

**South East London Area Prescribing Committee
Position Statement**

Reference:	PS-006
Intervention:	<p>Rubefacients (excluding topical NSAIDs and capsaicin) for musculoskeletal pain</p> <p>Examples of rubefacients include Algesal® cream, Balmosa® cream, Deep Freeze® cold gel 2%, Movelat® cream, Movelat® gel and Ralgex Heat spray®. Many other topical rubefacients are available.</p>
Date of Decision:	July 2018. Updated January 2020 in line with revised NHS England guidance.
Date of Issue:	August 2018, re-issued February 2020
Recommendation:	<p>GREY – not recommended for prescribing in South East London</p> <ul style="list-style-type: none"> • Prescribers should NOT initiate rubefacients for any new patients • Patients established on rubefacients should be reviewed with a view to having these stopped; alternative analgesic agents may be prescribed if clinically indicated, or encouraged to self-care with OTC preparations • Counsel patients to help them understand that using rubefacients are unlikely to help relieve their musculoskeletal pain and therefore they will not be prescribed on FP10. • Consider recommending or prescribing an effective alternative treatment if appropriate. • If these patients still wish to use a rubefacient they should be advised that they can be purchased as self-care over-the-counter (OTC) with the support of the community pharmacist.
Further Information:	<ul style="list-style-type: none"> • Rubefacients (excluding topical NSAIDs and capsaicin) are considered as an item of low clinical effectiveness by NHS England due to a lack of robust evidence • Topical rubefacient preparations act by counter irritation of the skin; however, the evidence available does not support the use of topical rubefacients in acute or chronic musculoskeletal pain • A recently updated Cochrane review found that any evidence for their efficacy came from older smaller trials, but larger, more recent studies showed no effect • NICE guideline on osteoarthritis (CG177) does not recommend rubefacients for treatment of osteoarthritis • Preparations often contain nicotinate compounds, salicylate compounds, essential oils and camphor, which are all irritants • Patients who want to continue using rubefacients can be advised that these can be purchased OTC with the support of the community pharmacy • A patient information leaflet explaining why rubefacients (excluding topical NSAIDs and capsaicin) will no longer be prescribed is available here.
Cost Impact for agreed patient group	<ul style="list-style-type: none"> • Across six CCGs in South East London spend for rubefacients for April 2018 to March 2019 was ~£148K.

Usage Monitoring & Impact Assessment	Trusts – monitor non-formulary requests CCGs - monitor E pact 2 data and exception reports from GPs if inappropriate requests to prescribe are made to primary care
Evidence reviewed:	<ol style="list-style-type: none"> 1. Items which should not routinely be prescribed in primary care: Guidance for CCGs, NHS Clinical Commissioners and NHS England: https://www.england.nhs.uk/publication/items-which-should-not-be-routinely-prescribed-in-primary-care-guidance-for-ccgs/ last accessed: 15/10/2019 2. PrescQIPP: Rubefaciants for the treatment of soft-tissue disorders and topical pain relief. Available at: https://www.prescqipp.info/-rubefaciants/send/224-rubefaciants-drop-list/2334-bulletin-114-rubefaciants last accessed: 27/07/2018 3. The Osteoarthritis: care and management NICE Clinical Guideline CG 177 (published 2014). Available at: https://www.nice.org.uk/guidance/CG177 last accessed: 27/07/2018 4. Derry S, Matthews PRL, Wiffen PJ, Moore RA. Salicylate-containing rubefaciants for acute and chronic musculoskeletal pain in adults. Cochrane Database of Systematic Reviews. November 2014, Issue 11. Available at: http://cochranelibrary-wiley.com/doi/10.1002/14651858.CD007403.pub3/abstract last accessed: 27/07/2018

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.**