Annual prescribing report 2018-2019

AWTTC
All Wales Therapeutics & Toxicology Centre

This report has been developed by:

WAPSU
Welsh Analytical Prescribing Support Unit

Swansea Bay

KEY

Aneurin Bevan | Cardiff and Vale | Hywel Dda | Swansea Bay
Betsi Cadwaladr | Cwm Taf Morgannwg | Powys

This logo is displayed alongside sections of the report where further data is available on the Server for Prescribing Information Reporting and Analysis (SPIRA). Find out more at **awttc.org/spira**

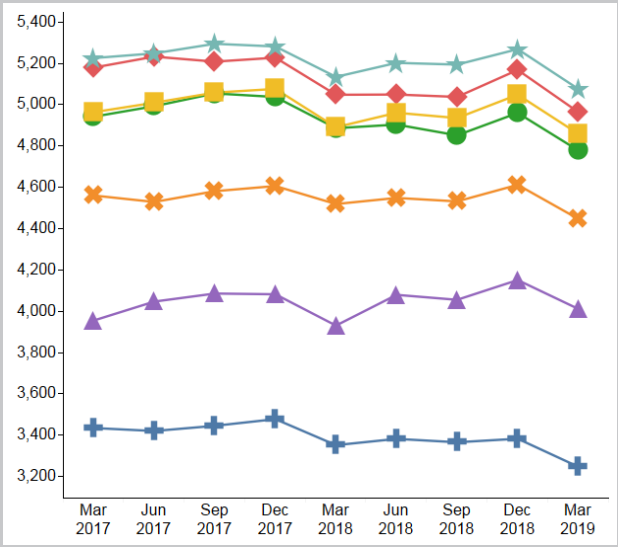
Primary care

Opioid burden

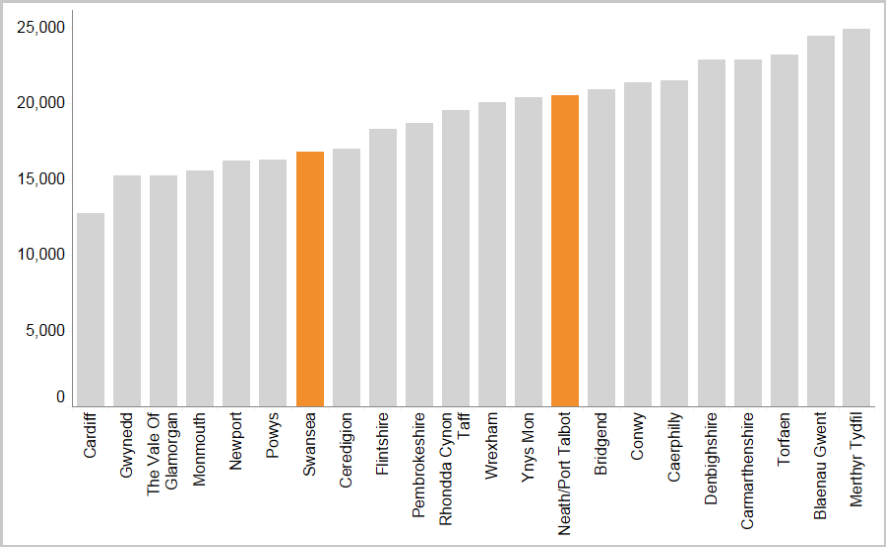
New National Prescribing Indicator for 2019-2020

Opioids have well established side effects and repeated administration may cause tolerance and dependence. The aim of this measure is to encourage the appropriate use and review of opioids in primary care, minimising the potential for dependence, diversion, misuse and adverse drug reactions.

Opioid burden (ADQs per 1,000 patients) - quarterly trend up to March 2019



Opioid burden (ADQs per 1,000 patients) - Locality data - Financial year 2018-2019



When compared with the previous year, Swansea Bay's performance **IMPROVED**

Opioid burden decreased by **0.5%** in 2018–2019 ↓

Out of the 7 health boards, Swansea Bay is ranked:

% change from last year : **6th**

Current overall performance : **3rd**

GLOSSARY

ADQs – average daily quantity – a measure of prescribing volume based upon prescribing behaviour in England. It represents the assumed average maintenance dose per day for a medicine used for its main indication in adults. ADQ is not a recommended dose but an analytical unit to compare prescribing activity.

DDDs – defined daily dose – a unit of measurement developed by the World Health Organization whereby each medicine is assigned a value within its recognised dosage range. The value is the assumed average maintenance dose per day for a medicine when used for its main indication in adults. A medicine can have different DDDs depending on the route of administration.

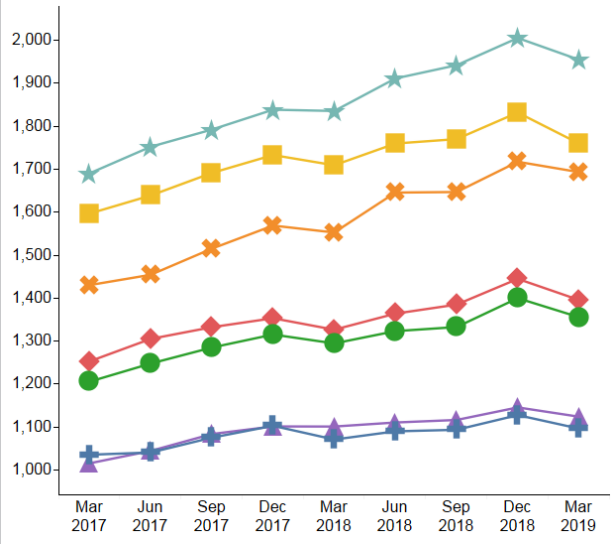
STAR-PUs – specific therapeutic group age–sex related prescribing units – designed to measure prescribing weighted for age and sex of patients. There are differences in the age and sex of patients for whom medicines in specific therapeutic groups are usually prescribed. To make such comparisons, STAR-PUs have been developed based on costs of prescribing or items within therapeutic groups.

Primary care

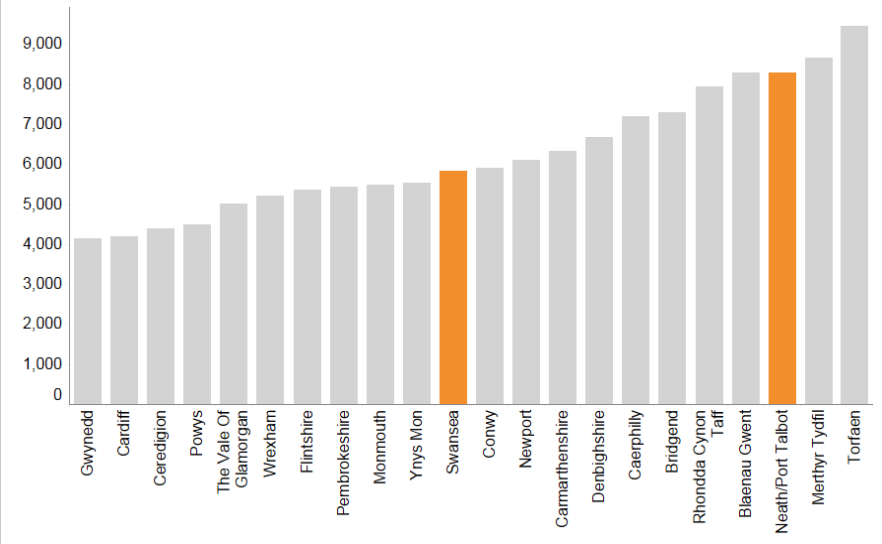
Gabapentin and pregabalin

Both gabapentin and pregabalin have the propensity to cause depression of the central nervous system, and when used in combination with other depressants they can cause drowsiness, sedation, respiratory failure and death. The aim of this measure is to encourage the appropriate use and review of gabapentin and pregabalin in primary care, minimising the potential for dependence, diversion, misuse and adverse drug reactions.

Gabapentin and pregabalin (DDDs per 1,000 patients) - quarterly trend up to March 2019



Gabapentin and pregabalin (DDDs per 1,000 patients) - Locality data - Financial year 2018-2019



When compared with the previous year, Swansea Bay's performance **DETERIORATED**

Gabapentin and pregabalin prescribing increased by **10.1%** in 2018–2019 ↑

Out of the 7 health boards, Swansea Bay is ranked:

% change from last year : **7th**

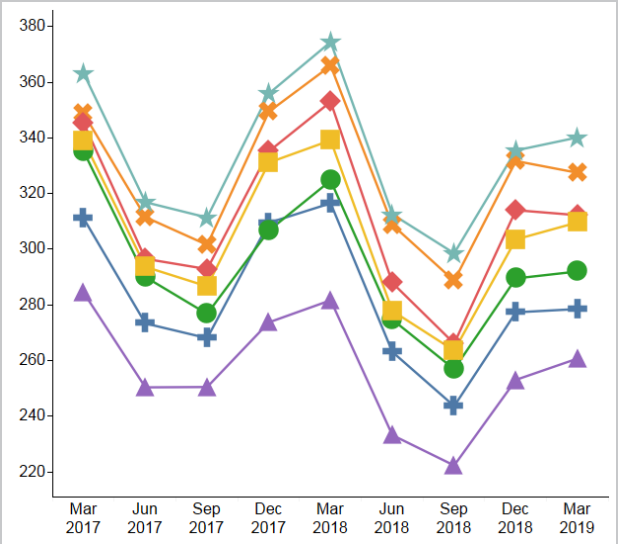
Current overall performance : **5th**

Primary care

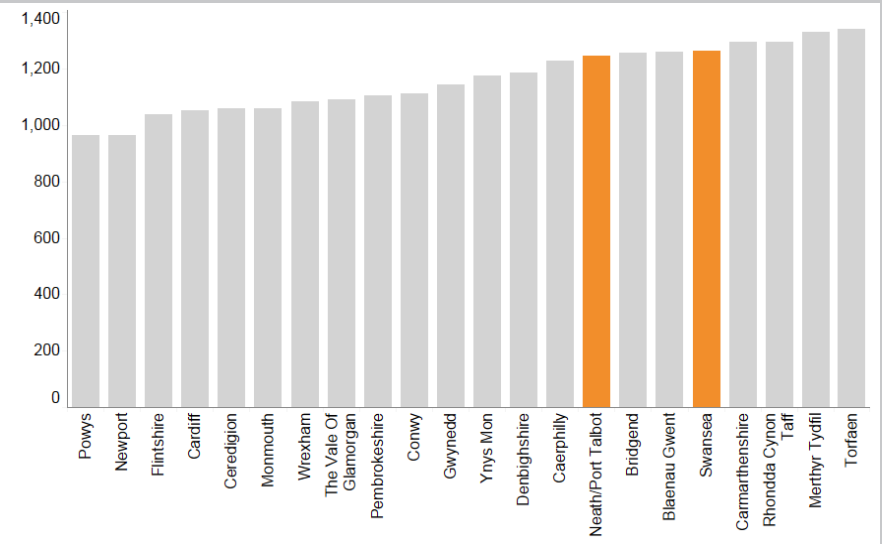
Total antibiotic prescribing

The widespread and often excessive use of antimicrobials is one of the main factors contributing to the increasing emergence of antimicrobial resistance. The aim of this measure is to encourage the appropriate prescribing of all antibiotics in primary care.

Total antibiotic prescribing (items per 1,000 STAR-PUs) - quarterly trend up to March 2019



Total antibiotic prescribing (items per 1,000 STAR-PUs) - Locality data - Financial year 2018-2019



When compared with the previous year, Swansea Bay's performance **IMPROVED**

Total antibiotic prescribing decreased by **4.5%** in 2018–2019 ↓

Out of the 7 health boards, Swansea Bay is ranked:

% change from last year : **7th**

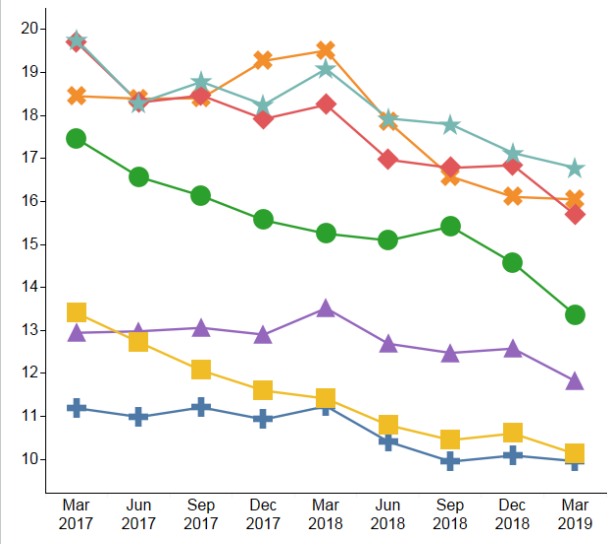
Current overall performance : **6th**

Primary care

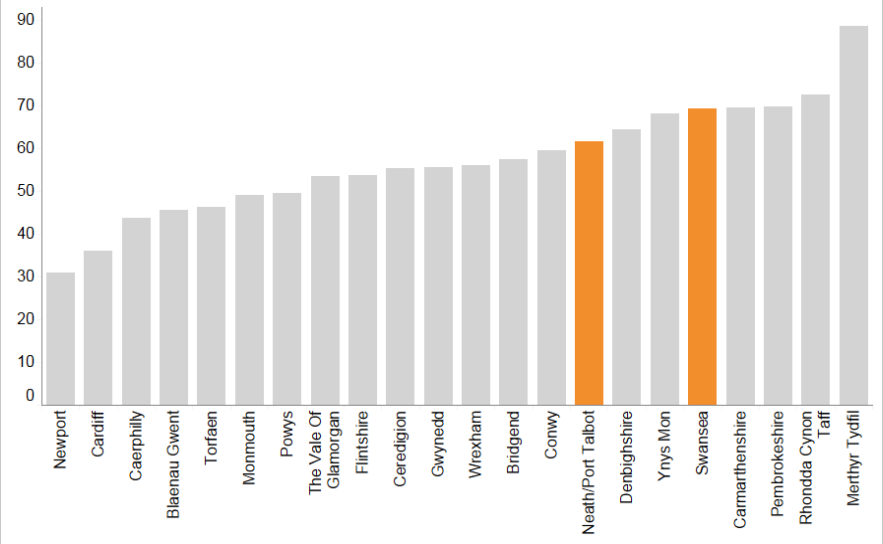
4C antimicrobial prescribing

The use of the broad spectrum antibiotics known as 4C antimicrobials (co-amoxiclav, cephalosporins, clindamycin and fluoroquinolones) when narrow spectrum antibiotics remain effective increases the risk of healthcare associated infections (e.g. *Clostridioides difficile*, methicillin-resistant *Staphylococcus aureus* and resistant urinary tract infections). The aim of this measure is to reduce variation and overall prescribing of 4C antimicrobials in primary care.

4C antimicrobial prescribing (items per 1,000 patients) - quarterly trend up to March 2019



4C antimicrobial prescribing (items per 1,000 patients) - Locality data - Financial year 2018-2019



When compared with the previous year, Swansea Bay's performance **IMPROVED**

4C antimicrobial prescribing decreased by **10.3%** in 2018–2019

Out of the 7 health boards, Swansea Bay is ranked:

% change from last year : **2nd**

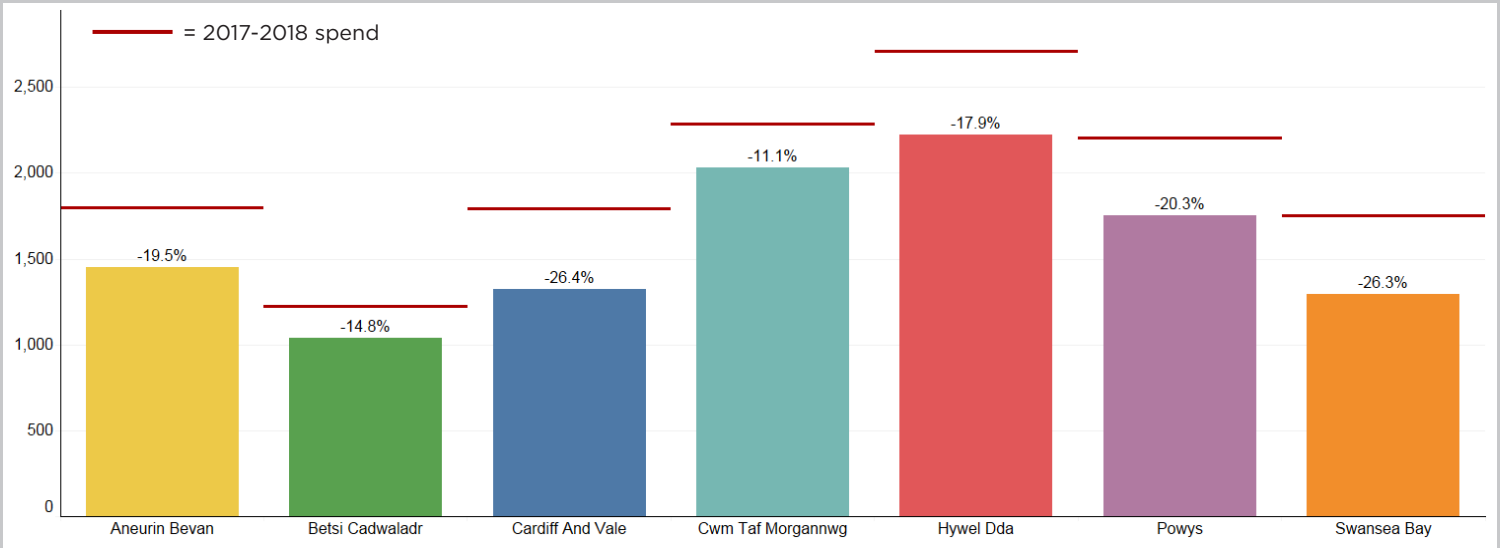
Current overall performance : **5th**

Primary care

Low priority for funding

A series of 'Low Priority for Funding' papers endorsed by the All Wales Medicines Strategy Group recommend decreased prescribing of a range of items considered as not suitable for routine prescribing; whether they are items of low clinical effectiveness or items where more cost-effective alternatives are available. The data below displays the money saved (per 1,000 patients) due to reduced spend on items listed within these papers.

Differences in spend (£ per 1,000 patients) between financial years 2017-2018 and 2018-2019



Swansea Bay achieved a saving of **26.3%** in 2018–2019

Out of the 7 health boards, Swansea Bay is ranked:

% reduction in spend in 2018-19 : **2nd**

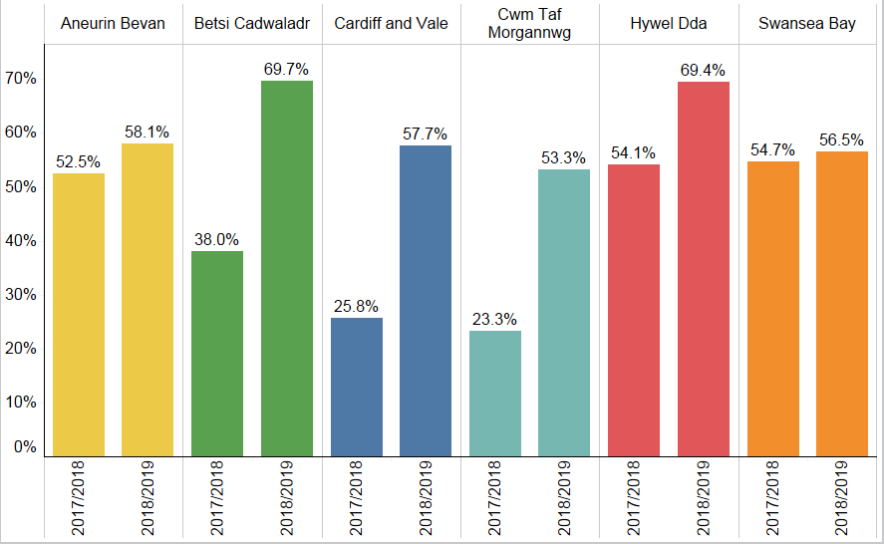
total spend per 1,000 patients : **2nd**

Secondary care

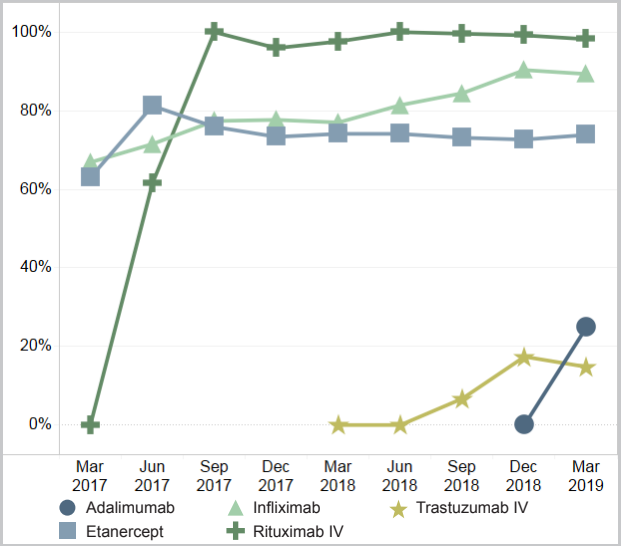
Biosimilars

A biosimilar medicine is a biological medicine that is developed to be highly similar and clinically equivalent to an existing biological medicine. The aim of this measure is to increase the appropriate use of cost-efficient biological medicines, including biosimilar medicines.

Biosimilar prescribing (as a % of total biologic)



Biosimilar usage in Swansea Bay (as a % of total biologic) - quarterly trend up to March 2019



Please note: These data are extracted from the Medusa Data Warehouse which has a central mapping of individual items. This is reviewed on a regular basis and therefore differences may exist between various data sets.

When compared with the previous year, Swansea Bay's performance **IMPROVED**

Biosimilar prescribing (as a % of total biologic) increased by **3.2%** in 2018–2019 ↑

Out of the 6 health boards*, Swansea Bay is ranked:

% change from last year : **6th**

Current overall performance : **5th**

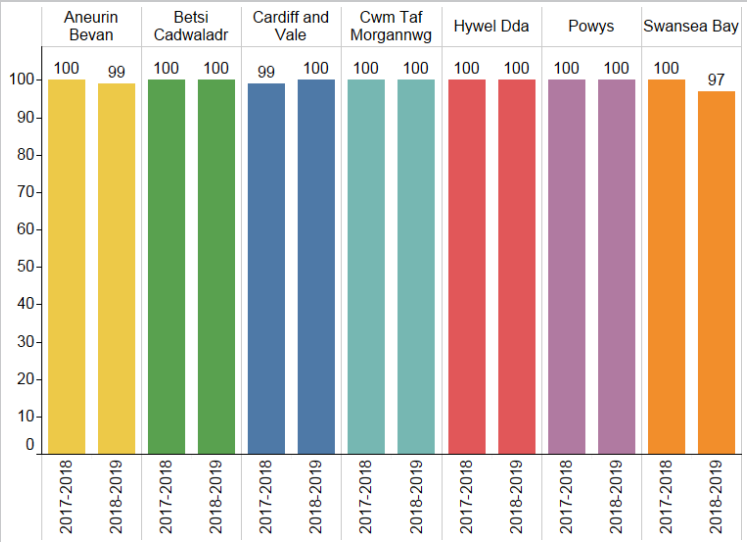
*Powys is not included in this measure.

Access to medicines

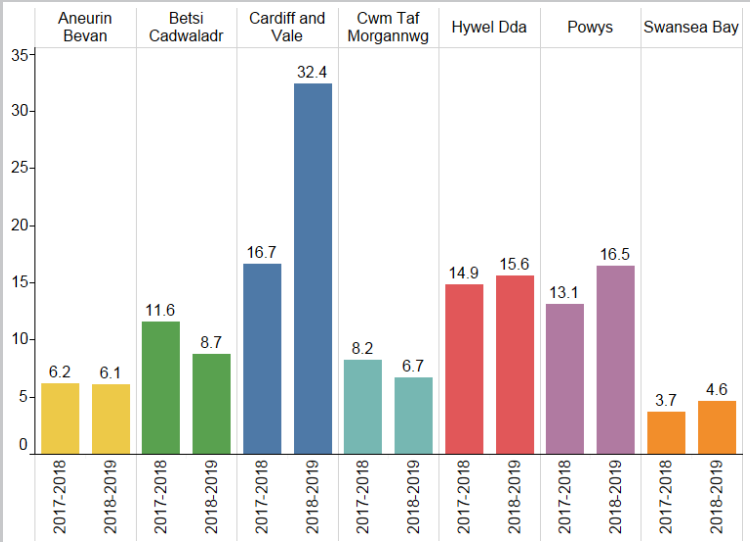
New Treatment Fund

The New Treatment Fund requires the seven health boards to make recommended medicines available as soon as is reasonably practicable and certainly within 60 days of AWMSG/NICE approval. The data below displays the proportion of medicines made available on formulary within 60 days and the average time (in days) until their inclusion, following AWMSG/NICE approval.

Percentage of medicines on formulary within 60 days



Average time (days) to inclusion of medicines on formulary



Out of the 7 health boards, Swansea Bay is ranked:

% of medicines on formulary within 60 days in 2018-2019 : **7th**

Average time to inclusion of medicines on formulary in 2018-2019 : **1st**