



Prescribing of Dry Eye Lubrication Drops/Gels – Frequently Asked Questions

1. What is the change in the prescribing for dry eyes?

Prescribing of dry eye lubrication drops/gels is not supported for the comfort and relief of mild to moderate dry eye syndrome. This includes prescribing for tired eyes, hay fever symptoms, contact lens wearers, or old age related dry eyes. Mild to moderate dry eye syndrome is not a complicated condition and it can be managed without medical intervention. Dry eye preparations may still be prescribed for severe dry eye syndrome or if dry eye syndrome is an adverse effect or symptom of a more complex illness and/or prescription only medications, (other general exceptions may apply in line with the NHS England policy guidance, conditions for which over the counter items should not be routinely prescribed in primary care, see Section 6).

2. Why has funding been stopped for mild to moderate dry eyes?

Dry eye syndrome, or dry eye disease, is a common condition that occurs when the eyes don't make enough tears, or the tears evaporate too quickly. Most cases of sore tired eyes resolve themselves. Taking care of your eyes is something you can do for yourself. There are things that you can do to help your eyes feel more comfortable and ease symptoms (e.g. good eyelid hygiene and avoidance of environmental factors) – see: https://www.nhs.uk/conditions/dryeyes/ for more information.

In some cases, self-care may be all you need, otherwise mild to moderate cases of dry eye syndrome or sore tired eyes can usually be treated using lubricant eye treatments that can easily be purchased from a pharmacy or, in some cases, a supermarket (see section 5).

Self-care and encouraging the purchase of medicines for minor ailments, including mild to moderate cases of dry eye syndrome or sore tired eyes, is now part of national plans for the NHS. Medications for mild to moderate dry eyes are readily available, low-cost items and no longer prescribing these saves the NHS money which can be used in other ways.

3. I have a medical exemption certificate or a prescription prepayment certificate. Can I have the dry eye products on prescription?

We are asking all patients across Hertfordshire and West Essex to purchase medicines for the comfort and relief of mild to moderate dry eyes. This includes patients with exemption for a medical condition, maternity or age. Mild to moderate dry eyes are usually unrelated to the condition for which you have medical exemption and therefore should be purchased rather than prescribed.

This policy equally applies to people with a prescription pre-payment certificate (PPC). The decision to purchase a prepayment certificate lies solely with the individual based on their personal circumstances. If patients for any reason need to cancel their prepayment certificate, they should contact the NHS prescription prepayment certificates helpline: 0300 330 134, Monday to Friday, 8am to 6pm and Saturday, 9am to 3pm or complete the online form.





4. If you are no longer prescribing dry eye treatments for mild to moderate dry eyes, where can I get them?

You can buy these treatments from your local pharmacy or optometrist without a prescription or, in some cases, from a supermarket or on-line (care should be taken to ensure you are ordering from a reputable retailer). Pharmacists and optometrists have the knowledge and skills to help with management of mild to moderate dry eye syndrome. They can advise you on self-care and the most suitable dry eye medication for you. If you have something more serious, pharmacists and optometrists are trained to signpost you quickly to the right medical care.

5. What treatments are available without prescription?

Treatments for dry eyes include eye drops and gels. If, after trying self-care methods mentioned above, you still have symptoms of dry eyes then you can try any of the treatments listed below.

You may have been recommended a particular treatment to try or your pharmacist or optician can advise you on which type of eye product is best for you. Finding an effective treatment can vary between people. If one does not work then others can be tried until you find the right one for you. A proper trial of one product will take at least 6 to 8 weeks. If your symptoms change or worsen then you should see your GP.

Mild Symptoms	Moderate Symptoms	Mild or Moderate Symptoms
Type of treatment	Type of treatment	Type of treatment
Hypromellose eye drops 0.3% or 0.5%	Sodium Hyaluronate eye drops PF 0.1%	Carbomer 980 0.2%
Carmellose eye drops 0.5%	Carmellose eye drops PF 1%	

Night Time Treatment*

Type of treatment

Paraffin based eye ointments include:

HyloNight®, Xialin Night®, Hydramed Night®.

Lanolin free white soft paraffin eye ointments for those allergic to lanolin include:

Soothe Nighttime®, Hydramed Night Sensitive®.

*These can be added as a night time option and are not to be used with contact lenses.

Key

PF - preservative free PFE - preservative free in eye

6.Where can I find more information and support?

You can speak to a pharmacist or optometrist who can help with advice and treatments for dry eyes.

More information on dry eye syndrome and advice on treating dry eyes with self-care can be found here:

- NHS Health A to Z Dry Eyes: https://www.nhs.uk/conditions/dry-eyes/
- Understanding Dry Eye Leaflet: https://www.rcophth.ac.uk/wp-content/uploads/2020/05/Understanding-Dry-Eye 2017.pdf
- Find out more about the conditions for which over the counter medicines will no longer be prescribed at: NHS England » Policy guidance: conditions for which over the counter items should not be routinely prescribed in primary care.





Version	2.0 Harmonisation of Hertfordshire Medicines Management Committee (HMMC) guidance and West Essex Medicines Optimisation Programme Board (WEMOPB) guidance. Updates include:	
	Rebadging with HWE ICB and removal of Herts CCG headers	
	Review date removed and replaced with standard statement	
	Removal of branded product recommendations	
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Review Date	This HWE APC recommendation is based upon the evidence available at the time of publication. This recommendation will be reviewed upon request in the light of new evidence becoming available.	
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