

DEPARTMENT OF HEALTH,
P.O. BOX 5013,
WELLINGTON.

10 March 1965.

Clinical Services Letter No. 50

TO MEDICAL PRACTITIONERS

Dear Doctor,

"PROPER NAME" LABELLING: TABLETS AND CAPSULES

From 1 April, in accordance with regulations* which take effect from that date, containers for tablets or capsules will be labelled with the proper name unless the prescriber indicates:

- (a) That he does not wish this to be done, or
- (b) That he wishes the label to be marked with some other appropriate designation instead of the proper name.

"Proper Name"

This means the name or abbreviated name stated in the prescription. (The use of official titles, instead of brand names, has much to commend it.)

Why Only Tablets or Capsules?

The term used in the regulations is "pharmaceutical requirements dispensed by count". By agreement with the Pharmaceutical Advisory Committee, this will be regarded as applying only to tablets and capsules.

What About Other Prescriptions?

If preparations other than tablets or capsules are to be marked with the proper name, this should be clearly indicated in the labelling directions in the prescription: e.g.

"Sig.

1% Hydrocortisone Cream

Apply as directed."

Is the Contraction "N.P." Still Valid?

The contraction "N.P." alone sometimes gives rise to difficulties for chemists, especially with mixtures. In future, *except with tablets or capsules* (which will be labelled as a routine), the prescriber will be expected to state in the prescription what he wants to be marked on the label.

*Social Security (Pharmaceutical Benefits) Regulations 1965.

Code Reference Instead of Proper Name?

If this is desired it should be asked for. The abbreviation "C.R." may be used. In such cases the proper name will be omitted and the code reference inserted instead.*

If a Doctor Objects to "Proper Name" Labelling?

A minority of doctors (about 10 per cent) are strongly opposed to automatic labelling with the proper name. Others may not wish the proper name to be used with particular prescriptions. In such cases the contraction "Not N.P." may be employed. This might be printed or rubber-stamped on the prescription form if the doctor desires to avoid automatic labelling altogether.

IMPORTANT

Patients should be reminded, as opportunity offers, that medicines labelled with the proper name should be kept in the container originally supplied. Chemists report that patients frequently change tablets and capsules from one container to another.

HOSPITAL PRESCRIPTIONS

To assist chemists, prescriptions for items to be issued through hospital dispensaries should be written on separate forms.

DRUG TARIFF 1964, AMENDMENT NO. 1: EFFECTIVE 31 MARCH 1965

Additions

A list of most additions with their proprietary names may be found on the last page of the amendment.

Deletions

A list of items deleted from the Drug Tariff will also be found on the last page of the amendment.

Kenacomb cream and ointment are no longer included in the Drug Tariff.

Alterations

(a) The following will be available through chemists: Chlorprothixene (Taractan), diazepam (Valium), methotrimeprazine (Veractil), prednisolone enema (Predsol), tetrabenazine (Nitoman).

(b) The following will be available through hospital board dispensaries without specialist approval: Sulthiame (Ospolot), triamcinolone acetonide injection (Kenacort-A).

Format

The amendment now contains only two schedules—deletions and additions. Items listed as "deletions" do not in all cases disappear from the list. Many of them are included (with some variation) in the schedule of additions.

*Each item in the Drug Tariff has its own three-letter code reference. The schedule has been reprinted, for easy reference, in the Alphabetical List of Proprietary Preparations. (November 1964.)

Effective Dates

In future, amendments will be effective from 1 April, 1 August, and 1 December of each year. (It has been necessary to make this amendment effective from 31 March for technical reasons.)

PART CHARGES

From 1 April 1965 the following will be subject to a part charge to the patient:
(a) *Eye and ear preparations containing a corticosteroid and an antibiotic:* Cambison eye ointment, Chlorocort eye ointment, Codelsol with neomycin ear/eye drops, Cortucid eye ointment, Framycort eye/ear drops and eye ointment, Hycor eye/ear drops 2.5%, Hydrocortone ear/eye suspension 0.5% and 2.5%, Metimyd eye drops and eye ointment, Neo-Cortef eye/ear drops and eye/ear ointment, Terra-Cortril eye/ear suspension.

(N.B.—Above are still restricted—E.N.T. and eye specialists.)

(b) *Thiazide tablets:* Chlorothiazide (Chlotride), hydrochlorothiazide (Dichlotride, Direma, Esidrex), hydrochlorothiazide with potassium (Dichlotride-K, Esidrex-K), hydrochlorothiazide with potassium and reserpine (Dichlotride-K with reserpine), methyclothiazide (Enduron).

CORTICOSTEROID TOPICAL PREPARATIONS

Betamethasone, flumethasone, fluocinolone, flurandrenolone, triamcinolone

Some doctors have been issuing prescriptions calling for the extemporaneous compounding of preparations similar to the above. Payment can only be made for the proprietary forms. The proprietary article may however be diluted with an inert base if a weaker strength is required.

Yours faithfully,

A. W. S. Thompson

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Director,

T. L. Hayes

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Division of Clinical Services.

PRACTICE FOR SALE

Unopposed: 29 miles from Hamilton. Attractive seaside area. Five-bed maternity hospital under Waikato Hospital Board. Brick house. Surgery adjacent.

Inquiries: Dr J. Penman, Box 12, Raglan.