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Veterinary Services for Household Pets in the UK
AMTRA Response to Issues Statement of 9 July 2024

AMTRA (Animal Medicines Training Regulatory Authority) is appointed by the DEFRA Secretary of State to act as a registration body for Suitably Qualified Persons (SQPs) under the Veterinary Medicines Regulations.

We write in response to CMA's Issues Statement of 9 July 2024.

Scope

We note from that paragraph 17 of your Statement regarding scope that "veterinary services" includes, but is not limited to, the provision of "prescribed veterinary medicines".

AMTRA has 6410 SQPs on its professional Register: of these, precisely 6000 are qualified and registered to supply companion-animal medicines (the remainder being solely farm, equine or a combination of the two).

All have passed Higher Education level 4 or higher exams and an AMTRA viva in order to be on the AMTRA Register, and must undertake CPD and comply with a Code of Practice to remain so.

About 5100 such SQPs work in pet stores, "country stores" and other retailer premises, with a further 900 in veterinary practices. While SQPs and the businesses they work for frequently supply other pet goods and services, AMTRA's primary remit relates to veterinary medicines.

AMTRA is therefore interested in the CMA's market investigation into veterinary services for household pets, to the extent that it impinges on companion-animal ("pet") medicines.

Notwithstanding the Authority's current focus on traditional veterinary practices rather than other retailers supplying veterinary medicines, we are keen to support the Authority's investigation.

AMTRA stands ready to discuss or provide any additional information that may be helpful as regards SQPs and the supply of POM-VPS and NFA-VPS companion-animal medicines.

Background comments

As the CMA will be aware, authorised veterinary medicines are classified into one of four categories:

- POM-V, prescribed by a vet; permitted to be supplied by that vet, or by another vet or pharmacist (but not an SQP) acting on a written prescription from the prescribing vet
- POM-VPS, prescribed by a vet, a pharmacist or an SQP; and permitted to be supplied by the prescriber, or by another vet, pharmacist or SQP acting on a written prescription from the prescriber. In practice hardly any companion-animal medicines are currently POM-VPS, though there is no legislative barrier to future such classification
- NFA-VPS, supplied by a vet, a pharmacist or an SQP, with advice but without the requirement for a prescription as defined in the Veterinary Medicines Regulations
- AVM-GSL – supplied by anyone

Medicines classified POM-VPS or NFA-VPS ("VPS medicines") are ones that are used to reduce or prevent effects of endemic diseases, particularly internal and external parasite control. They have been judged by VMD to need professional advice on their safe use, but that advice need not come from a veterinary surgeon. They do not require a veterinary diagnosis.

While the large majority of companion-animal medicines supplied by SQPs are NFA-VPS, and thus not prescribed per the Veterinary Medicines Regulations, AMTRA considers that they could fall within your scope set out in your paragraph 17, particularly as dictionary definitions of "prescribed" do encompass NFA-VPS medicines ("advise and authorize the use of" in the words of the Concise Oxford Dictionary). AMTRA would in any case support a change to the Veterinary Medicines Regulations to require NFA-VPS medicines to meet the same prescribing standards as POM-VPS medicines, and argued for such a change in the recent review of the Veterinary Medicines Regulations.

AMTRA is of the view that this multi-tier approach best balances safety (for the target animal, for humans, and for the environment) with wider access to medicines and the competition benefits this brings. Where a veterinary diagnosis is needed, or where advice that can only be provided by a veterinary surgeon is required, then a POM-V classification is needed. But where those don't apply, other options are available that can enhance access and competition, and benefit animal welfare through that increased access and potentially lower prices.

The Secretary of State (the VMD) sets the initial distribution classification, in practice on the basis of an application from the Marketing Authorisation Holder (MAH). The classification may be changed on an application from the MAH, or by the Secretary of State. In practice, the classification is moved "up" if (rarely) there are safety concerns not able to be resolved by any other means, or "down" if the MAH wishes it and convinces VMD that the safety case has been made. If the MAH is content with the current classification for commercial reasons, no change will be made (save for the very rare "up" movement due to safety concerns).

Those best placed to make safety assessments on existing authorised medicines are the Marketing Authorisation Holder and the VMD, but it is not clear to AMTRA that all existing POM-V medicines, having demonstrated a five-year period of safe use in the field, continue to justify a POM-V classification.

Is the current regulatory framework for medicines classification and review thereof, best serving pet owners through balancing safety with competition?

Information and choices by pet owners: paragraphs 55 et seq., 86 et seq.

Are pet owners aware of the options available for treatment and prevention through access to medicines from businesses other than veterinary practices?

Are medicines that could be classified as NFA-VPS (or POM-VPS or AVM-GSL) kept at POM-V and thus not available through businesses other than veterinary practices?

Are veterinary practices communicating the option of NFA-VPS medicines which may have lower profit margins due to price competition, or focussing on recommending POM-V medicines to pet owners?