



HFMA UPDATE

by Graham Keen,
Executive Director

The growing 'self-care' agenda



Self-care has been rising up the political and media agendas recently, attracting interest from a wide group of stakeholders as a means of improving health while reducing the burden on the NHS. Everyone likes a double-whammy. Of course improving health and wellbeing is central to the proposition of our health food category and is therefore fundamental to our mission here at the HFMA. This is perhaps best expressed through our work with the media and health influencers, where we seek to ensure a balanced and informed perspective on the role of vitamin and minerals supplements (VMS), and nutrients generally, and their role in promoting a healthier nation that consistently fails to enjoy a properly balanced diet. Our mission is also expressed through our support for the activities of the All-Party Parliamentary Group on Micronutrients and Health, the secretariat for which is managed by the HFMA.

An interesting recent development in self-care is the publication of a new NHS England consultation document that proposes to end the routine prescribing by GPs of, amongst other things, vitamins, minerals and probiotics. The rationale for the initiative (which covers a wide range of commonly available OTC items) is twofold. The conditions for which routine prescriptions are recommended to be withdrawn are those where the individual may be expected to self-care, visiting the

pharmacy for suitable products and advice, rather than the GP. The other part of the rationale is that such reduced prescribing would save scarce funds that the NHS could reallocate to other, arguably more needy areas of the health system. The consultation document states that removing vitamins, minerals and probiotics from routine prescribing would save an estimated £50m a year from the public purse (vitamins and minerals £48.1m and probiotics £1.1m).

We do not argue that there may be a case to change prescribing as NHS England suggests. Where we disagree, however, is in the stated rationale. The document invites Clinical Commissioning Groups (CCGs) to advise GPs to cease the routine prescribing of vitamins, minerals and probiotics on the grounds that there is limited evidence of clinical effectiveness. NHS England argue that there is insufficient high quality evidence to demonstrate the clinical effectiveness of vitamins and minerals, which they acknowledge are essential nutrients

which most people can and should get from eating a healthy, varied and balanced diet. Moreover, they argue that in most cases dietary supplementation is unnecessary.

In their document, NHS England conclude that many vitamin and mineral supplements are classified as foods and not medicines, which means they are not subject to the strict criteria laid down by the MHRA to confirm product quality, safety and efficacy before reaching the market. As such, NHS England does not deem it appropriate for such preparations to be routinely funded on the NHS, and any prescribing not in-line with listed exceptions should be discontinued. This guidance would not apply to Healthy Start Vitamins but these are not currently prescribed on NHS prescription anyway, and the only exceptions to these rules would be when someone needed prescriptions for iron deficiency anaemia, demonstrated vitamin D deficiency, calcium and vitamin D for osteoporosis and malnutrition, including alcoholism.

So the general proposition is that whilst self-care is rising up the agenda and becoming an established and increasingly understood concept, politically it is a way to improve health outcomes but also save funds for a cash-strapped NHS. Where this logic fails is that it is entirely based on a clinical assessment, and does not recognise the valuable role of VMS in disease avoidance and illness prevention. We see some

stakeholders regularly seeking to undermine VMS on the grounds that 'a healthy diet is all you need'. Of course there is extensive research which shows that 'busy Brits' have neither the time (in some cases) or the knowledge to rely on a healthy balanced meal three times a day to meet their physical needs for minerals, vitamins and nutrients. The HFMA's bi-annual Health of the Nation Survey, a substantial survey of 10,000 UK adults, certainly backs this up.

I strongly feel that this latest NHS consultation on prescribing shows that NHS actually fails to properly value the role of VMS in health maintenance and illness prevention – because it focuses so much on just treatments and cures, not illness avoidance in the first place. The issue isn't whether VMS should be available on prescription but rather, as their latest consultation document shows, it's whether the NHS believes that VMS 'do not work'. The NHS too often makes assessments based exclusively on 'cure' and not enough importance or funding is attached to 'prevention'. And, as we all well know, 'self-care' can all too often be too late as the damage has often been done and ill-health has not been prevented.

So, our call is for medics and public policy-makers to give the VMS category, health products generally, and this great industry the respect and understanding they deserve. **hfb**

Our strength as an industry comes from speaking with one voice and presenting a united front. So, to help us in our efforts to protect this industry and benefit from the gold-standard advice we provide, join the HFMA at the earliest opportunity. To learn more about our activities, please contact me at graham@hfma.co.uk, or visit www.hfma.co.uk



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