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Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board

Our Ref: JP/RB/jr

Direct Line: 01633 435958

27 February 2018

SeneddPetitions@assembly.wales

Dear Sir or Madam

Comments on Petition P-05-784 Prescription drug dependence and withdrawal – recognition and support.

Aneurin Bevan University Health Board (ABUHB) has been asked to comment on the above petition received by the Petitions Committee, which calls for recognition and effective support for individuals affected and harmed by prescribed drug dependence and withdrawal, to provide views on the issues raised and information on the support available to individuals affected.

A key consideration within this petition is that it is important to distinguish between true dependence as with opiate analgesics and the issue of discontinuation syndrome from antidepressants, which is perhaps the major aspect to this petition.

The Health Board recognises the growing concerns around the increased prescribing of medicines associated with dependence and withdrawal symptoms on discontinuation. Although prescribing of psychoactive drugs is a major clinical activity and a key therapeutic tool for managing and influencing the health of patients, this can often lead to patients becoming dependent or suffering withdrawal symptoms on cessation of therapy. Data¹ on UK prescribing patterns of drugs associated with dependence and withdrawal symptoms, e.g. Antidepressants, benzodiazepines, "Z" drugs, and opioids, have shown that within the UK:

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Bwrdd Iechyd Prifysgol Aneurin Bevan yw enw gweithredol Bwrdd Iechyd Lleol Prifysgol Aneurin Bevan
Aneurin Bevan University Health Board is the operational name of Aneurin Bevan University Local Health Board

- Antidepressant prescribing has more than doubled in the last decade with over 75 million prescriptions dispensed in 2016
- 12 million prescriptions for benzodiazepines were dispensed in 2015
- 28 million prescriptions for opioids were dispensed in 2016

The Health Board recognises that it has a role and responsibility to help address concerns relating to the use of these medicines and has prioritised a reduction in prescribing of causative agents.

Within Wales, the All Wales Medicines Strategy Group (AWMSG) has also recognised these concerns, and has developed prescribing indicators and resources for healthcare professionals to utilise in their daily practice in order to improve the quality of prescribing and to reduce unintentional harm to patients. The Health Board is committed to improving performance within these indicators relating to the use of psychoactive drugs. Both peer review amongst prescribers and education are used so that variation in prescribing is reduced and good practice followed.

Specific targeted work is carried out within the following areas to reduce prescribed drug dependence:

Hypnotics and Anxiolytics – this area was identified by AWMSG as being a key area to improve medicines utilisation due to ongoing concerns regarding high levels of prescribing within NHS Wales. The Health Board has reduced its prescribing of these medicines by 9% from 2016-17(Qtr1) to 2017-18(Qtr1)² by increasing awareness in prescribers of key messages and variation in practice. Other initiatives have included a successful practice pharmacist led benzodiazepine reduction clinic, helping patients to gradually reduce or stop their medicines. Where patients find it difficult to reduce in primary care, or have additional complexity of need, they may be referred to Gwent Specialist Substance Misuse Service (GSSMS) which provides specialist support and prescribing within the Health Board.

Analgesics – overall the prescribing rates of analgesics within the Health Board have remained stable, however pain management remains a significant pressure to prescribers with an increasing demand for adequate pain control amongst the patient population

- Tramadol – whilst there is a recognised place in pain management for this medicine, there are concerns regarding the risks associated with its use, including dependence. Prescribing initiatives have reduced the use of tramadol by 10% over recent years². Health Board initiatives such as a pharmacist led review and withdrawal service, supported by Consultants in pain management and addiction (Chronic Pain Group) have also played a valuable role helping identified patients to have their tramadol stepped down or stopped.

- Gabapentin/Pregabalin – these medicines are linked with a potential risk of dependence misuse and diversion, however they also have a defined role in pain management and, in the case of pregabalin, generalised anxiety disorder. The use of these two medicines is increasing and therefore the need for regular review of patients to assess effectiveness is pivotal in controlling this growth of prescribing. All Health Boards in Wales are showing an increase in prescribing rates and quantity prescribed. In the Health Board a Consultant-led Chronic Pain Group have produced a range of educational resources for GPs and have directly educated the GP and primary care workforce about the issues related to the use of these two agents. This group is also piloting specific “pregabalin” clinics so that patients can be assessed and perhaps have a reduction in their drug therapy. Medicines management team audits have also been carried out and presented to prescribers, highlighting key messages in the safe, effective use of these medicines.

Again, primary care initiatives have been developed by the Chronic Pain Group to support patients in reducing their use of these medications. Patients who find it difficult to reduce in the primary care setting or who have an additional complexity of need, can be referred to specialist clinics within GSSMS.

De-prescribing of anti-depressants can be a prolonged process, due to the need to avoid discontinuation symptoms over the stepping down treatment course. This needs to be distinguished from true drug dependence as seen in opiates and benzodiazepines.

A report by Welsh Government³ illustrated that there has been a significant increase in the prescribing of anti-depressants over the last decade. In a move to address this issue the All Wales Medicines Strategy Group developed an indicator which attempted to reduce the prescribing rates of antidepressants by encouraging prescribers to refer preferentially in the first instance to psychological therapies in the community setting. The Health Board has developed services within primary care which offer an alternative to the prescription of antidepressant/anti-anxiolytic medicines e.g. Activate Your Life/Stress Control classes, however, it is recognised that more access to services like these are necessary to ensure timely treatment for patients.

The Health Board is committed to implementing the direction of AWMSG advice within these areas of prescribing through education, audit and peer discussion with prescribers, however it is recognised that more needs to be done to help patients reduce or stop their medicines should that be the desired course of action. There has been a great emphasis on reducing prescribing rates of these medicines, and there have been successes e.g. in tramadol and benzodiazepine use.

The Health Board's Chronic Pain Group has successfully piloted work within practices to help patients reduce opioids and pregabalin utilising independent prescribers, and there is an intention to increase this service provision. A successful benzodiazepine withdrawal service has recently been established by a practice pharmacist within the Caerphilly County Borough reducing prescribing rates of these medicines. The Health Board has therefore recognised the need for these services and the further need for increased access for patients. There are discussions taking place to develop community pharmacy independent prescribers to aid in treatment withdrawal within primary care.

To summarise, the Health Board recognises the issues that these medicines have in relation to their discontinuation and overuse, there has been a focus on reducing prescribing but the Health Board also recognises that more can be done to help patients reduce their medication, where appropriate.

I hope this is helpful but should you require any additional information, please do not hesitate to contact me.

Yours sincerely



Judith Paget
Chief Executive/Prif Weithredwr

References

1. Supporting Individuals affected by prescribed drugs associated with dependence and withdrawal. BMA Jan 2018
2. AWTTTC National Prescribing Indicators 2017-18, Analysis of Prescribing Data to June 2017
3. Research Briefing – Misuse of Prescription and over-the-counter medications. Hannah Roberts. National Assembly of Wales Research Service June 2016