

## Paracetamol and tramadol combination products

This is one of a number of bulletins providing further information on medicines that should be given low priority, are poor value for money, are suitable for self-care or for which there are safer, more suitable alternatives. This guidance will support Clinical Commissioning Groups (CCGs) in taking action on items that should not routinely be prescribed in primary care or on the NHS. Further bulletins, including the overarching 'Low Value Medicines' information bulletin are available on the PrescQIPP website: [https:// www.prescqipp.info/drop-list/headline-areas/the-prescqipp-drop-list#low-value-medicines-lvm](https://www.prescqipp.info/drop-list/headline-areas/the-prescqipp-drop-list#low-value-medicines-lvm) This bulletin focuses on paracetamol and tramadol combination products and provides the rationale for therapy to be switched to alternative treatments or discontinued as appropriate and for new patients not to be started on paracetamol and tramadol combination products.

### Key recommendations

- 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.
- Review all patients on paracetamol/tramadol combination products for suitability for switching to paracetamol alone or paracetamol with codeine.
- Switch all suitable patients to paracetamol alone or paracetamol and codeine. As with all switches, these should be tailored to the individual patient.

Combination products containing 325mg paracetamol and 37.5mg tramadol are currently available as both tablets and effervescent tablets.<sup>1</sup> The tablets were previously available as the brand Tramacet® but are now also available generically.<sup>2</sup> Both active ingredients are analgesics - paracetamol is a simple analgesic and tramadol is an opioid analgesic and schedule 3 controlled drug.<sup>1</sup> Tramacet® and the generic equivalent combination products of paracetamol and tramadol are licensed for the symptomatic treatment of moderate to severe pain.<sup>3</sup> However, there is no evidence that paracetamol 325mg/tramadol 37.5mg is more effective or safer than standard recognised treatment with paracetamol 500mg and codeine 30mg (either as individual preparations or combined as co-codamol 30/500).<sup>4,5</sup> In fact, paracetamol 325mg/tramadol 37.5mg contains sub-therapeutic doses of both active ingredients.<sup>1</sup> There have been an increased number of reports of misuse and harms associated with tramadol, which have resulted in an increase in the number of tramadol related deaths.<sup>6</sup> In terms of cost-effectiveness most formulations of paracetamol/tramadol combination products are also more expensive than paracetamol and codeine (alone or combined).<sup>7</sup> Consequently, paracetamol 325mg/tramadol 37.5mg does not represent a cost-effective choice and is not recommended for NHS prescribing.

### Cost and savings

The cost per 100 tablets/capsules for paracetamol/tramadol combination product is currently £2.43 (£9.68 for the effervescent preparation).<sup>4</sup> The comparative cost of paracetamol 500mg tablets alone is £1.34.<sup>4</sup>

Where an opioid is also indicated, codeine 30mg tablets can be added for an additional £2.86 per 100 tablets and where regular dosing with both paracetamol and codeine is required, co-codamol 30/500 capsules cost £2.93 per 100 capsules.<sup>4</sup>

In England and Wales, over £608,000 is spent annually on paracetamol and tramadol combination products. (ePACT May to July 2018). Switching to paracetamol alone at its optimal dose **could save up to £268,000 annually which equates to £440 per 100,000 patients.** Eighty percent of prescribing is currently for the more costly high strength or soluble formulations and these patients should be prioritised for review. As with all switches, individual patient circumstances need to be considered.

## Suggested alternatives

Paracetamol 500mg tablets (or soluble tablets) – two tablets to be taken four times a day for pain	PLUS	Codeine 30mg tablets (or soluble tablets) – one tablet to be taken four times a day for pain
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OR

Co-codamol 30/500 capsules (or effervescent tablets). Take two capsules up to four times a day for pain
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## References

1. British National Formulary NICE August 2018. Available at <https://bnf.nice.org.uk> accessed 21/08/2018
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4. National Prescribing Centre. Pain Overview Data Focused Commentary: Use of Opioids. 2010.
5. National Prescribing Centre. The withdrawal of co-proxamol: alternative analgesics for mild to moderate pain. MeReC Bulletin 2006;16(4).
6. Advisory Council on the Misuse of Drugs (ACMD) consideration of tramadol. February 2013. Available at: <https://www.gov.uk/government/publications/acmd-advice-on-tramadol> Last accessed 21/08/2018.
7. Department of Health. Drug Tariff. August 2017. Available via [www.nhsbsa.nhs.uk](http://www.nhsbsa.nhs.uk) Last accessed 21/07/2018.

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