

Eye preparations

Key Recommendations

Ocular hypertension (OHT) and chronic open angle glaucoma (COAG)¹

- Ophthalmologists should offer a generic prostaglandin analogue (PGA) eye drop to people if they:
 - » Choose not to have 360° selective laser trabeculoplasty (SLT) or it is not suitable for them
 - » Are waiting for 360° SLT and need an interim treatment, or are awaiting glaucoma surgery for advanced COAG
 - » Have had 360° SLT but need additional treatment.
- If a second line pharmacological treatment is needed (due to tolerability issues or insufficient effect) ophthalmologists may offer alternative generic PGA, a topical beta-blocker, a non-generic PGA, a topical sympathomimetic, a topical carbonic anhydrase inhibitor, a topical miotic or a combination of treatments.
- Offer preservative-free preparations to people with COAG (or OHT with a high risk of conversion to COAG) if they have an allergy to preservatives or clinically significant ocular surface disease.
- Demonstrate correct eye drop installation technique and observe the person using the correct technique when eye drops are first prescribed.
- Ask about adherence and support people to overcome any barriers. Be vigilant for issues due to differences in generic eye drop bottles.

Dry eye disease²

- In accordance with [NHS England guidance](#), do not routinely offer a prescription for ocular lubricants for cases of mild to moderate dry eye disease. Advise people how to self care with lifestyle modifications (including warm compresses and lid hygiene) and purchased over the counter (OTC) ocular lubricants, if needed.³
- Consider auditing ocular lubricant prescribing to identify patients that may be suitable for self care OTC. Prioritise patients:
 - » Without a diagnosis of dry eye disease, and
 - » Whose eye lubricants are issued irregularly.
- Consider if systemic medication could be contributing to dry eye symptoms. Where clinically appropriate consider a dose reduction, different route of administration, or switching to alternative treatment(s).
- Include a range of cost-effective first and second line ocular lubricant options in local formulary guidance.
- In general, start with a less viscous ocular lubricant as these are less likely to cause stinging and blurring. Consider factors that may be important for the individual e.g. ease of use for people with arthritis.
- Advise on the use of preservative-free eye preparations for dry eye disease, particularly for those who are intolerant of preservatives, require topical preparations more than four times per day, use multiple preparations or who use soft or hybrid contact lenses.

Costs, prescribing review and potential savings

In England, Wales, Northern Ireland, Isle of Man and Scotland approximately £137million is spent annually on the prescribing of branded glaucoma eye preparations, ocular lubricants including simple eye ointment (NHSBSA (Oct-Dec 2023) and Public Health Scotland (Aug-Oct 2023)).

In England, Wales, Northern Ireland, Isle of Man and Scotland a reduction in the prescribing of:

- **Ocular lubricants by 20% (by promoting self care where appropriate and rationalising the number of ocular lubricants each patient is prescribed) would produce savings in the order of £20.2million. This equates to £27,085 per 100,000 population.**
- **Branded glaucoma preparations by 20% (by prescribing generics instead) would produce savings in the order of £7.2million. This equates to £9,722 per 100,000 population.**
- **Simple eye ointment by 80% could save a further £531,857 annually. This equates to £714 per 100,000 population.**

References

1. NICE. Glaucoma: diagnosis and management. NICE guideline [NG81]. Published November 2017, last updated January 2022. <https://www.nice.org.uk/guidance/ng81>
2. Clinical Knowledge Summary. Dry eye disease. Last revised January 2023. <https://cks.nice.org.uk/topics/dry-eye-disease/>
3. NHS England. Policy guidance: conditions for which over the counter items should not routinely be prescribed in primary care. Published 12 March 2024. <https://www.england.nhs.uk/long-read/policy-guidance-conditions-for-which-over-the-counter-items-should-not-be-routinely-prescribed-in-primary-care/>

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| Additional resources available | Bulletin | https://www.prescqipp.info/our-resources/bulletins/bulletin-344-eye-preparations/ |
| | Tools | |
| | Data pack | https://data.prescqipp.info/views/B344_Managementofdryeyesinprimarycareeyepreparations/FrontPage?%3Aembed=y&%3Aiid=1&%3AisGuestRedirectFromVizportal=y |

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