

# Annual prescribing report 2019-2020



**AWTTC**  
All Wales Therapeutics  
& Toxicology Centre

This report has been developed by:



**WAPSU**  
Welsh Analytical  
Prescribing Support Unit

## Cardiff and Vale

### 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 are available on the Server for Prescribing Information Reporting and Analysis (SPIRA). Find out more at [awttc.org/spira](http://awttc.org/spira)

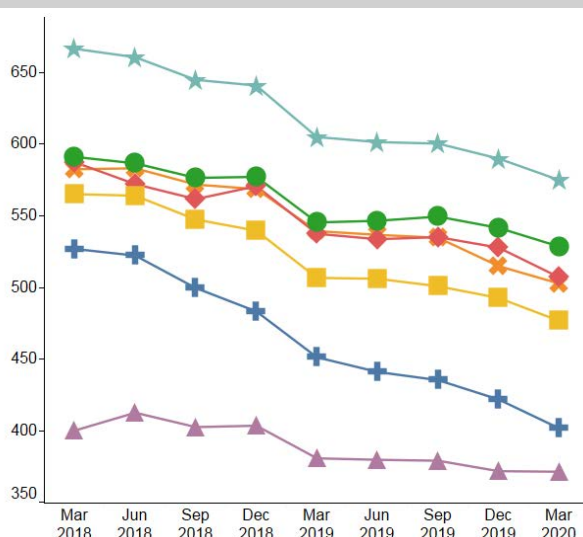
## Primary care

## Tramadol

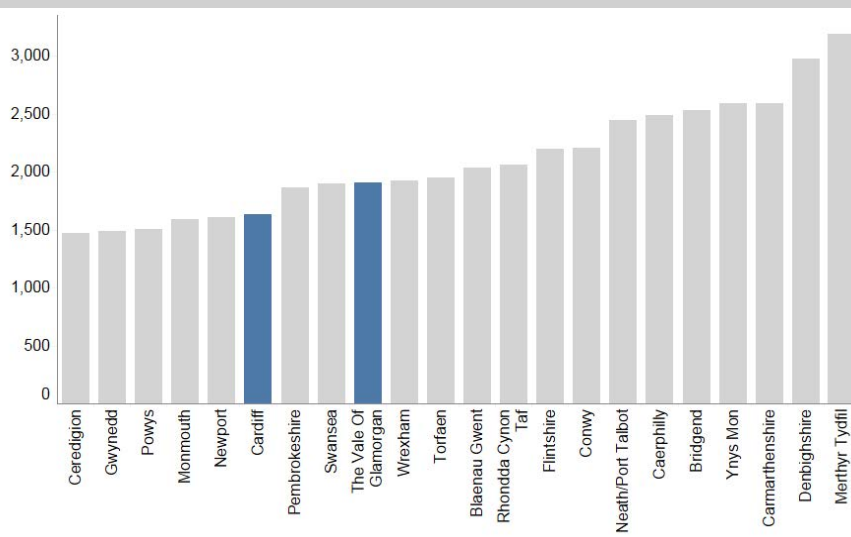


While there is a recognised place in pain management for tramadol, there are concerns regarding the risks associated with dependence, diversion, misuse and adverse drug reactions. The aim of this measure is to promote a prudent approach to prescribing tramadol, taking into account the risks and benefits,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

**Tramadol prescribing (DDD per 1,000 patients) - Quarterly trend up to March 2020**



**Tramadol prescribing (DDD per 1,000 patients) - Locality data - Financial year 2019-2020**



When compared with the previous year, Cardiff and Vale's performance **IMPROVED**

Tramadol prescribing decreased by **13.1%** in 2019-2020



Out of the 7 health boards, Cardiff and Vale is ranked:

% change from last year : **1<sup>st</sup>**

Current overall performance : **2<sup>nd</sup>**

## 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-PU** - 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-PU have been developed based on costs of prescribing or items within therapeutic groups.

**AEC** - anticholinergic effect on cognition

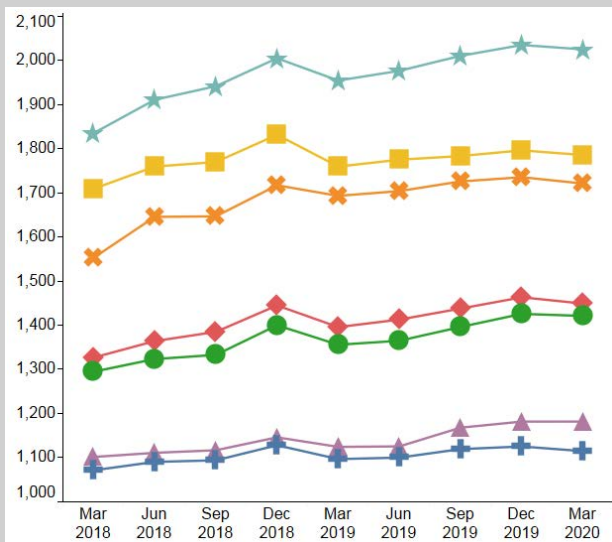
## Primary care

## Gabapentin and pregabalin

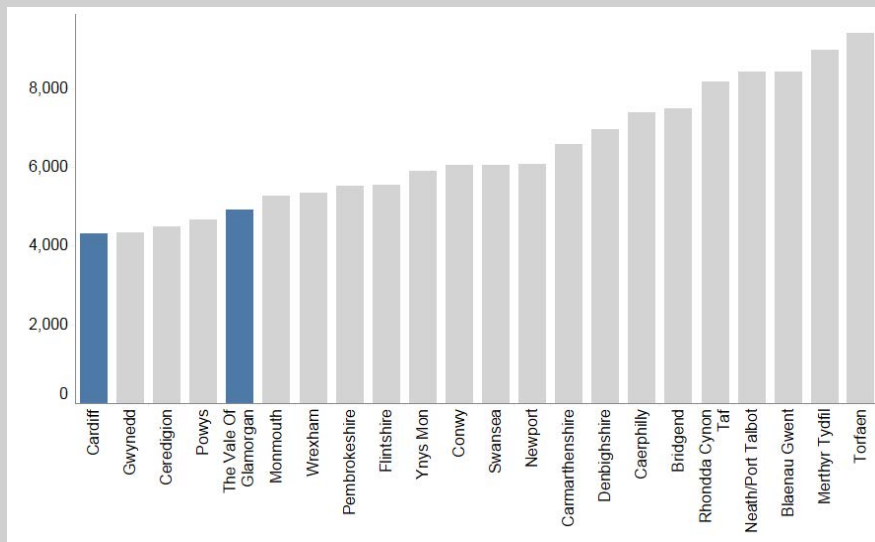


Both gabapentin and pregabalin have the propensity to cause depression of the central nervous system, and when used in combination with other depressants they can cause drowsiness, sedation, respiratory failure and death. The aim of this measure is to encourage the appropriate use and review of gabapentin 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 2020**



**Gabapentin and pregabalin (DDDs per 1,000 patients) - Locality data - Financial year 2019-2020**



When compared with the previous year, Cardiff and Vale's performance **DETERIORATED**

Gabapentin and pregabalin prescribing increased by **1.1%** in 2019-2020



Out of the 7 health boards, Cardiff and Vale is ranked:

% change from last year : **2<sup>nd</sup>**

Current overall performance : **1<sup>st</sup>**

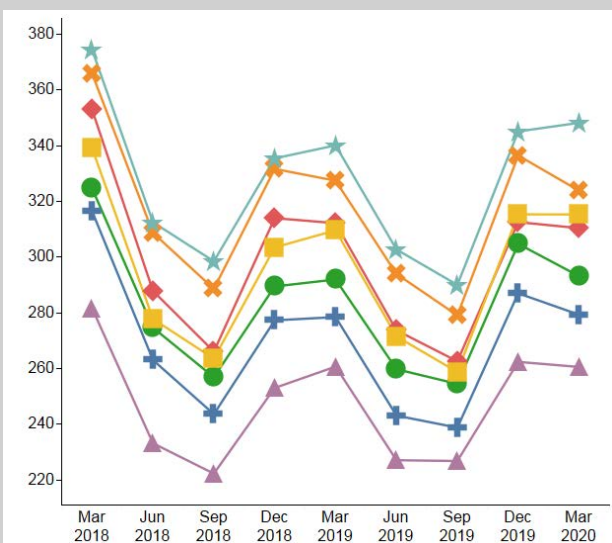
## Primary care

## Total antibiotic prescribing

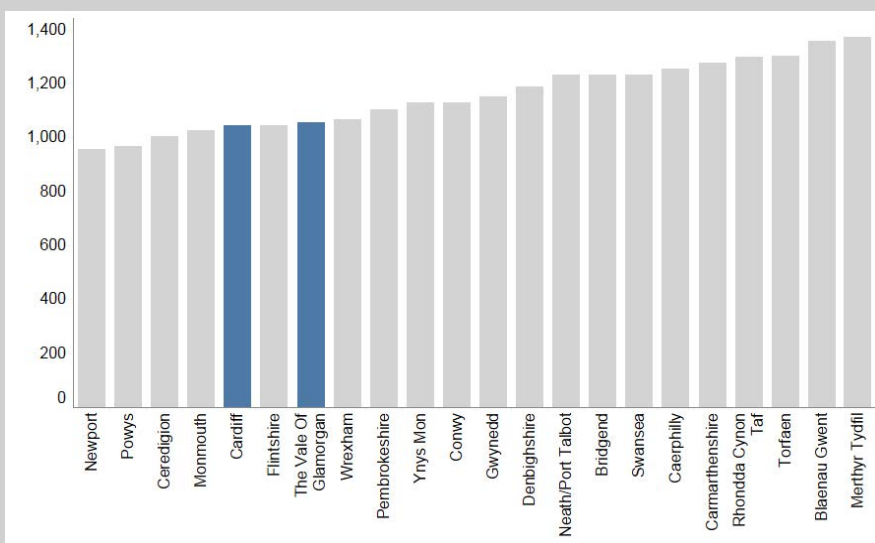


The widespread and often excessive use of antimicrobials is one of the main factors contributing to the increasing emergence of antimicrobial resistance. The aim of this measure is to encourage the appropriate prescribing of all antibiotics in primary care.

**Total antibiotic prescribing (items per 1,000 STAR-PU's) - Quarterly trend up to March 2020**



**Total antibiotic prescribing (items per 1,000 STAR-PU's) - Locality data - Financial year 2019-2020**



When compared with the previous year, Cardiff and Vale's performance **IMPROVED**

Total antibiotic prescribing decreased by **1.3%** in 2019-2020



Out of the 7 health boards, Cardiff and Vale is ranked:

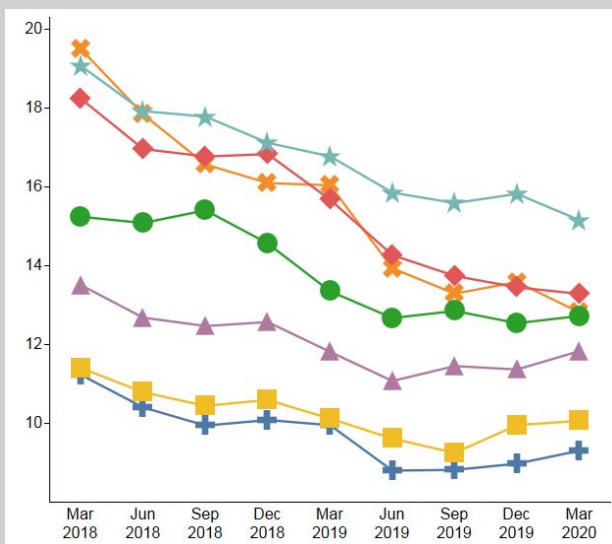
% change from last year : **3<sup>rd</sup>**

Current overall performance : **2<sup>nd</sup>**

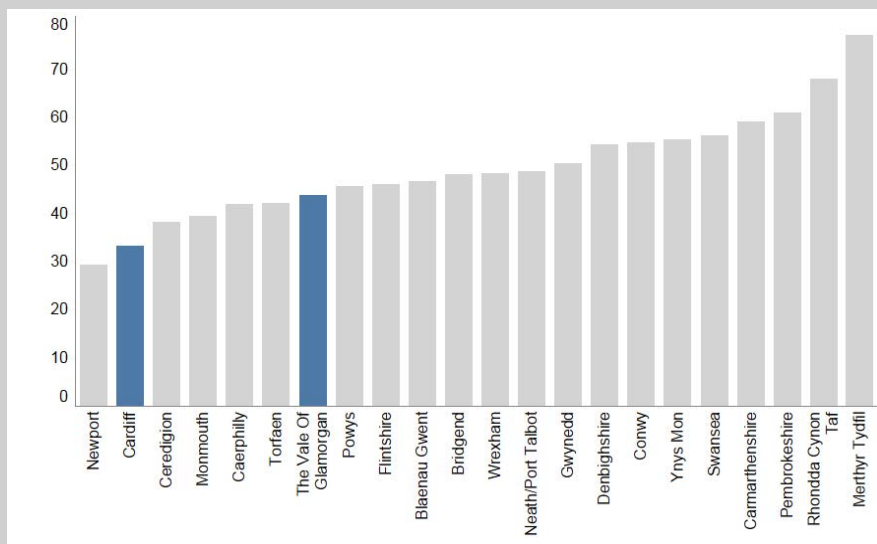


The use of the broad spectrum antibiotics known as 4C antimicrobials (co-amoxiclav, cephalosporins, clindamycin and fluoroquinolones) when narrow spectrum antibiotics remain effective increases the risk of healthcare associated infections (e.g. *Clostridioides difficile*, methicillin-resistant *Staphylococcus 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 2020



4C antimicrobial prescribing (items per 1,000 patients) - Locality data - Financial year 2019-2020



When compared with the previous year, Cardiff and Vale's performance **IMPROVED**

4C antimicrobial prescribing decreased by **11.1%** in 2019-2020



Out of the 7 health boards, Cardiff and Vale is ranked:

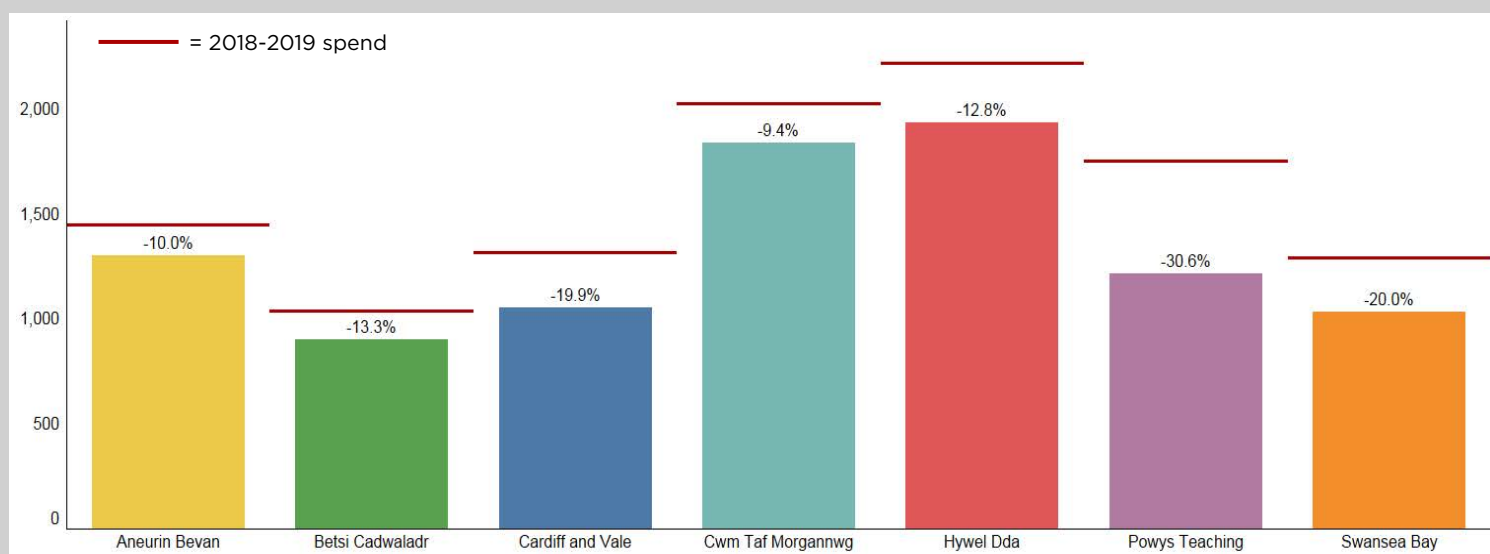
% change from last year : **4<sup>th</sup>**

Current overall performance : **1<sup>st</sup>**



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



Cardiff and Vale achieved a decrease in spend on items of **19.9%** in 2019-2020

Out of the 7 health boards, Cardiff and Vale is ranked:

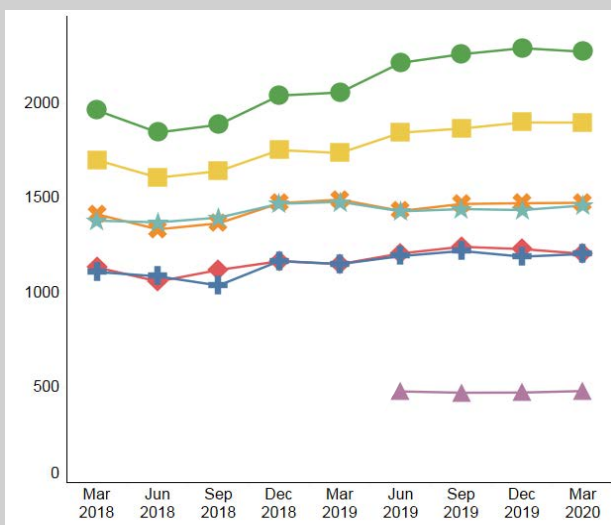
% reduction in spend in 2019-2020 : **3<sup>rd</sup>**

total spend per 1,000 patients : **3<sup>rd</sup>**

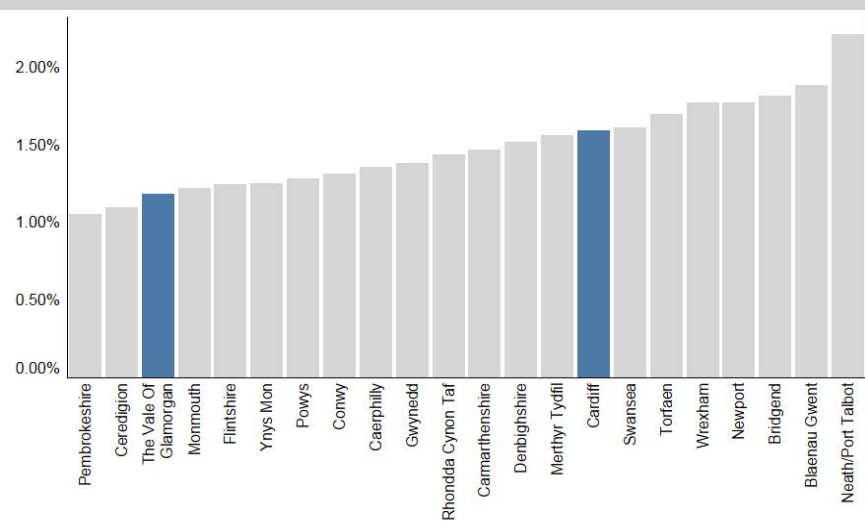


Antipsychotics should be avoided in patients with dementia unless the person is at risk of harming themselves or others, or experiencing agitation, hallucinations or delusions that are causing them severe distress. Patients identified by this indicator should be reviewed and/or monitored as appropriate.

Number of patients ≥ 65 years old prescribed an antipsychotic - Quarterly trend up to March 2020†



Number of patients ≥ 65 years old prescribed an antipsychotic as a percentage of all patients ≥ 65 years old - Locality data - Quarter ending March 2020



### Comparing number of patients identified, quarters March 2020 vs March 2019

Cardiff and Vale's performance  
**DETERIORATED**

Number of patients identified increased by **4.6%**



### Comparing number of patients as a % of all patients ≥ 65 years old, quarters March 2020 vs March 2019

Out of the 6 health boards†, Cardiff and Vale is ranked:

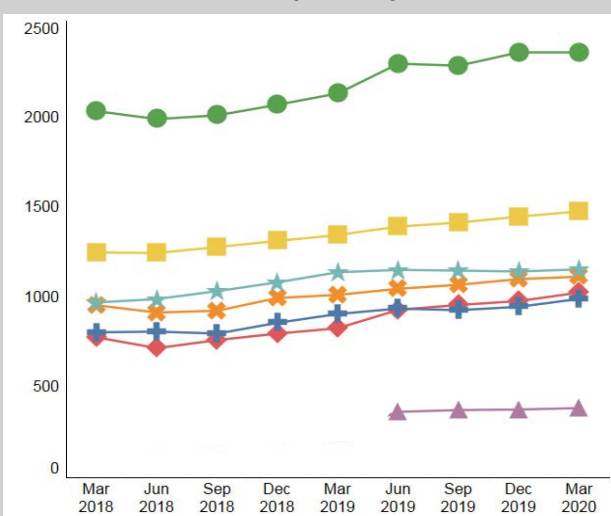
% change from March 2019 : **4<sup>th</sup>**

Current overall performance : **3<sup>rd</sup>**

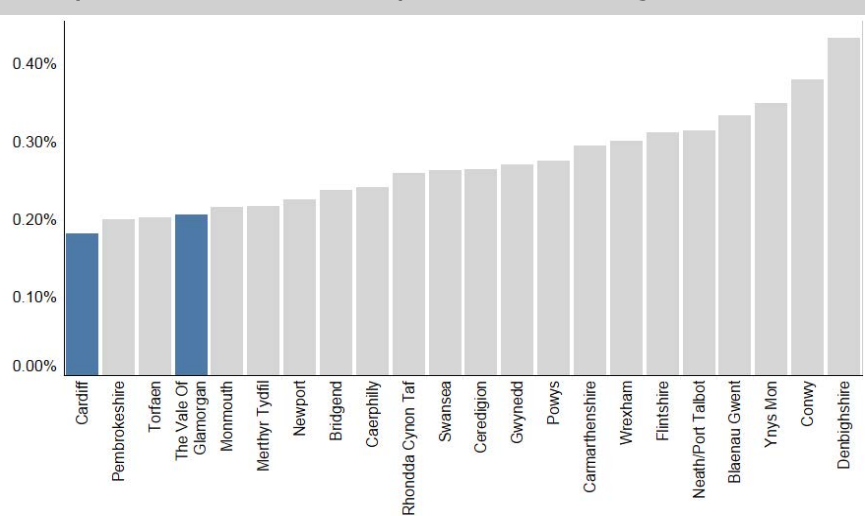


Beta-blockers should be avoided in patients with asthma due to the potential to precipitate bronchospasm. Patients identified by this indicator should be reviewed and/or monitored as appropriate.

Number of patients with asthma prescribed a beta-blocker - Quarterly trend up to March 2020†



Number of patients with asthma prescribed a beta-blocker as a percentage of patients with asthma - Locality data - Quarter ending March 2020



### Comparing number of patients identified, quarters March 2020 vs March 2019

Cardiff and Vale's performance  
**DETERIORATED**

Number of patients identified increased by **9.2%**



### Comparing number of patients as a % of patients with asthma, quarters March 2020 vs March 2019

Out of the 6 health boards†, Cardiff and Vale is ranked:

% change from March 2019 : **4<sup>th</sup>**

Current overall performance : **1<sup>st</sup>**

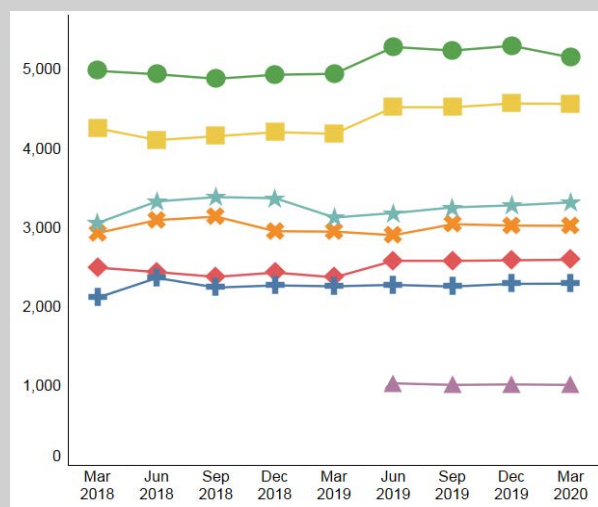
\* Patient Safety Indicators will not pick up instances where a patient has been reviewed and prescribing has been found to be appropriate.  
† 2018-2019 Powys reporting has been omitted due to technical difficulties with data extraction from one GP practice. For this reason, Powys has been omitted from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



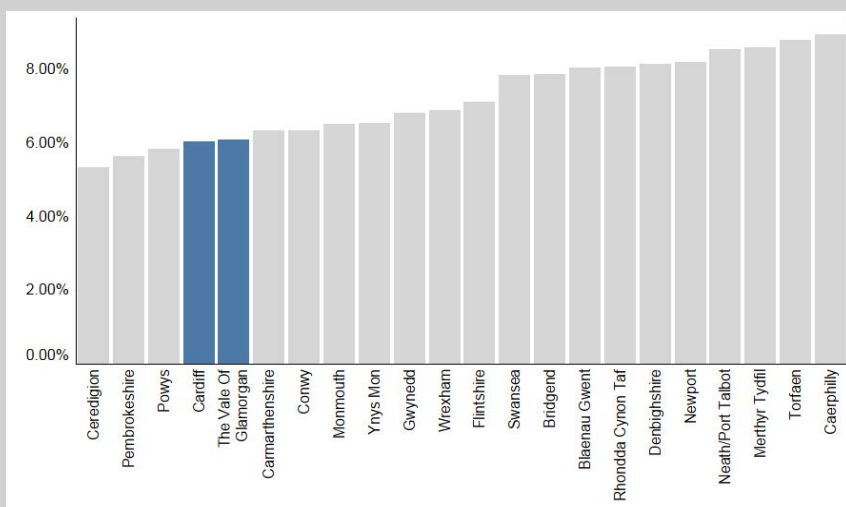


Risk of adverse clinical outcomes in older people prescribed anticholinergic medications increases with increasing anticholinergic exposure. Patients identified by this indicator should be reviewed for a possible reduction in anticholinergic burden; helping to minimise potential medication-related risks.

**Number of patients  $\geq 75$  years old with an AEC score of  $\geq 3$  for items on active repeat - Quarterly trend up to March 2020<sup>†</sup>**



**Number of patients  $\geq 75$  years old with an AEC score of  $\geq 3$  for items on active repeat as a percentage of patients  $\geq 75$  years old - Locality data - Quarter ending March 2020**



### Comparing number of patients identified, quarters March 2020 vs March 2019

Cardiff and Vale's performance  
**DETERIORATED**

Number of patients identified increased by **1.5%**



### Comparing number of patients as a % of patients $\geq 75$ years old, quarters March 2020 vs March 2019

Out of the 6 health boards<sup>†</sup>, Cardiff and Vale is ranked:

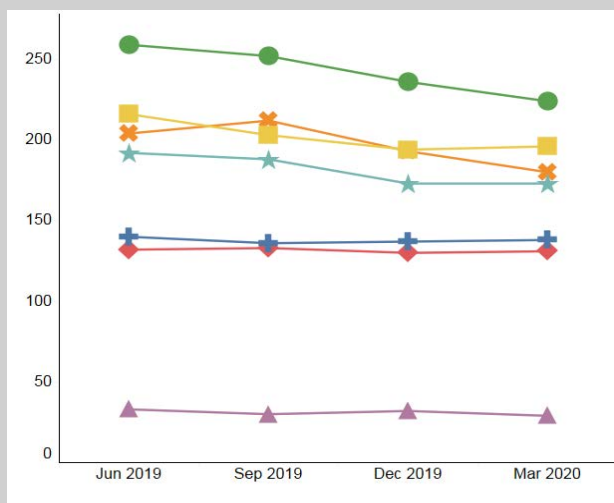
% change from March 2019 : **1<sup>st</sup>**

Current overall performance : **2<sup>nd</sup>**

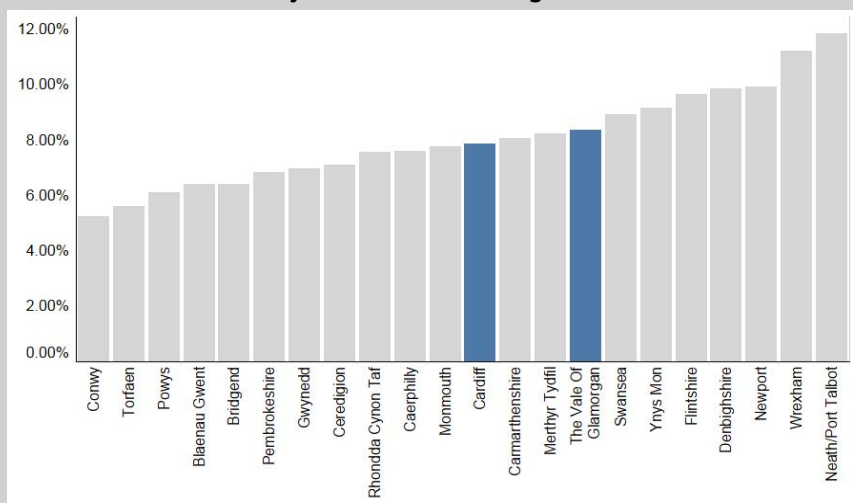


Due to the high risk of malformations and developmental problems associated with exposure of babies to valproate medicines, they must no longer be used in women or girls able to have children unless they have a Pregnancy Prevention Programme in place. Patients identified by this indicator should be reviewed.

**Number of female patients aged 14–45 years old with a prescription for sodium valproate - Quarterly trend up to March 2020**



**Number of female patients aged 14–45 years old with a prescription for sodium valproate as a percentage of female patients aged 14–45 years old - Locality data - Quarter ending March 2020**



### Comparing number of patients identified, quarters March 2020 vs June 2019

Cardiff and Vale's performance  
**IMPROVED**

Number of patients identified decreased by **1.4%**



### Comparing number of patients as a % of female patients aged 14–45 years old, quarters March 2020 vs June 2019

Out of the 7 health boards, Cardiff and Vale is ranked:

% change from March 2019 : **6<sup>th</sup>**

Current overall performance : **5<sup>th</sup>**

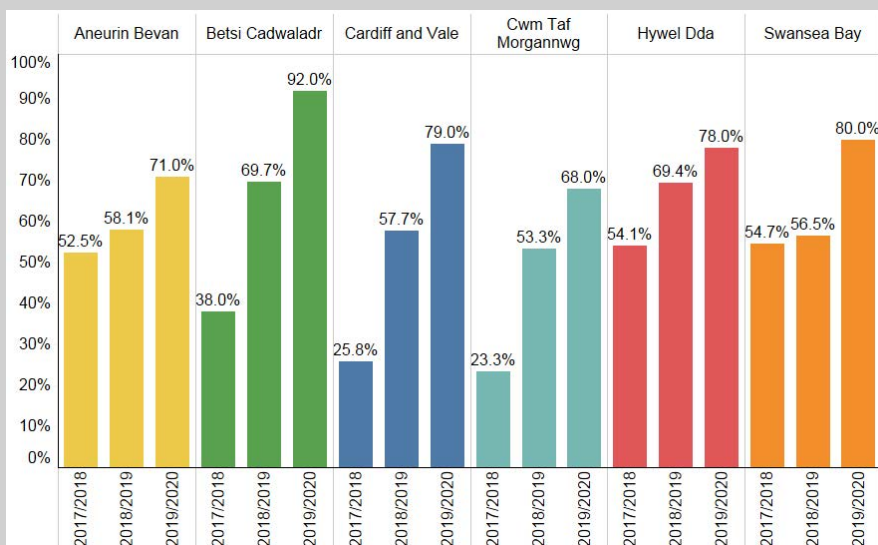
\* Patient Safety Indicators will not pick up instances where a patient has been reviewed and prescribing has been found to be appropriate.

<sup>†</sup> 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.

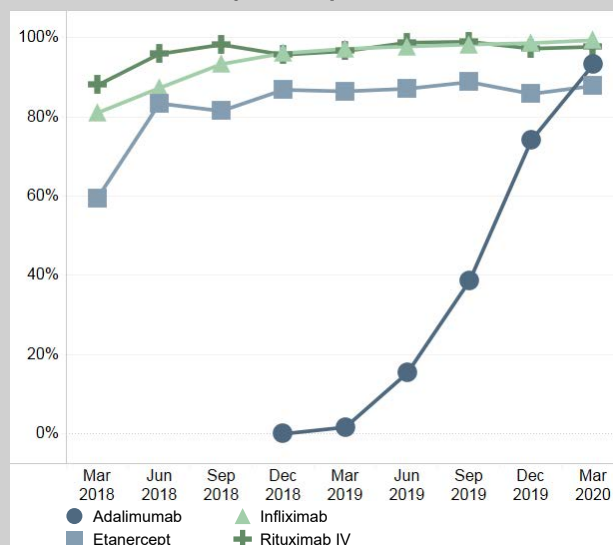


A biosimilar medicine is a biological medicine that is developed to be highly similar and clinically equivalent to an existing biological medicine. The aim of this measure is to increase the appropriate use of cost-efficient biological medicines, including biosimilar medicines.

**Biosimilar prescribing (as a % of total biologic)**



**Biosimilar usage in Cardiff and Vale (as a % of total biologic) - Quarterly trend up to March 2020**



**Please note:** These data are extracted via 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, Cardiff and Vale's performance **IMPROVED**

Biosimilar prescribing (as a % of total biologic) increased by **36.9%** in 2019-2020

Out of the 6 health boards\*, Cardiff and Vale is ranked:  
% change from last year : **2<sup>nd</sup>** Current overall performance : **3<sup>rd</sup>**

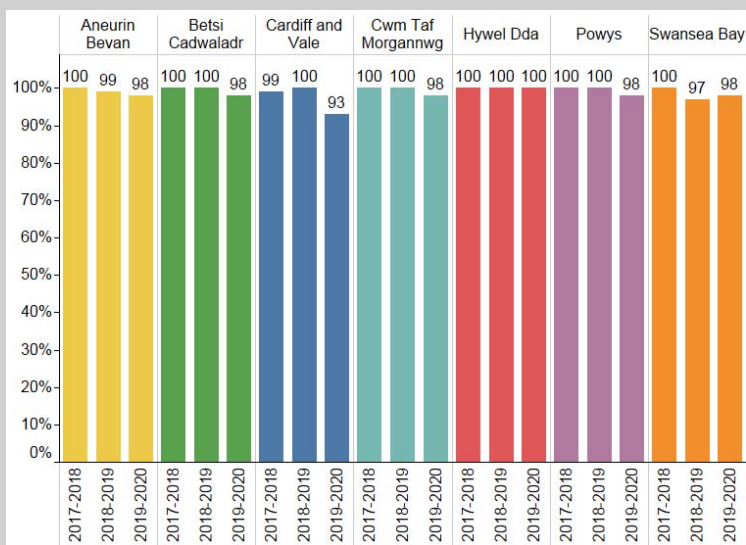
\*Powys is not included in this measure.

## Access to medicines

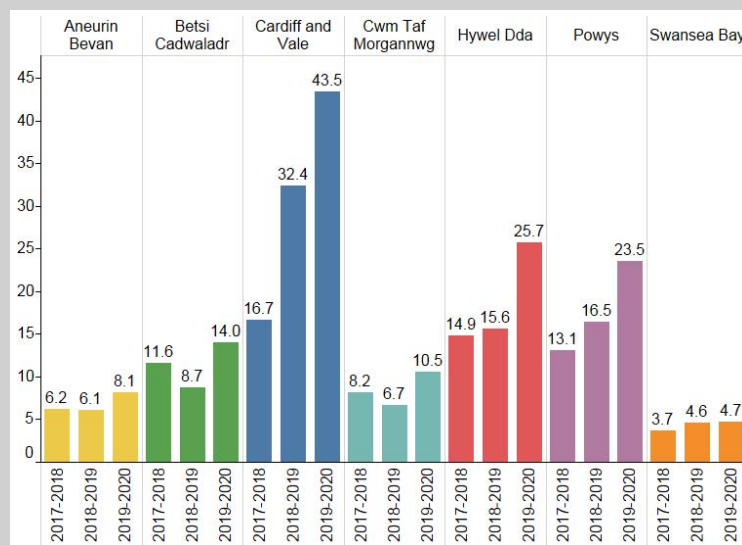
## New Treatment Fund

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 AWMSCG/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 AWMSCG/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, Cardiff and Vale is ranked:

% of medicines on formulary within 60 days : **7<sup>th</sup>** in 2019-2020

Average time to inclusion of medicines on formulary : **7<sup>th</sup>** in 2019-2020