

**South East London Area Prescribing Committee  
Paracetamol 325mg/tramadol 37.5mg combination products  
- Position Statement, August 2018**

<b>Reference:</b>	<b>PS-008</b>
<b>Intervention:</b>	<b>Paracetamol and tramadol combination products for pain</b>
<b>Date of Decision:</b>	<b>July 2018</b>
<b>Date of Issue:</b>	<b>August 2018</b>
<b>Recommendation:</b>	<p><b>GREY - not recommended for prescribing in South East London</b></p> <ul style="list-style-type: none"> <li>Do not start new patients on paracetamol 325mg/tramadol 37.5mg combination products e.g. Tramacet®</li> <li>Commence new patients requiring analgesia on paracetamol taken on a regular basis. Those requiring a weak opioid analgesic can have codeine added to their paracetamol</li> <li>Review all patients on paracetamol 325mg/tramadol 37.5mg combination products for clinical need and suitability for changing to paracetamol alone or paracetamol with codeine, and change prescription as appropriate.</li> </ul>
<b>Further Information:</b>	<ul style="list-style-type: none"> <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> (Dec 2017)</li> <li>There is <b>no evidence</b> that paracetamol and tramadol combination product such as Tramacet® is more effective or safer than paracetamol 500mg and codeine 30mg (either as individual drugs or combined as co-codamol 30/500)</li> <li>Tramacet® costs substantially more than other drugs which would be considered at the equivalent step of the World Health Organization (WHO) analgesic ladder (step 2) without evidence of improved efficacy or safety.</li> <li>The dose of paracetamol in Tramacet® is not optimal</li> <li>The increased number of reports of abuse and misuse and harms associated with tramadol has resulted in an increase in the number of tramadol related deaths.</li> </ul>
<b>Cost Impact for agreed patient group</b>	<ul style="list-style-type: none"> <li>Across six CCGs in South East London spend for paracetamol/tramadol combination products from April 2017 to March 2018 was ~£45K</li> </ul>
<b>Usage Monitoring &amp; Impact Assessment</b>	<p>Trusts – monitor non-formulary requests</p> <p>CCGs - monitor impact data and exception reports from GPs if inappropriate requests to prescribe are made to primary care</p>
<b>Evidence Reviewed</b>	<ol style="list-style-type: none"> <li>NHS PrescQIPP. Switching Tramacet® to paracetamol alone or paracetamol and codeine. Bulletin 62: February 2014. <a href="https://www.prescqipp.info/-tramacet/send/59-tramacet/946-bulletin-62-tramacet">https://www.prescqipp.info/-tramacet/send/59-tramacet/946-bulletin-62-tramacet</a> last accessed: 27/07/2018</li> <li>NHS PrescQIPP Briefing 62: Tramacet®: <a href="https://www.prescqipp.info/resources/send/59-tramacet/947-bulletin-62-tramacet-briefing">https://www.prescqipp.info/resources/send/59-tramacet/947-bulletin-62-tramacet-briefing</a> last accessed: 27/07/2018</li> <li>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: 27/07/2018</li> </ol>

**NOTES:**

- Area Prescribing Committee recommendations, position statements and minutes are available publicly via the [APC website](#).
- 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
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