Local & Government (DHSC) policy has been agreed to reduce the amount of money the NHS spends on prescriptions for treating minor conditions that are self-limiting. Self-care is recommended for all minor ailments and illnesses, including dry eye, as the first stage of treatment. Further information can be found [here](https://www.england.nhs.uk/wp-content/uploads/2018/08/1a-over-the-counter-leaflet-v1.pdf). Being exempt from prescription charges does not make a patient exempt from this guidance.

Dry eyes and sore eyes are listed within the guidance as suitable for self-care, and treatments should therefore **not be routinely** **prescribed** in primary care (as per [NHS England guidance](https://www.england.nhs.uk/medicines-2/conditions-for-which-over-the-counter-items-should-not-routinely-be-prescribed/)). It’s important to signpost patients to appropriate services. The guidance is not intended to discourage patients from seeking clinical advice when it is appropriate to do so.

A wide range of information is available to the public about health promotion and the management of minor self- treatable illnesses. Advice from organisations such as the [Self Care Forum](https://www.selfcareforum.org/) and [NHS Choices](https://www.nhs.uk/pages/home.aspx) is readily available. Many community pharmacies are also open extended hours including weekends and are ideally placed to offer advice on the management of minor conditions and lifestyle interventions.

The National Institute for Health and Care Excellence (NICE) has published [guidance](https://cks.nice.org.uk/topics/dry-eye-disease/management/management/) on self-care for minor conditions. This can be a useful resource for Optometrists when providing patient education on self-care for dry eyes. Some key recommendations from NICE include:

* Using warm compresses to relive dry eye symptoms
* Avoiding environmental triggers (such as air conditioning and smoke)
* Taking breaks from screens to reduce eye strain
* Staying hydrated by drinking plenty of fluids

GPs, nurses and pharmacists will **not** usually issue a prescription for the following conditions:

* Conjunctivitis
* Dry eyes/ sore tired eyes
* Mild to moderate hayfever

Prescribing wipes or lotions to treat Blepharitis is not permitted in LLR due to the lack of clinical evidence of efficacy. First line treatment should be self-care with a warm compress and lid massage. Please refer to [CKS management](https://cks.nice.org.uk/topics/blepharitis/management/management-of-blepharitis/) of Blepharitis. A link to the UHL self-care leaflet for patients is available [here](https://yourhealth.leicestershospitals.nhs.uk/library/musculoskeletal-specialist-surgery-mss/ophthalmology/1019-blepharitis-of-the-eyelid/file). Alternatively, if not available within your practice, patients can be directed to their community pharmacy to purchase eyelid wipes or lotions.

In many cases these minor conditions will clear up with appropriate self-care. If symptoms are not improving or responding to treatment, then patients should be encouraged to seek further advice for NHS treatment: this can be via their GP or community pharmacist, or onto secondary care when appropriate.

Local guidance on dry eyes can be found [here](https://www.areaprescribingcommitteeleicesterleicestershirerutland.nhs.uk/wp-content/uploads/2023/01/Dry-Eye-Guidance.pdf).