

Feedback for GPs helps to reduce high-risk prescription rates, study shows

August 25 2016, by Roddy Isles

Regular feedback to GP practices reviewing the safety of their prescribing of drugs to patients can help significantly lower the risk of adverse drug reactions, a new study co-led by the University of Dundee and University of Strathclyde, in collaboration with NHS Scotland, has shown.

Prescription drugs significantly improve patient outcomes but are also a major cause of harm in both primary and hospital care, with approximately 1 in 20 hospital admissions caused by <u>adverse drug events</u>. At least half of these adverse events are preventable.

In a study that involved over 260 GP practices around Scotland, researchers found that focussed interventions providing feedback to practices about their <u>prescribing</u> and advising on prescription safety helped reduce the rate of 'high risk' prescriptions by more than 10 per cent.

The study, which was funded by the Chief Scientist Office of the Scottish Government, examined prescribing of various drugs including antipsychotics, non-steroidal anti-inflammatories and antiplatelets, all of which can be high-risk when used in certain patient groups or in combination with other drugs.

The *British Medical Journal* has published the results of the study which was co-led by Professor Bruce Guthrie at the University of Dundee and Professor Marion Bennie at the University of Strathcldye working in



collaboration with colleagues at the Universities of Strathclyde, Aberdeen, Edinburgh and Melbourne and NHS National Services Scotland.

"Prescribing is inherently risky and it's important to recognise that the prescribing we're targeting is not always wrong because clinicians and patients have to balance benefit and harm in complex ways when people have multiple conditions. However, we believe that we can improve patient safety by prompting practices to review patients with particular potentially risky prescribing, to make sure that it is appropriate." said Professor Guthrie, who is based in the Medical School at Dundee and is also a GP.

"This is the largest study of its kind ever done and it reinforces other work done by us and others about the value of making interventions at the practice level to monitor and advise on high-risk prescribing."

Professor Bennie, who is based in The University of Strathclyde and NHS National Services Scotland, said, "This study has shown how routinely collected national prescribing data can be transformed into intelligence and feedback directly to frontline clinicians to support review of patient care.

"This is a scalable intervention which could be deployed in the NHS and in many other healthcare systems now, where there is a good level of electronic patient records."

The study compared prescribing across practices divided into three groups. The first group received only existing NHS Scotland educational material which is regularly sent to practices. The second group received additional feedback on how their rates of 'high-risk' prescribing compared to other practices, while the third group were given an additional one page document intended to increase response rates to



feedback.

There was no evidence in the first group to suggest a significant reduction in high-risk prescribing. In the second group there was a 12 per cent reduction in the odds of high-risk prescribing, and in the third group a 14 per cent reduction.

More information: Bruce Guthrie et al. Data feedback and behavioural change intervention to improve primary care prescribing safety (EFIPPS): multicentre, three arm, cluster randomised controlled trial, *BMJ* (2016). DOI: 10.1136/bmj.i4079

Provided by University of Dundee

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