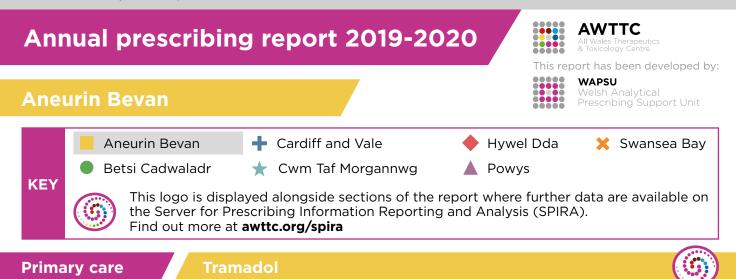
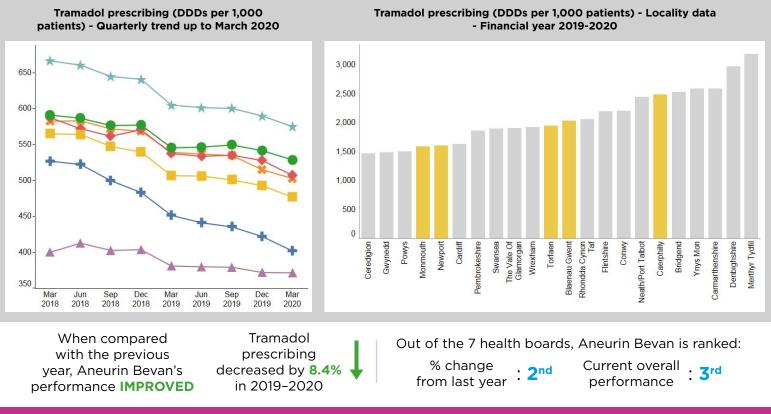
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While there is a recognised place in pain management for tramadol, there are concerns regarding the risks associated with dependence, diversion, misuse and adverse drug reactions. The aim of this measure is to promote a prudent approach to prescribing tramadol, taking into account the risks and benefits, and to encourage timely review.



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.

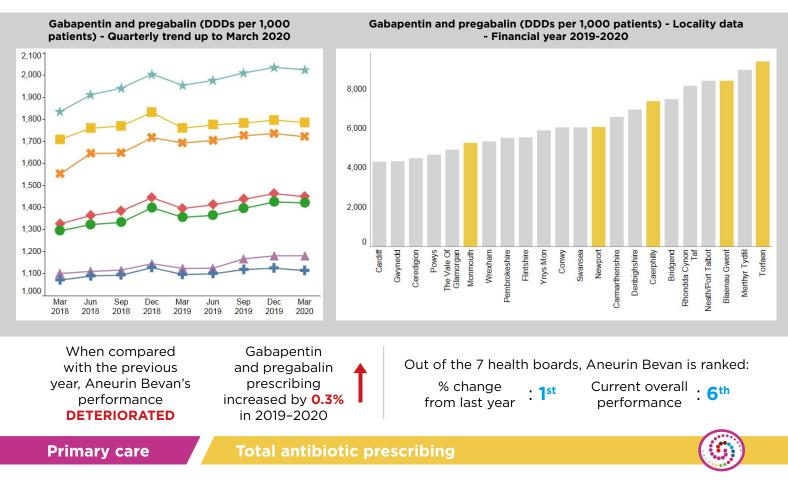
- DDDs defined daily dose a unit of measurement developed by the World Health Organization whereby each medicine is assigned a value within its recognised dosage range. The value is the assumed average maintenance dose per day for a medicine when used for its main indication in adults. A medicine can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

AEC - anticholinergic effect on cognition

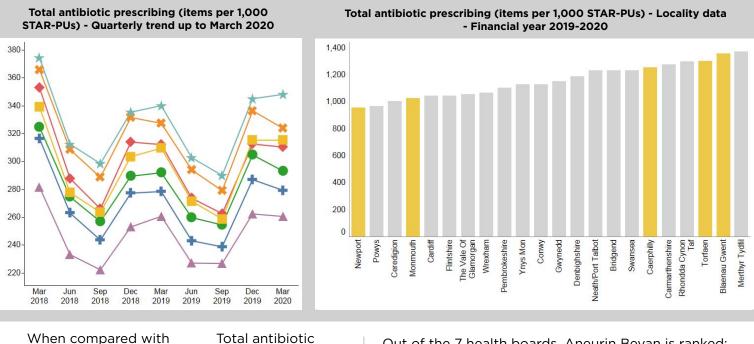
Gabapentin and pregabalin



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.



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.



When compared with the previous year, prescribing Aneurin Bevan's performance increased by 0.6% DETERIORATED in 2019-2020

Out of the 7 health boards, Aneurin Bevan is ranked:

th

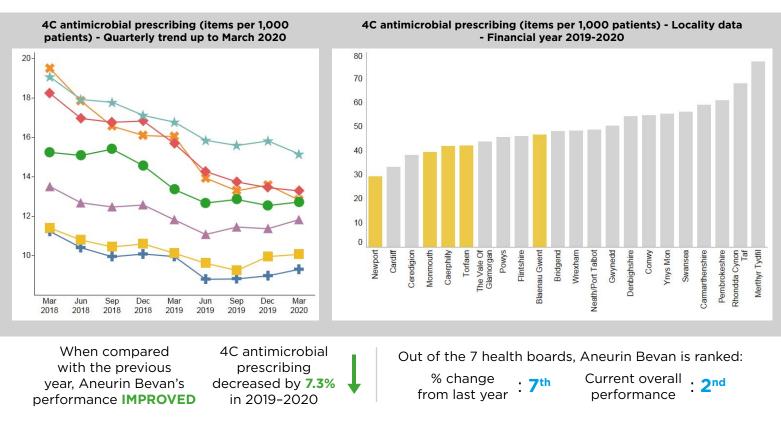
% change from last year Current overall performance

5th

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.



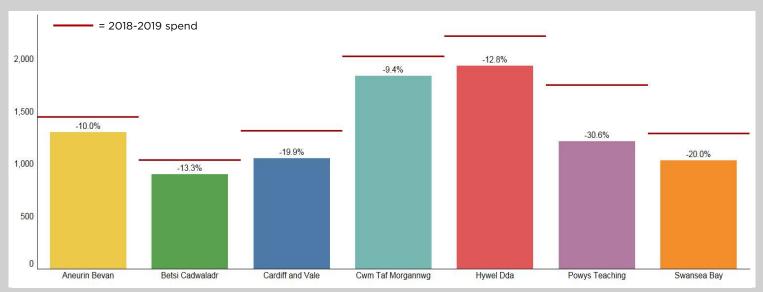
Primary care

Low value for prescribing



A series of 'Low value for prescribing' 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 difference in spend (per 1,000 patients) on items listed within Paper 1 and Paper 2 of this series.

Differences in spend (£ per 1,000 patients) between financial years 2018-2019 and 2019-2020



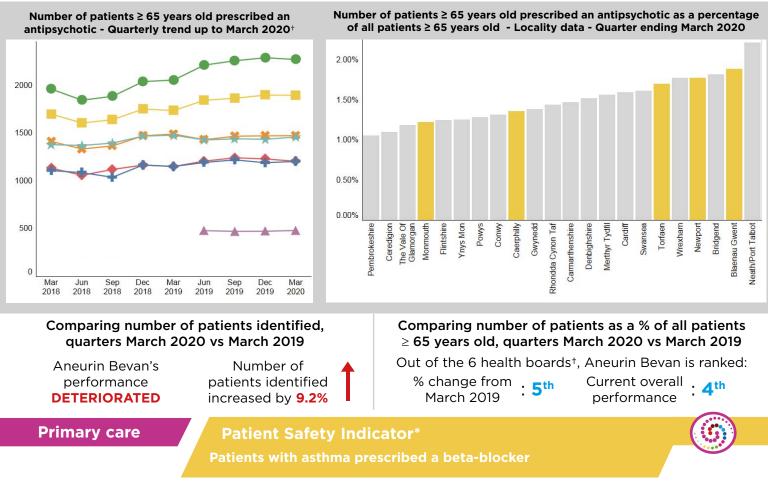
Aneurin Bevan achieved a decrease in spend on items of **10.0%** in 2019-2020 Out of the 7 health boards, Aneurin Bevan is ranked:

% reduction in spend in 2019-2020 : 6th

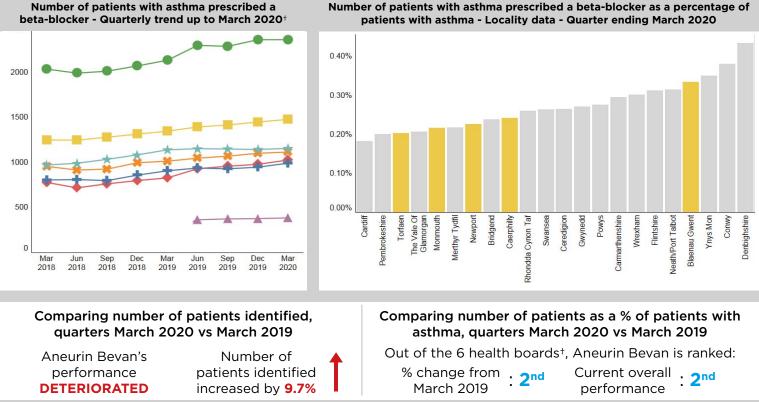
total spend per 1,000 patients : 5th

Patient Safety Indicator* Patients aged ≥ 65 years old prescribed antipsychotics

Antipsychotics should be avoided in patients with dementia unless the person is at risk of harming themselves or others, or experiencing agitation, hallucinations or delusions that are causing them severe distress. Patients identified by this indicator should be reviewed and/or monitored as appropriate.



Beta-blockers should be avoided in patients with asthma due to the potential to precipitate bronchospasm. Patients identified by this indicator should be reviewed and/or monitored as appropriate.



Patient Safety Indicators will not pick up instances where a patient has been reviewed and prescribing has been found to be appropriate.
2018-2019 Powys reporting has been omitted due to technical difficulties with data extraction from one GP practice. For this reason, Powys has been omitted from the health board rankings for this Patient Safety Indicator.

Number of patients ≥ 75 years old with an AEC score of

Patients aged \geq 75 years old with an AEC score of \geq 3 for items on active repeat

Number of patients \geq 75 years old with an AEC score of \geq 3 for items on active

Risk of adverse clinical outcomes in older people prescribed anticholinergic medications increases with increasing anticholinergic exposure. Patients identified by this indicator should be reviewed for a possible reduction in anticholinergic burden; helping to minimise potential medication-related risks.



Aneurin Bevan's performance **IMPROVED**

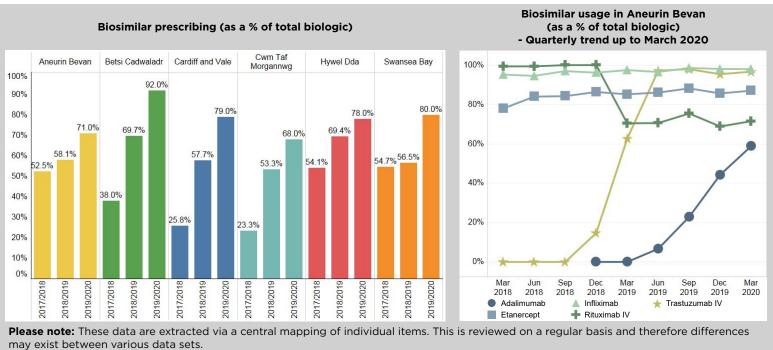
Number of patients identified decreased by 9.3% Out of the 7 health boards, Aneurin Bevan is ranked:

% change from Current overall March 2019 performance

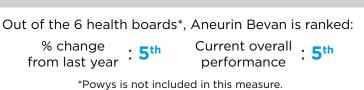
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Best value biological medicines

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.



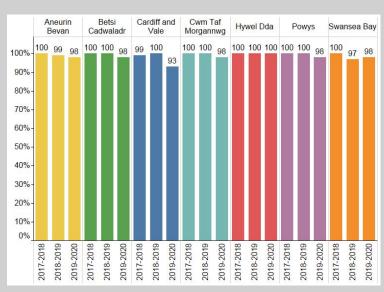
When compared with the previous year, Aneurin Bevan's performance **IMPROVED** Biosimilar prescribing (as a % of total biologic) increased by **22.2%** in 2019–2020



Access to medicines

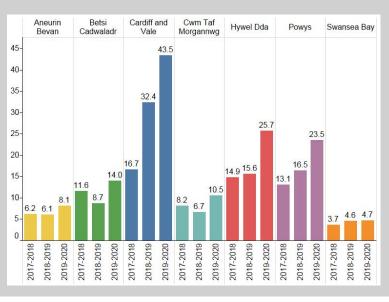
New Treatment Fund

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, Aneurin Bevan is ranked:

Average time to inclusion of medicines on formulary : 2nd in 2019-2020