for dental conditions:

There are various routes by which a dentist can prescribe medicines for their patients or direct them to appropriate medicines:

- Dentists can issue NHS prescriptions for medicines from the [Dental Practitioners' Formulary](#) (DPF, see current BNF) for treatment provided within an NHS contract.⁵
- Dentists can issue private prescriptions; legally they can do so for any medicine. However, ethically they should restrict prescribing to areas in which they are competent (i.e. medicines that are used in dentistry). When a person receives treatment as a private patient, they must always be given a private prescription even if the medicine required is on the DPF list.⁵
- Dentists, like other healthcare professionals, are also able to signpost patients to appropriate forms of self-care, e.g. direct them to a community pharmacy to purchase an over the counter analgesic.

References

1. NHS Choices - Toothache (Accessed via <http://www.nhs.uk/conditions/Toothache/Pages/Introduction.aspx> March 2017)
2. NHS Choices Dental – Abscesses (Accessed via <http://www.nhs.uk/Conditions/Dental-abscess/Pages/Introduction.aspx> March 2017)
3. Guidance on prescribing medicines, General Dental Council, 30th September 2013. (Accessed via www.gdc-uk.org March 2017).
4. Prescribing in General Practice, General Practitioners Committee. (Accessed via <https://www.bma.org.uk/advice/employment/gp-practices/service-provision/prescribing/prescribing-and-dispensing> March 2017).
5. UKMi Medicines Q&A 193.4 When can dentists supply medicines? May 2015. (Accessed via <https://www.sps.nhs.uk/wp-content/uploads/2015/07/NW-QA193.4-When-can-dentists-supply-medicines-.pdf> March 2017).

Further Dental Information:

Management of Infection Guidance in Primary Care from Public Health England:

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/622637/Managing_comm_on_infections.pdf

Antimicrobial prophylaxis against infective endocarditis in adults and children undergoing interventional procedures. <https://www.nice.org.uk/guidance/cg64>