

Factsheet on prescribing of vitamin B compound and compound strong

Vitamin B compound and vitamin B compound strong are licensed for the treatment of vitamin B deficiency. They contain thiamine, riboflavin and nicotinamide. Vitamin B compound strong also contains pyridoxine. See table 1.

Historically, vitamin B compound and vitamin B compound strong have been used in alcohol use disorders. National Institute for Health and Care Excellence (NICE) clinical guideline CG100 recommends that oral thiamine is prescribed to harmful or dependent alcohol drinkers. NICE does not recommend routine prescribing of vitamin B complex preparations such as vitamin B compound and vitamin B compound strong in alcohol use disorders.

Vitamin B compound and vitamin B compound strong should not routinely be prescribed in primary care. This includes for the following indications:

- prevention of Wernicke's Encephalopathy in alcohol-use disorders
- preventing deficiency or for maintenance treatment following treatment for deficiency
- as dietary supplements in the absence of medically diagnosed deficiency

Vitamin B compound and vitamin B compound strong prescribed for these reasons should be stopped.

The following exceptions apply:

- refeeding syndrome
- deficiency

NICE CG32 recommends that people at high risk of developing refeeding syndrome should be prescribed the following vitamins for the first 10 days of feeding. They should be prescribed oral thiamine 200mg to 300 mg daily, vitamin B compound strong 1 or 2 tablets, three times daily or a full dose daily intravenous vitamin B preparation, if necessary, and a balanced multivitamin and trace element supplement once daily.

Vitamin B compound strong may be prescribed if there is a medically diagnosed deficiency, chronic malabsorption, or following surgery that results in malabsorption. This should be prescribed only under the advice of a specialist clinician or dietitian.

Please note that neither vitamin B compound nor vitamin B compound strong contain vitamin B12 so they should not be prescribed for vitamin B12 deficiency.

Table 1: Vitamin B compound versus vitamin B compound strong

B vitamin	Vitamin B compound tablets	Vitamin B compound strong tablets	
Thiamine (B1)	1 mg	5 mg	
Riboflavin (B2)	1 mg	2 mg	
Nicotinamide	15 mg	20 mg	
Pantothenic acid	0	0	
Pyridoxine	0	2 mg	
Folate/folic acid	0	0	
Vitamin B12	0	0	
(Cyanocobalamin)			
Price on FP10	£26.63 for 28	£1.83 for 28	

Vitamin B compound strong is more cost-effective than vitamin B compound. Therefore, vitamin B compound strong should be prescribed in preference to vitamin B compound if it is appropriate to prescribe.

Thiamine in alcohol use disorders

Thiamine should be prescribed to people at high risk of developing, or with suspected, Wernicke's encephalopathy.

Offer prophylactic oral thiamine at a dose of 200mg to 300mg per day in divided doses, to harmful or dependent drinkers:

- if they are malnourished or at risk of malnutrition
- if they have decompensated liver disease
- if they are in acute withdrawal
- before and during a planned medically assisted alcohol withdrawal

For alcohol withdrawal in acute settings see Royal Cornwall Hospitals NHS Trust (RCHT) and Cornwall Partnership NHS Foundation Trust (CFT) guidance.

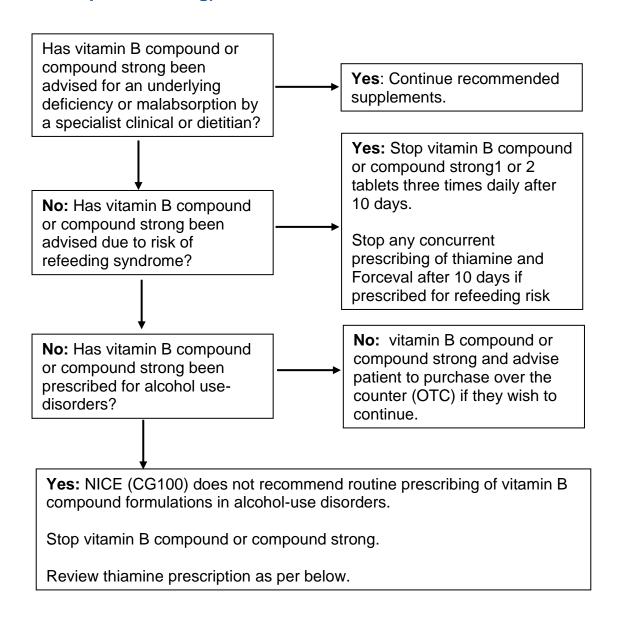
References:

- Regional Medicines Optimisation Committee (RMOC) position statement on oral vitamin B supplementation in alcoholism
- NICE CG100 Alcohol-use disorders: diagnosis and management of physical complications
- NICE CG32 Nutrition support for adults: oral nutrition support, enteral tube feeding and parenteral nutrition

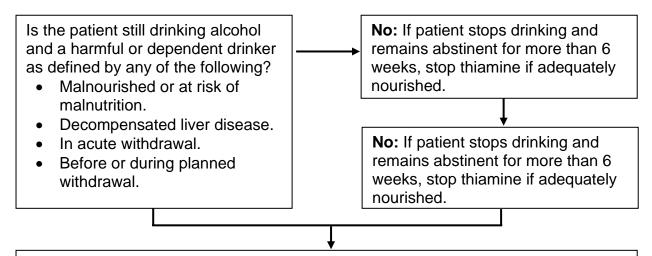
 NHS England conditions for which over the counter items should not routinely be prescribed in primary care: guidance for clinical commissioning groups (CCGs)

Flowchart: review of vitamin B compound and vitamin B compound strong prescribing

Vitamin B complex preparations (vitamin B compound and vitamin B compound strong)



Thiamine in alcohol-use disorders



Yes:

- continue thiamine 100mg three times daily indefinitely whilst still drinking and risk factors remain
- if not prescribed thiamine, start 100mg three times daily
- if on a lower dose of thiamine, optimise to 100mg three times daily

Contact specialist services for advice in pregnancy or adolescents.

The document is intended for use in primary care as a guide to review prescribing in vitamin B compound and vitamin B compound strong. The information provided here will undergo periodic reviews to ensure that it remains up to date.

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Version control

Version number	Revision date	Revision by	Nature of revisions
1.1	27 March 2025	Business administration officer	Updated logo