



The APPG on Vegetarianism and Veganism
C/o Office of Christina Rees MP
House of Commons
London
SW1A 0AA

The Rt Hon Jeremy Hunt MP
Secretary of State for Health
Department of Health
Richmond House
79 Whitehall
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28 February 2017

Dear Mr Hunt,

We are writing on behalf of the All-Party Parliamentary Group on Vegetarianism and Veganism, which formed last year to discuss issues facing vegetarians and vegans, and to consider how government can ensure that their needs are met, and their rights protected.

In December, the APPG heard from speaker Dr Kinesh Patel, a consultant gastroenterologist at Chelsea and Westminster Healthcare NHS Trust and the Royal Brompton NHS Trust. We discussed the potential to shape regulation of medication and medical products after Brexit so that they are suitable for vegetarians and vegans.

In his research, published in the British Medical Journal, Dr Patel found that most (74 out of 100) medications prescribed in UK primary care contain animal-derived products. This renders them unsuitable for a significant proportion of the UK population.

Specific dietary preferences regarding animal products in food are common. In addition to the 1.7 million lifestyle vegetarians and vegans in the UK, millions of others do not consume or use animal-derived products for medical reasons (e.g. lactose intolerance or allergies) or religious, cultural and ethical concerns.

Gelatine is widely used to encapsulate medications and is sourced from bovine or porcine skin, hide, or bone, and occasionally fish. If derived from pigs it can be a problem for some Muslims and Jews. Indeed, in 2013, a campaign to vaccinate children in Scotland against influenza was halted because of concern in the Muslim community about pork gelatine within the vaccine.

Other examples of animal-derived ingredients include low molecular weight heparin (pigs), Gelofusine (cows), and conjugated oestrogen (Premarin, horses).

Even though the absolute levels of animal products in many medications are likely to be minimal, Dr Patel said doctors need to consider this when prescribing "to avoid non-adherence, which is a major healthcare concern."

This concurs with case reports made to UK charity, Vegetarian for Life, which suggest that vegetarians and vegans take a varied approach to avoiding animal derivatives in medicines. Such approaches may include not taking prescribed medicines at all, through to reluctantly taking them, or even transferring medicines from a gelatine capsule into an alternative vegetarian capsule that individuals have sourced themselves.

Many patients and doctors are unaware that commonly prescribed drugs contain animal products – and simply reading the list of ingredients will not make it clear whether the product meets the patient’s dietary preferences.

Dr Patel points out that many medicines can be produced in a way that would make them suitable for vegetarians. Lactose is already produced by some manufacturers without using rennet; magnesium stearate can be made chemically without animal ingredients; and vegetarian capsules to replace gelatine are already available.

Medicines could similarly be labelled as suitable for vegetarians: a proposition that was put to the Medicines and Healthcare Products Regulatory Agency (MHRA) to consider.

The Agency’s response was that there is no opportunity for the UK, as a member of the EU, to act unilaterally on medicine labelling, and currently there is no requirement to label how an inactive ingredient is sourced.

However after Brexit, there may be the potential for the UK to look at making medicine labelling more transparent, and clearly label whether a product is suitable for vegetarians or vegans.

In response to allergic reactions in some patients, latex gloves were phased out of hospitals, with latex-free alternatives used as standard. This could provide a model for phasing out animal-derived medicines, where animal-free alternatives already exist, such as for capsule casing. This would also remove any concerns around obtaining patient consent (for example, should a patient present unconscious to an Accident & Emergency department).

After Brexit there may be the potential to set our own guidance surrounding the labelling of medicines. Therefore, we kindly request that your department looks into:

- which animal-free alternatives to prescription products already exist, and could be brought in across the board;
- producing guidance for medical professionals about consent when using animal-based medicines;
- producing guidance for manufacturers in relation to the labelling of medicines containing ingredients of animal origin, similar to the labelling on food.

We look forward to hearing from you.

Yours sincerely,

Christina Rees MP, Chair of the APPG

Kerry McCarthy MP, Officer of the APPG

Henry Smith MP, Officer of the APPG

Baroness Jones of Moulsecoomb, Officer of the APPG