## Therapeutics Advisory Group



**Commissioning Statement for** 

# GLUCOSAMINE (WITH OR WITHOUT CHONDROITIN) PREPARATIONS FOR OSTEOARTHRITIS

**Publication Date: July 2023** 

Prescribing of Glucosamine (with or without Chondroitin) Preparations for osteoarthritis within Norfolk and Waveney ICS is recommended as

BLACK: NOT COMMISSIONED. NO NHS PRESCRIBING IN NORFOLK AND WAVENEY ICS

# **Background**

Norfolk and Waveney ICB does not support the prescribing of glucosamine (with or without chondroitin) preparations in osteoarthritis.

Glucosamine (with or without chondroitin) in any form is not recommended by NICE and NHS England.

NICE Guideline CG177 (February 2014, updated December 2020) Osteoarthritis: Care and management states 'Do not offer glucosamine or chondroitin products for the management of osteoarthritis'.

Glucosamine is an amino monosaccharide, it is a precursor for glycosaminoglycans, and glycoproteins which are a major component of joint cartilage and synovial fluid. Commonly sold forms of glucosamine include glucosamine sulphate and glucosamine hydrochloride.

### Recommendations

- Do not start new patients on any glucosamine (with or without chondroitin) preparations.
- Patients currently being prescribed glucosamine (with or without chondroitin) should be reviewed in the light of NICE and NHS England guidance and stopped.

#### **Patient Considerations**

Those patients expressing a desire to try (or continue taking) glucosamine (with or without chondroitin) should be advised:

- The place of glucosamine in osteoarthritis of the knee remains unclear.
- Although there is evidence of some clinical effectiveness with glucosamine sulphate, it is not considered to be cost effective for prescribing on the NHS.
- To purchase glucosamine over-the counter and they should be advised a decrease in pain severity may take several weeks to occur. If there is no improvement after three months, they should stop taking glucosamine.

This is supported by NHS England as part of the items which should not routinely be prescribed in primary care.

# **Prescribing information**

Providers commissioned to provide services on behalf of Norfolk and Waveney ICB are reminded that they are required to follow the local joint formulary and prescribing guidance, as detailed in the medicines management service specification of their contract.

## **Monitoring of Prescribing**

Data on the use of these treatments will be supplied monthly as part of your data pack. If you have any queries, please email nwicb.medsqueries@nhs.net with 'service restriction policy' in the subject line.

#### References

- NHS England: Items which should not routinely be prescribed in primary care. June 2019:
- https://www.england.nhs.uk/publication/items-which-should-not-be-routinely-prescribed-in-primary-care-guidance-for-ccgs/
- PrescQIPP Bulletin 205: https://www.prescgipp.info/our-resources/bulletins/bulletin-205-glucosamine/
- NICE clinical guideline (CG) 177. Osteoarthritis: care and management: https://www.nice.org.uk/guidance/cg177

Title	Commissioning Statement for GLUCOSAMINE (WITH OR WITHOUT CHONDROITIN) PREPARATIONS FOR OSTEOARTHRITIS		
December Consultation			
Description of policy	To inform healthcare professionals		
Scope	Norfolk and Waveney Integrated Care System		
Prepared by	Norfolk and Waveney ICB Medicines Optimisation Team		
Impact Assessment (Equalities	Please indicate impact assessment outcome:		
and Environmental)	Positive impact		
,	Adverse impact - low - action plan completed as per guidance		
	Adverse impact - medium - action plan completed as per guidance		
	Adverse impact - high - action plan completed as per guidance		
	No impact		
	No policy will be approved without a completed equality impact		
	assessment		
Other relevant approved	Items which should not routinely be prescribed in primary care: Guidance for CCGs, June 2019		
documents	https://www.england.nhs.uk/wp-content/uploads/2019/08/items-which-should-not-routinely-be-		
	prescribed-in-primary-care-v2.1.pdf		
Evidence base / Legislation	Level of Evidence:		
_videiiee baee / Legiciane	A. based on national research-based evidence and is considered best		
	evidence		
	B. mix of national and local consensus		
	C. based on local good practice and consensus in the absence of national		
	research based information.		
Dissemination	Is there any reason why any part of this document should not be available on		
5.000iiiddoii	the public web site? $\square$ Yes / No $\boxtimes$		
Approved by	Norfolk & Waveney Therapeutics Advisory Group (TAG) (Date)		
Authorised by	Norfolk & Waveney Drug Integrated Care Board on behalf of the ICS (Date)		
Review date and by whom	Medicines Optimisation Team		
Date of issue	Oct 2023		

Version Number	Author	Purpose / Change	Date
0.1	MO Team	To support prescribing in primary care	Oct 2023