Vitamins for Babies, Children, and Pregnant and Breastfeeding Women

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This document has been written by Public Health Dietitians in Wales, with support from the All Wales Prescribing Advisory Group (AWPAG) and the All Wales Therapeutics and Toxicology Centre (AWTTC), and endorsed by the Wales Dietetic Leadership Advisory Group and the All Wales Medicines Strategy Group (AWMSG).

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1.0 INTRODUCTION

Vitamin D is essential for the protection of musculoskeletal health and the prevention of metabolic bone diseases in children and adults\(^1\).

The prevention of vitamin D deficiency is an important public health concern. The National Diet and Nutrition Survey demonstrates that in the UK, around a fifth of adults aged 19 to 64 years, and a sixth of children aged 11 to 18 years and adults aged 65 years and over have low levels of vitamin D in their blood, and therefore are at risk of the clinical consequences of vitamin D deficiency\(^2\).

In 2016, Welsh Government issued new advice on vitamin D intake\(^3\). This follows a review of the evidence on vitamin D and health by the Scientific Advisory Committee on Nutrition (SACN). To protect bone and muscle health, SACN has concluded that everyone needs vitamin D equivalent to an average daily intake of 10 micrograms (400 international units [IU])\(^1\).

Vitamin D is made in the skin by the action of the sunlight, and this is the main source of vitamin D for most people. SACN could not say how much vitamin D is made in the skin through exposure to sunlight, and has therefore recommended a daily dietary intake of 10 micrograms (400 IU). Dietary sources consist of\(^1,4\):

- Natural food sources (e.g. oily fish such as salmon, sardines, herring and mackerel; red meat; liver; egg yolks);
- Fortified foods (including some breakfast cereals, most fat spreads, and infant formula milk);
- Supplements.

Welsh Government\(^3\) now advises that between late March/early April and September, the majority of the population aged 5 years and above will probably get enough vitamin D through sunlight on the skin and a healthy, balanced diet. From October to March, everyone aged 5 years and above will need to rely on dietary sources of vitamin D. Since it is difficult for people to meet the 10 microgram recommendation from natural food sources and fortified foods alone, people should consider taking a daily supplement containing 10 micrograms of vitamin D during these months. This recommendation includes pregnant and breastfeeding women.

Those with very little or no sunshine exposure, e.g. frail, housebound and institutionalised people, those who habitually wear clothing that covers the skin whilst outdoors and those from minority ethnic groups with dark skin, are at risk of vitamin D deficiency and should consider taking a supplement all year round\(^1,3,4\).

The Department of Health\(^5\) and the National Institute for Health and Care Excellence (NICE)\(^6\) recommend that all children from 6 months to 5 years\(^*\) take a daily supplement containing vitamins A, C and D. The revised Welsh Government guidance specifies that all babies from birth to 1 year old should have a daily 8.5–10 microgram vitamin D supplement, and children from 1 to 5 years\(^*\) should have a daily 10 microgram vitamin D supplement to make sure they get enough. The recommendation does not apply to infants and children who are having 500 ml of infant formula milk a day\(^3\).

Public Health Wales recommend that all women should take a folic acid supplement as soon as they think they are pregnant, or before that if they are planning a pregnancy\(^7\). The Department of Health\(^5\) and NICE\(^8\) also recommend that all women trying to get pregnant or who are pregnant should take a daily supplement containing 400 micrograms of folic acid prior to conception and for at least the first full 12 weeks of pregnancy, as it reduces the risk of having a baby with a neural tube defect\(^8\).

\(^*\) Up until the day of their fifth birthday
A summary of the UK guidance for babies, children, and pregnant and breastfeeding women can be found in Appendix 1.

Vitamin supplements can be accessed through the Healthy Start scheme (for low-income families on tax credits) and commercial brands are widely available to purchase over the counter.

Healthy Start is a UK-wide government scheme to improve the health of low-income pregnant women and families on benefits and tax credits. An estimated 72–86% of those eligible for the Healthy Start scheme signed up to it; however, one study suggests that less than 10% of eligible beneficiaries take up the vitamins, and another study puts the number at less than 3%.

Numerous commercial brands of vitamin supplements are available for women and families if not eligible for the Healthy Start scheme. Not all of these meet the specific Department of Health recommendations and interpreting the content of vitamin products can be challenging for the public. Appendices 2 and 3 provide a list of suitable vitamin products available to purchase for babies, children, and pregnant and breastfeeding women.

Raising awareness amongst pharmacists and other healthcare professionals of the importance of vitamins may help to give consistent messages and increase the uptake of vitamins both by families eligible for Healthy Start vitamins and by non-beneficiaries.

### 2.0 VITAMINS FOR PREGNANT AND BREASTFEEDING WOMEN

Public Health Wales recommend that all women should take a folic acid supplement as soon as they think they are pregnant, or before that if they are planning a pregnancy. The Department of Health and NICE recommend that all women trying to get pregnant or who are pregnant should take a daily supplement containing 400 micrograms of folic acid prior to conception and for at least the first full 12 weeks of pregnancy. This recommendation applies even if women are consuming foods naturally rich in folate and/or foods fortified with folic acid.

The recommended dose of folic acid aims to reduce the risk of having a child with a neural tube defect. Some women have an increased risk of a pregnancy affected by a neural tube defect. This includes women with diabetes, those with coeliac disease (or other malabsorption state), those with sickle-cell anaemia, women taking certain medications for epilepsy, those with a family history of neural tube defects, and women who have had a previous neural tube defect pregnancy. These women will usually require a higher daily dose of folic acid (5 milligrams/day), which should be prescribed by their GP or consultant. Some other subgroups of pregnant women may require a higher dose of folic acid, such as women with a Body Mass Index (BMI) ≥ 30 kg/m²; this will depend on local clinical guidance.

In order to protect the musculoskeletal health of the mother, Welsh Government and SACN recommend that pregnant women and breastfeeding women could benefit from taking a daily supplement containing 10 micrograms (400 IU) of vitamin D. This is particularly important between October and March or all year around if from an at risk population group. Local guidance should be referred to for women at high risk of vitamin D deficiency.
3.0 VITAMINS FOR BABIES AND CHILDREN

The Department of Health and NICE recommend that all children from 6 months to 5 years* are given a daily supplement containing vitamins A, C and D. In 2016, Welsh Government published new advice based on the recommendations of SACN: that babies from birth to 1 year old need to take a daily 8.5–10 microgram (340–400 IU) vitamin D supplement, and children from 1 to 5 years need to take a supplement containing 10 micrograms (400 IU) of vitamin D daily to help them meet the ‘safe intake’ for this age group\(^1\). The recommendation to take supplements applies even if the child is eating a healthy, balanced diet. The recommendation does not apply to infants who are having 500 ml of infant formula milk or more, as infant formula milk is already fortified with vitamins and minerals\(^3,4\).

As a result of SACN guidance\(^1\), Welsh Government\(^3\) issued new advice recommending that:

- **Breastfed infants from birth to 1 year of age** should be given a daily supplement containing 8.5–10 micrograms (340–400 IU) of vitamin D. This includes those part-fed with infant formula.
- **Infants fed infant formula** should not be given a vitamin D supplement until they are receiving less than 500 ml (about a pint) of infant formula a day.
- **Children aged 1 to 5 years old** should be given a daily supplement containing 10 micrograms (400 IU) of vitamin D.

4.0 HEALTHY START VITAMINS

Healthy Start is a UK-wide government scheme to improve the health of low-income pregnant women and families on benefits and tax credits. It replaced the Welfare Food Scheme in 2006. Those who are eligible receive vouchers worth £3.10 a week that can be spent on plain, fresh or frozen fruits and vegetables, milk and infant formula milk\(^†\). They are also eligible to receive free Healthy Start vitamins\(^5,18\).

Once beneficiaries have completed and returned their application form (signed by the relevant health professional [usually a health visitor or midwife]), they will receive a green vitamin coupon in the post, along with their vouchers, which they can swap for Healthy Start vitamins. The coupons are either for Healthy Start women’s tablets or Healthy Start children’s drops, the compositions of which are described in Table 1\(^19\).

Table 1. Composition of Healthy Start vitamin drops and tablets

<table>
<thead>
<tr>
<th>Children’s Healthy Start vitamin drops</th>
<th>Women’s Healthy Start vitamin tablets</th>
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</thead>
<tbody>
<tr>
<td>Per 5 drops (daily dose):</td>
<td>Per tablet (daily dose):</td>
</tr>
<tr>
<td>233 micrograms of vitamin A (700 IU)</td>
<td>70 milligrams of vitamin C</td>
</tr>
<tr>
<td>20 milligrams of vitamin C</td>
<td>10 micrograms of vitamin D (400 IU)</td>
</tr>
<tr>
<td>7.5 micrograms of vitamin D3 (300 IU)</td>
<td>400 micrograms of folic acid</td>
</tr>
</tbody>
</table>

Healthy Start vitamins are halal-approved and suitable for vegetarians.

The composition of Healthy Start children’s vitamin drops is currently under review following the 2016 SACN report. The current formulation is still a very useful contribution to daily vitamin D intake.

Families should ask their health visitor or midwife how to obtain Healthy Start vitamins in their local area. See [www.healthystart.nhs.uk](http://www.healthystart.nhs.uk) for further details. See Appendix 4 for details of Healthy Start scheme promotional materials.

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*Up until the day of their fifth birthday
†Eligible pregnant women and children aged 1–4 years receive one voucher worth £3.10 a week, and babies under the age of 1 year old get two vouchers a week worth a total of £6.20
4.1 Access to Healthy Start vitamins

Across Wales, uptake of Healthy Start vitamins among families qualifying for the scheme is low.

In Wales, it is the statutory responsibility of the health board to make Healthy Start vitamins available locally to women and children on the scheme. Access is usually through health centres, clinics and health visitors, but distribution pathways are currently inconsistent. Many health centres have restricted daytime hours and families with older children don’t access their health visitor or baby clinic regularly. Health boards are required to keep collected vitamin vouchers for audit and re-imbursement from Welsh Government. Anecdotal evidence suggests that many families do not keep this voucher or are unaware they receive it. This is consistent with the finding that only 3–10% of eligible beneficiaries of the Healthy Start scheme in the UK take-up the vitamins.

NHS organisations can choose to provide Healthy Start vitamins free of charge or sell them to non-beneficiaries. This is currently not happening in most areas of Wales. The latter requires health staff to handle and bank money, posing a barrier.

The short shelf life (approximately 10 months from manufacture) of the children’s vitamin drops has also caused issues with wastage, particularly since uptake is currently low.

Improved distribution mechanisms are urgently required.

5.0 COMMERCIALY AVAILABLE VITAMINS

When advising non-beneficiaries on suitable alternative products, the content of the Healthy Start vitamins can be used as a guide. Many products contain additional vitamins and minerals not usually required if a balanced diet is eaten.

It is important to advise pregnant women that only vitamins suitable for pregnancy are taken. General multivitamins and fish liver oils that contain vitamin A (retinol) are not suitable, as high intakes (700 micrograms/day [2,333 IU] or more) of this vitamin in supplement form can be dangerous for the foetus (teratogenic).

When advising families with a child 0–1 years, the priority is a content of 8.5–10 micrograms (340–400 IU) of vitamin D daily, and for children 1–5 years, a content of 10 micrograms (400 IU) vitamin D daily. For healthy, term infants, it is important to choose a product that does not exceed 100% of the reference nutrient intake for vitamin A (retinol) for this age group, which is 350–400 micrograms (1,166–1,333 IU) daily.

6.0 THE ROLE OF HEALTHCARE PROFESSIONALS

All healthcare professionals have an essential role in raising awareness of the importance of vitamins, as discussed in this paper. Health visitors, midwives and dietitians are working to increase awareness of the recommendations. They are signposting families who are not eligible for free Healthy Start vitamins to their local pharmacy for help with choosing an appropriate product. Families should be informed of the availability of vitamin supplements that can be purchased over the counter. Diagnosed vitamin D deficiency should be treated according to local guidance.

*Up until the day of their fifth birthday
7.0 ISSUES FOR FURTHER CONSIDERATION

- Public Health Dietitians in Wales to develop existing health professional training to include community pharmacists, to disseminate knowledge about vitamin recommendations and appropriate vitamin products. This is to include the development of 'vitamin fast facts' through liaison with WCPPE.
- Make use of the GPOne website to inform GPs about the recommended use and access to vitamin supplements.
- Consider evidence from other areas of the UK, such as Scotland, with improved distribution mechanisms for Healthy Start vitamins (see section 8.0 for information on further reading).
- In line with the AWMSG ‘Prescribing Dilemmas: A Guide for Prescribers’ publication, explore the prescribing responsibilities of primary care professionals in relation to folic acid and vitamins for babies, children, and pregnant and breastfeeding women.
- NHS Wales to explore and pilot alternative routes for supply of Healthy Start vitamins for beneficiaries and non-beneficiaries, e.g. Choose Pharmacy.
- Folic acid use and vitamin D for at risk groups to be considered as a future community pharmacy public health campaign.

8.0 FURTHER INFORMATION

- Vitamin D advice for the general public can be found at: [www.nhs.uk/conditions/vitamins-minerals/pages/vitamin-d.aspx](http://www.nhs.uk/conditions/vitamins-minerals/pages/vitamin-d.aspx) and [www.nhs.uk/Livewell/Summerhealth/Pages/vitamin-D-sunlight.aspx](http://www.nhs.uk/Livewell/Summerhealth/Pages/vitamin-D-sunlight.aspx)
- Drug and Therapeutics Bulletin produced an article on Vitamin supplementation in pregnancy (2016), available at: [http://dtb.bmj.com/content/54/7/81.abstract](http://dtb.bmj.com/content/54/7/81.abstract)
- Information on all aspects of infant feeding is available in the Bump, Baby and Beyond parent’s health information book for Wales and health professional guidebook (2014). Produced by Public Health Wales, these are available at: [www.healthchallengewales.org/infantfeeding-publications/](http://www.healthchallengewales.org/infantfeeding-publications/)
- General information on eating well in infancy, pregnancy and whilst breastfeeding. Families can visit NHS Choices at: [www.nhs.uk](http://www.nhs.uk).
- The British Dietetic Association has a Food Facts section with free downloadable nutrition fact sheets for the public (e.g. folic acid, iodine) at: [www.bda.uk.com](http://www.bda.uk.com).
- An Infant Feeding module is available from the WCPPE at: [www.wcppe.org.uk](http://www.wcppe.org.uk).
REFERENCES


### APPENDIX 1: SUMMARY VITAMIN RECOMMENDATIONS FOR INFANTS, CHILDREN, AND PREGNANT AND BREASTFEEDING WOMEN

<table>
<thead>
<tr>
<th>Pregnant and breastfeeding women</th>
<th>Recommended daily supplements</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>All pregnant women</strong></td>
<td></td>
</tr>
<tr>
<td>Folic acid</td>
<td>400 micrograms (prior to conception and for first full 12 weeks of pregnancy)</td>
</tr>
<tr>
<td>Vitamin D</td>
<td>Consider taking 10 micrograms (400 IU)</td>
</tr>
</tbody>
</table>

Pregnant women with diabetes\(^8\), those with coeliac disease\(^13,14\), those with sickle-cell anaemia\(^13\), those taking certain medications for epilepsy\(^14\), pregnant women with a family history of neural tube defects, and those who have had a previous neural tube defect pregnancy\(^8\). Some other subgroups of pregnant women may require a higher dose of folic acid, such as women with a BMI ≥ 30 kg/m\(^2\)\(^15,16\), this will depend on local guidance.

| **All breastfeeding women**       |                             |
| Folic acid                       | 5 milligrams (prior to conception and for first full 12 weeks of pregnancy) |
| Vitamin D                        | -                           |

Supplements containing 700 micrograms (2,333 IU)/day vitamin A (retinol) or more are not suitable for pregnant women\(^20\).

### Babies and children

<table>
<thead>
<tr>
<th>Babies and children</th>
<th>Recommended daily supplements</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Vitamin D</strong></td>
<td><strong>Vitamin A</strong></td>
</tr>
<tr>
<td>Babies and children from birth to 1 year who are drinking less than 500 ml infant formula milk/day</td>
<td>8.5–10 micrograms (340–400 IU)</td>
</tr>
<tr>
<td>Children from 1 to 5(^*) years</td>
<td>10 micrograms (400 IU)</td>
</tr>
</tbody>
</table>

\(^*\)Up until the day of their fifth birthday
## APPENDIX 2: EXAMPLES OF AVAILABLE VITAMIN SUPPLEMENTS SUITABLE FOR PREGNANT AND BREASTFEEDING WOMEN

<table>
<thead>
<tr>
<th>Vitamin product and example cost per dose (approximate)</th>
<th>Product information/claims</th>
<th>Folic acid Content per RDD* (RNI† 300 micrograms/day)</th>
<th>Vitamin D Content per RDD* (RNI† 10 micrograms/day (400 IU))</th>
<th>Other vitamin/mineral content</th>
<th>Comments on suitability</th>
</tr>
</thead>
</table>
| Healthy Start Women’s vitamin tablets                   | Suitable for halal & vegetarian diets. Free from wheat, egg & fish. No gluten-containing ingredients | Per tablet: 400 micrograms | Per tablet: 10 micrograms (400 IU) | Per tablet: 70 milligrams vitamin C | • Contains vitamin C to help aid iron absorption  
• Available with Healthy Start coupon  
• Not widely accessible to non-beneficiaries of Healthy Start scheme  
• Can be sold in Wales by health boards for £83p (1.5p per dose)13. |
| Boots Folic Acid & Vitamin D tablets 6p per dose         | Lactose-free, no gluten-containing ingredients. Suitable for vegetarians | Per tablet: 400 micrograms | Per tablet: 10 micrograms (400 IU) | - | • Contains vitamin D & folic acid in same amounts as Healthy Start vitamins |
| Morrisons Vitamin D Tablets 2p per dose                 | - | Per tablet: 400 micrograms | Per tablet: 12.5 micrograms (500 IU) | - | • Does not contain folic acid – a folic acid supplement required in addition |
| Centrum® During Pregnancy 13p per dose                  | Gluten-free. May contain processed wheat-based ingredients. Not suitable for vegetarians | Per tablet: 400 micrograms | Per tablet: 12.5 micrograms (500 IU) | Range of vitamins & minerals, including iron, calcium & iodine | • Contains additional vitamins & minerals not necessary if eating a balanced diet |
| Vitabiotics Pregnacare® Breastfeeding Dual Pack 5p per total daily dose | Not suitable for vegetarians. Lactose- & gluten-free | Per 2 tablets: 400 micrograms | Per 2 tablets: 10 micrograms (400 IU) | Contains a range of other vitamins & minerals, e.g. calcium, iron, B vitamins & omega-3 | • Widely available  
• Dose of 2 tablets & 1 capsule daily  
• Contains additional vitamins & minerals not necessary if eating a balanced diet  
• Can be started at any point after childbirth, and used whether or not breastfeeding  
• Contains vitamin D & folic acid in same amounts as Healthy Start vitamins |
| Superdrug Folic Acid & Vitamin D Tablets 5p per dose    | - | Per tablet: 400 micrograms | Per tablet: 10 micrograms (400 IU) | - | |
| Mum’s Ddrops® 20p per dose                              | Gluten-free, wheat-free, soy-free, sugar-free, dairy-free, peanut-free, corn-free | Per drop: - | Per drop: 10 micrograms (400 IU) | - | • Does not contain folic acid – a folic acid supplement required in addition  
• Not widely available |
| Vegan® Veg1 7p–9p per dose                              | Suitable for vegans – formulated by the Vegan Society with HealthPlus | Per tablet: 200 micrograms | Per tablet: 20 micrograms D3 (800 IU) | Also contains iodine, selenium & B vitamins | • An additional folic acid supplement is required as tablet does not contain enough  
• Adult dose contains more than SACN and Welsh Government recommended daily vitamin D amount |

Information correct in October 2016.

This list is not exhaustive and should be used as a guide only. Current status of the product ingredients should be obtained from the manufacturer. Please note that formulations change regularly. Alternative products are available for those with food allergies17. Women with diagnosed medical conditions may need specific advice on vitamin supplements from a registered dietitian/their specialist healthcare team. Some pregnant women may need a higher dose of folic acid on prescription (see section 2.0).
### APPENDIX 3: EXAMPLES OF AVAILABLE VITAMIN SUPPLEMENTS SUITABLE FOR BABIES AND CHILDREN

<table>
<thead>
<tr>
<th>Vitamin product and example cost per dose (approximate)</th>
<th>Age range</th>
<th>Product information/claims</th>
<th>Vitamin A content per RDD (RNI: 350–400 micrograms/day) [1166–1333 IU])</th>
<th>Vitamin C content per RDD (RNI: 25–30 milligrams/day)</th>
<th>Vitamin D content per RDD (Safe Intake 8.5–10 micrograms/day)</th>
<th>Other vitamin/mineral content</th>
<th>Comments on suitability</th>
</tr>
</thead>
</table>
| Healthy Start vitamin drops 7p per total daily dose    | 6 mnths–4 yrs | Suitable for vegetarian and halal diets. Free from milk, egg, soya, gluten and peanut residues | Per 5 drops: 223 micrograms (700 IU) | Per 5 drops: 20 milligrams | Per 5 drops: 7.5 micrograms (300 IU) | B vitamins | • Available with Healthy Start coupon  
• Not widely accessible to non-beneficiaries of Healthy Start scheme  
• Available from Superdrug online  
• Can be given from one month old  
• Can be sold in Wales by health boards for £1.64 (3p per total daily dose)  
• Suitable for ages 1–6 months if required.  
• Provides 7.5 micrograms of the required 8.5–10 micrograms of vitamin D. |
| Abidec® Multivitamin Drops 5p–6p per dose (0–1 yr) 10p–12p per dose (1–12 yrs) | 0–12 yrs | Contains peanut oil | Per 0.6 ml: 400 micrograms (1333 IU) | Per 0.6 ml: 40 milligrams | Per 0.6 ml: 10 micrograms (400 IU) | - | • Unsuitable for diagnosed peanut allergy  
• Two dose regimes according to age  
• Dose for 0–1 years provides contains 5 of the required 8.5–10 micrograms of vitamin D |
| Baby Ddrops® Liquid 17p per dose | 6 mnths–5 yrs | - | 1 drop: - | 1 drop: - | 1 drop: 7.5 micrograms (300 IU) | - | • Suitable for ages 1–6 months if required.  
• Provides 7.5 micrograms of the required 8.5–10 micrograms of vitamin D.  
• Supplement does not contain vitamins A and C as recommended, but a useful vitamin D supplement |
| Bassett's Multivitamins Soft & Chewy 8p–13p per dose | 3–6 yrs | Not suitable for vegetarians | 1 pastille: 400 micrograms (1333 IU) | 1 pastille: 80 milligrams | 1 pastille: 5 micrograms (200 IU) | Vitamin E and B6 | • Contains more vitamin C than recommended  
• Contains 5 of the required 8.5–10 micrograms of vitamin D |
| Vitabiotics Wellbaby® Multi-vitamin Liquid (8p–10p per dose [4–6 months]) (16p–19p per dose [7 mnths–4 yrs]) | 4 mnths–4 yrs: 2.5 ml/day (4–6 mnths) 5 ml/day (7 mnths–4 yrs) | Suitable for vegetarians. Contains barley. Lactose-free | Per 5 ml: 133 micrograms (443 IU) | Per 5 ml: 30 milligrams | Per 5 ml: 7 micrograms (280 IU) | Also contains vitamin E, B vitamins, folic acid, iron, zinc & copper | • Two dose regimes according to age  
• Vitamin D lower than recommended.  
• Contains additional vitamins and minerals not required if eating a balanced diet  
• Provides 3.5–7 micrograms of the required 8.5–10 micrograms of vitamin D |

Information correct in October 2016.  
This list is not exhaustive and should be used as a guide only. Current status of the product ingredients should be obtained from the manufacturer. Please note that formulations change regularly. Alternative products are available for those with food allergies. Children with diagnosed medical conditions may need specific advice on vitamin supplements from a registered dietitian/their specialist healthcare team.

1RDD = Recommended daily dose  
2RNI = Reference Nutrient Intake. The RNI is the amount of a nutrient that is enough to ensure that the needs of nearly all a group (97.5%) are being met  
3Safe Intake = Data not sufficient to set an RNI for infants and children < 4 years, so SACN 2016 set a ‘safe intake’
Healthy Start promotional materials can be accessed via the Healthy Start website www.healthystart.nhs.uk. These include downloadable application forms and posters that can be displayed in community pharmacies, centres and clinics.