

## Prescribing of vitamin B complex preparations (vitamin B compound or vitamin B compound strong tablets) is not supported

**Thurrock CCG, and Basildon and Brentwood CCG do not support the prescribing of vitamin B complex preparations (vitamin B compound or vitamin B compound strong tablets), except for people at high risk of developing refeeding syndrome following specialist advice**

Vitamin B complex preparations (vitamin B compound and compound strong tablets) have historically been used in addition to a thiamine supplement in people who are alcohol-dependent to prevent Wernicke's encephalopathy (WE). Thiamine supplementation is important in this at risk group, however, NICE guidance (CG 100) makes no reference to the use of vitamin B complex preparations for this indication, due to a lack of evidence. Vitamin B compound and vitamin B compound strong tablets do not contain enough thiamine for the treatment or prevention of WE and should not be prescribed for this indication.

NICE guidance recommends prophylactic thiamine to prevent WE in people with alcohol dependence at a dose of 200mg to 300 mg daily in divided doses, if any of the following apply:

- They are malnourished or at risk of malnourishment
- They have decompensated liver disease
- They are in acute withdrawal
- Before and during a planned medically-assisted alcohol withdrawal

Following successful alcohol withdrawal, thiamine should be continued for 6 weeks and if the patient remains abstinent the dose may be reduced to 50mg daily and continued for as long as malnutrition may be present.

Vitamin B compound and vitamin B compound strong tablets are licensed for the treatment of clinical and subclinical vitamin B deficiency states. However, with the exception of thiamine and vitamin B12, deficiency of the B vitamins is rare in the UK, and as malnutrition is often implicated, oral supplementation is of questionable clinical benefit and these should not be prescribed. There is insufficient evidence of clinical benefit to support the use of vitamin B complex as dietary supplements and these are widely available to purchase for people who wish to use them for dietary supplementation.

### Recommendations:

- **Do not initiate** vitamin B compound or compound strong tablets except on the advice of a specialist for people at high risk of developing refeeding syndrome (NICE CG32).
- Refeeding syndrome will routinely be managed in the hospital setting, unless specifically requested to prescribe for this indication in primary care. Vitamin B compound strong tablets may be prescribed on a short-term basis only for patients at high risk of refeeding syndrome (vitamin B compound strong 1 or 2 tablets, three times a day provided immediately before and during the first 10 days of feeding only).
- **Review and discontinue** the prescribing of vitamin B compound and compound strong tablets in all people with alcohol dependence, and ensure they are prescribed thiamine 200mg to 300 mg daily in divided doses.
- In previously alcohol dependent people who remain abstinent, the thiamine dose may be reduced to 50mg once daily, and stopped altogether if malnutrition is no longer a concern. Thiamine should be restarted if the patient starts drinking again.
- Review the prescribing of vitamin B compound and compound strong tablets in all other indications for appropriateness. Vitamin B compound and compound strong tablets are of questionable clinical benefit and should not be prescribed. These products are widely available to purchase for people who wish to use them for dietary supplementation.

Providers commissioned to provide services on behalf of Thurrock CCG and Basildon and Brentwood CCG are reminded that they are required to follow the local joint formulary and prescribing guidance, or relevant Medicines Management agreement.

<b>Position Statement No.</b>	55
<b>Title</b>	Prescribing of vitamin B complex preparations (vitamin B compound or vitamin B compound strong tablets) is not supported
<b>References</b>	NICE CG100. Alcohol Use Disorders. 2010 updated Aug 2019 <a href="https://www.nice.org.uk/guidance/cg100/evidence/full-guideline-pdf-134509213">https://www.nice.org.uk/guidance/cg100/evidence/full-guideline-pdf-134509213</a> Regional Medicines Optimisation Committee position statement, Oral vitamin B supplementation in alcoholism November 2019
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