

**From:** [REDACTED]  
**To:** [VetsMI](#)  
**Subject:** Proposed "own brand" remedy [REDACTED]  
**Date:** 28 January 2026 12:42:09  
**Attachments:** [REDACTED]

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Hello

I have summarised my thoughts below:

(a) Requirement to specify active ingredients on labelling, packaging and invoices, and to state that branded equivalents are available

- There are significant practical constraints due to limited physical space on labels and packaging. Adding active ingredients and statements about branded equivalents risks obscuring legally required safety, dosing, or regulatory information.
- Veterinary Practice Management Systems (PMS) typically impose strict character limits on product descriptions and invoice lines (often around 50 characters). These fields already need to include product name, strength, formulation and pack size.
- Any mandated changes would require consultation with PMS providers, as practices have limited ability to modify system architecture themselves. Without this, compliance may be technically impossible for some businesses.

(b) Requirement to provide the name of the branded equivalent alongside the medication when dispensed

- Many own brand products have multiple branded equivalents. It is unclear which equivalent should be named, how many should be listed, or what criteria should govern selection.
- Naming specific branded products risks creating perceptions of endorsement or promotion, potentially influenced by commercial arrangements such as rebates.
- There is a risk this could constitute marketing of POM-V medicines directly to clients, raising regulatory and professional concerns.
- Highlighting alternatives at the point of dispensing may cause client confusion and undermine confidence in clinically appropriate prescribing decisions.

(c) Requirement for vets to inform pet owners orally that branded equivalents are available from third parties

- Mandated oral disclosures risk overloading consultations with non-clinical information, detracting from discussion of diagnosis, treatment and animal welfare.
- Informing clients of alternatives immediately after prescribing may undermine confidence in the prescribed medication.
- It is unclear how compliance with an oral disclosure requirement would be monitored or evidenced in practice.

(d) Requirement for invoices to include active ingredients and a statement about branded equivalents

- Invoicing is heavily constrained by PMS system architecture. Active ingredients would need to be embedded within product master data, which is not always configurable at practice level.
- Character limits on invoice lines may make inclusion of all required information impractical.
- Differences between PMS systems risk inconsistent implementation across the sector, despite best efforts

by practices.

Response to CMA paragraph 5.76(b): Active-ingredient-only prescribing

- It is generally understood that a vet cannot dispense a substitute product against a prescription for a specific branded medicine without sufficient knowledge of the animal and the condition being treated.
- Clinical equivalence is not determined solely by active ingredients; formulation, bioavailability and licensed indications are also relevant.
- Encouraging substitution without full clinical context may increase liability risks and could negatively impact animal welfare.

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