Medicines & Healthcare products Regulatory Agency

MHRA Central Freedom of Information Team
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MHRA Website

[redacted]

Our Ref: **FOI2026/00507**

1 June 2026

Dear [redacted]

Thank you for your Freedom of Information (FoI) request received on 10 May. You wrote:

> *I'd like to request the following information about the Ministry of Justice / HM Prison & Probation Service programme under which adults convicted of sexual offences are prescribed chemical suppressant medication to address problematic sexual arousal — originally piloted in four prisons in the south-west of England and announced for expansion to twenty prisons by the Lord Chancellor (the Rt Hon David Lammy MP) at the second reading of the Sentencing Bill.*
>
> *The request is about the programme only; it does not seek individual-level patient information. Where data are held in aggregate or anonymised form, please supply those.*
>
> *Time period: from the start of the original four-prison pilot (or 1 January 2020 if the start date is not on file) through today.*
>
> 1. *MEDICATIONS USED. The active substances prescribed under the programme (anti-androgens, GnRH agonists / antagonists, progestins, SSRIs, SNRIs and any others); the recorded indication and UK marketing-authorisation status of each (on-label vs off-label); the prescribing algorithm, formulary or stepped-care model in use; aggregate (anonymised) numbers of people prescribed each medication per year and per site; and the names of the four original and twenty expansion prisons with the date the original pilot began and the planned / actual go-live date in each of the twenty.*
>
> 2. *EXPECTED EFFECT, MECHANISM AND PERSISTENCE. For each medication in (1), the recorded mechanism of action; the magnitude and character of the expected effect on libido, erectile, ejaculatory and orgasmic function during treatment; how long that effect is expected to persist*

after the last dose; whether full sexual function is expected to return after discontinuation, and within what timeframe; and any other expected effects considered (mood, suicidality, bone density, fertility, gynaecomastia, cardiovascular and metabolic).

3. *MANUFACTURER / SUPPLIER CORRESPONDENCE AND EFFICACY EVIDENCE. All recorded correspondence with the manufacturers, marketing-authorisation holders, suppliers or wholesalers of the medications in (1) — including SSRIs and SNRIs — concerning their use in this programme; any clinical-effectiveness or efficacy evidence supplied or relied upon; and any safety material supplied or relied upon (PSURs, RMPs, SmPCs, post-marketing-surveillance summaries).*

4. *CONSENT FORM AND PARTICIPANT-INFORMATION MATERIAL — WHAT INDIVIDUALS ARE TOLD AND ASKED TO AGREE. The model consent form (blank copy); the patient-information leaflet, decision aid or equivalent given before consent; any verbal-consent script or counselling protocol; the specific risks, side effects and post-treatment effects disclosed (including any wording about persistent post-treatment sexual dysfunction, mood, suicidality, bone density, fertility, gynaecomastia, cardiovascular and metabolic effects); the refusal / withdrawal-of-consent pathway and any consequences for declining or withdrawing; and how capacity to consent is assessed and by whom.*

5. *ADVERSE-EFFECT REPORTING AND POST-TREATMENT FOLLOW-UP. Arrangements (if any) for follow-up after the medication is stopped, including monitoring of post-treatment sexual function, mood and suicidality; the channels through which adverse effects are reported within the programme and onward to the MHRA Yellow Card scheme; and aggregate (anonymised) numbers of adverse-effect reports generated by the programme since inception, by year and by medication.*

If the responsive material is voluminous, please first provide an inventory (titles, dates, identifiers) so I can prioritise. Rolling / interim disclosure is welcome — in particular any pre-existing programme manual, briefing or summary responsive to (1) ahead of the rest, if readily identifiable.

PDF and/or .csv / .xlsx as appropriate. Electronic delivery to the email address below is preferred. If complying with the request as drafted would exceed the cost limit, please let me know — I'm happy to narrow it (for example to categories 1 and 4 in the first instance).

MHRA Response

Following a search of our paper and electronic records, we have established that the information you requested is not held by this Agency.

We would advise you to get in touch with Home Office or Justice Department regarding this information.

If you have any queries about this letter, please contact us quoting the reference number above.

Yours sincerely,

MHRA Central Freedom of Information Team
Medicines & Healthcare products Regulatory Agency

Your right to complain under the Freedom of Information Act

If you are not happy with this response you may request an internal review by e-mailing foi.request@mhra.gov.uk or by writing to: MHRA Central Freedom of Information Team, 10 South, Colonnade, Canary Wharf, London, E14 4PU
Any request for an internal review must be received by us within 40 working days of the date of this letter. Please note we are not obliged to provide a review if it is requested after more than 40 working days.

If you are not content with the outcome of the internal review you may apply directly to the Information Commissioner's Office for a decision. Generally, the Commissioner cannot make a decision unless you have exhausted our own complaints procedure. The Information Commissioner can be contacted at: The Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire SK9 5AF.
Website: ICO FOI and EIR complaints or telephone 0303 123 1113.

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