

Prescribing Support Unit

Annual Report 2021



Committee *for*
Health and Social Care

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Introduction

This Prescribing Support Unit or PSU annual report reviews the trends in prescribing cost and volumes over the year to December 31st 2021 in Guernsey and Alderney, and discusses what the reasons for significant changes may have been. The report also summarises the activities of the PSU undertaken in the past year, activities that have already been completed in 2022 and the plans for the remainder of the year.

Key Findings

- A total of 1,601,445 prescription items for drugs and medicines were dispensed as pharmaceutical benefit in Guernsey and Alderney in the year ending December 31st 2021, an increase of 3.3% on 2020.
- Of that total 1,041,909 were exempt from a prescription charge, an increase of 2.4% on 2020. There were 559,536 paid prescriptions, 5% more than in 2020.

	2019	2020	2021
Prescription items	1,532,569	1,549,841	1,601,445
% increase	0.6%	1.1%	3.3%
Exempt	1,002,672	1,017,125	1,041,909
% increase	0.9%	1.4%	2.4%
Paid	529,897	532,716	559,536
% increase	0%	0.5%	5%

- The basic drug cost, or net ingredient cost (NIC) plus fees, uplifts and rota payments, but before any rebates or discounts, for all practices and prescribers was £21.72 million, up 18.2 % on 2020 when it was £18.37 million.
- The average NIC per dispensed (drug) prescription item dispensed in 2021 was £12.40, up 24% on 2020 when it was £10.01.
- There were 12,039, 13.1% more than in 2020, appliance prescription items dispensed in 2021, at a total cost, including fees, of £1.22 million or 8.9% more than in 2020.
- The cost of the Oxygen service was £474K, up 14.8% on 2020.
- The Monitored Dosage Systems service cost £297K in 2020, an increase of 5.7% on 2020.
- Fees for supervision of consumption of opioid substitute therapy came to £115,772, a 73% increase on 2020.

- Prescription charges paid by islanders amounted to £2.275 million, which was 3.83% more than in 2020.
- Rebates to CfESS on drugs dispensed in the community came to £652K in the calendar year 2021 and further discounts were obtained by CfHSC on oncology and other specialist drugs.
- The total annual cost of all of the above, plus out-of-pocket claims, professional fees and uplifts to pharmacies, less prescription charges, was £21.15 million, up 19.6 % on 2020 when it was £17.65 million.

Overall prescribing

The COVID 19 outbreak in March 2020 continued to affect aspects of the Pharmaceutical Service well into 2021. BREXIT also had a very significant effect on staff in many healthcare settings, cost of prescription products and other medical supplies in the Bailiwick throughout the year.

As is well known, item growth and cost increases have been modest in recent years, driven by item and cost control in Primary Care. The picture changed dramatically in 2020, with item growth of between 2.4% and 3.1% in the large Guernsey practices. This was highly likely to have been in part as a result of some over-ordering, some stock-piling and anticipatory prescribing during the Spring COVID-19 outbreak.

In 2021 there were larger increases in prescribing and costs thereof. The costs of the 77 TAs approved pre-2021 were significant. There were significant increases in the use of new drugs, particularly the direct-acting oral anticoagulants in cardiology, new drugs in diabetes, and biologics. In 2021 more than 100 new TAs were approved for Bailiwick residents. In addition, the costs of many older drugs which had been available generically for several years rose sharply. This is highly likely to have been as a result of the uncertainty surrounding the withdrawal of the UK from the EU and the effect of repeated lockdowns in Asian countries.

Prescribing by all organisations

Cost and volume increases were higher than in previous years.

In Mental Health there were modest increases in items and significant reductions in cost, due mostly to part-correction of the prices of generic antipsychotics and antidepressants, which had been subject to price inflation.

However as stated earlier, the true cost of prescribing to “Guernsey PLC” shown below was reduced by rebates totalling £625K in the year to CfESS (negotiated and managed by the Prescribing Advisor).

Table 1, as follows, contains the details

Table 1: Prescribing by all Organisations 2021

Table 1: Organisation	Prescription items		Total net drug cost		Average net drug cost per prescription item	
	2021	Change from 2020	2021	Change from 2020	2021	Change from 2020
HEALTHCARE GROUP	520,360	3.9%	£4,414,953	5.6%	£8.48	1.7%
QUEENS ROAD MEDICAL PRAC	436,716	1.4%	£4,139,503	3.8%	£9.48	2.4%
MEDICAL SPECIALIST GROUP	36,382	12.7%	£4,136,000	51.7%	£113.68	44.6%
L'AUMONE AND ST SAMPSONS	456,579	4.0%	£4,064,068	6.6%	£8.90	2.6%
APPLIANCE Forms	12,039	13.1%	£1,008,207	12.0%	£83.75	-1.2%
HSC	4,969	16.2%	£718,170	30.4%	£144.53	16.9%
ISLAND MC Alderney	58,583	4.3%	£488,513	9.9%	£8.34	5.9%
PSYCHIATRIC SERVICES	12,280	-18.2%	£193,268	-19.8%	£15.74	-1.4%
SARNIA MEDICAL SERVICES LTD	12,236	-72.8%	£84,180	-89.8%	£6.88	-9.9%
CAMHS	3,403	11.7%	£80,185	4.8%	£23.56	-7.8%
EMERGENCY DEPARTMENT	4,099	16.3%	£34,448	25.6%	£8.40	11.2%
LES NICOLLES PRISON	2,668	-26.0%	£32,857	-37.1%	£12.32	-8.8%

Prescribing by Therapeutic Group

Table 2, below, contains the details, which are discussed in the following pages.

	Prescription items dispensed		Total net drug cost		Average net drug cost per prescription item	
	2021	% Change on 2020	2021	% Change on 2020	2021	% Change on 2020
Gastro-Intestinal System	139,090	3.7%	£850,749	19.5%	£6.12	16.4%
Cardiovascular System	488,848	1.9%	£2,806,456	5.4%	£5.74	3.6%
Respiratory System	94,439	-0.8%	£1,416,908	-0.9%	£15.00	-0.1%
Central Nervous System	254,485	2.0%	£2,139,891	-4.2%	£8.41	-6.4%
Infections	58,684	3.2%	£890,876	16.8%	£15.18	14.0%
Endocrine System	202,743	4.9%	£1,641,401	14.0%	£8.10	9.6%
Malignant Disease and Immunosuppression	10,607	9.3%	£3,631,167	50.8%	£342.34	45.8%
Nutrition and Blood	93,967	9.9%	£1,084,490	9.2%	£11.54	-0.8%
Musculoskeletal and Joint Diseases	55,491	0%	£1,867,593	12.4%	£33.66	10.50%

➤ Gastrointestinal (GI) system

There were significant increases in the number of GI items and a 19.5 % increase in total costs. The costs of generic antisecretory drugs and mucosal protectants being the main drivers once again. GI costs rose significantly and followed a 20.3% increase in costs in 2020.

The cost of anti-secretory drugs per quarter was as low as £30K in 2018 and in the latest quarter of 2021 had tripled to over £90K. Given the second lock down in China where many generics are made in large high-tech plants, this may not reverse for some considerable time if at all.

Reducing polypharmacy and deprescribing remained a priority to the extent possible in 2021. Proton Pump Inhibitors or PPIs, the main anti-secretory drugs, were targeted as being particularly important as there is concern about their link to osteoporosis and increased rates of the “super bug” *C Difficile*. The importance of crossing off unwanted items was again highlighted to islanders on a number of occasions in 2021.

Despite the fluctuations in generic prices in 2021 and increasing use of biologics, the cost remained lower than the early noughties. This was achieved by collaborative working by all concerned to achieve very high rates of generic prescribing, control of entry of new drugs, use of best value treatments and increasingly the sensible use of stopping rules for biologics. Despite the large percentage increases, in 2021 nearly twice the number of prescriptions were issued for two thirds of the cost than in 2004. In 2004 the annual cost was £1.03 million for 77,491 GI items, which gradually fell over the years to £851K for 139,090 GI items in 2021.

Table 3, as follows, contains the details of Gastrointestinal prescribing in 2021.

Table 3 GI Prescribing	Prescription items dispensed		Total net drug cost		Average net drug cost per prescription item	
	2021	Change from 2020	2021	Change from 2020	2021	Change from 2020
Antisecretory drugs and mucosal protectants	91,620	3.3%	£315,108	30.1%	£3.44	27.7%
Antispasmodics and other drugs altering gut motility	5,326	5.6%	£74,065	9.8%	£13.91	4.5%
Chronic bowel disorders	3,433	6.2%	£131,887	28.0%	£38.42	23.2%
Drugs affecting intestinal secretions	925	4.3%	£35,727	6.0%	£38.62	1.8%
Dyspepsia and gastro-oesophageal reflux disease	4,501	1.6%	£32,479	0.1%	£7.22	-1.5%
All GI	139,090	3.7%	£850,749	19.5%	£6.12	16.4%

➤ Cardiovascular system

There was an increase in item numbers in 2021 of 1.9%, with a 5.4% increase in total cost.

The main driver was however a significant increase in the use of the newer and more expensive direct oral anticoagulant or DOACs for atrial fibrillation, venous thromboemboli (blood clots) and now in secondary prevention. The list prices of these products have fallen by between 20 and 50%. And a rebate scheme is in place reducing the cost by a significant six-figure sum.

The cost of cardiovascular prescribing includes the dispensing of the blood product Factor 8 for people with haemophilia, where some headline savings were made. The cost per unit of Factor 8 when the products are bought via the NHS supply chain is said to be the lowest in the world.

The High Cost Drug Scheme has reduced the acquisition cost by dispensing products via PEH Pharmacy. In addition changes in treatments have also resulted in medicines optimisation and cost savings, reducing the actual cost to Guernsey PLC by a very significant six figure sum. These savings, which are commercially confidential, are not accounted for in the figures below.

Despite a doubling in the number of islanders treated with CV drugs and a large increase in the range and complexity, their actual cost to the taxpayer was less in 2021 than in 2000, just after the

PSU was established. The cost was £2.81 million (minus rebates and discounts) for 449K items in 2021 vs £2.42 million for 239K items in 2000.

Table 4, as follows, contains the details of the costs before discounts and rebates.

Table 4: Cardiovascular Prescribing	Prescription items dispensed		Total net drug cost		Average net drug cost per prescription item	
	2021	Change from 2020	2021	Change from 2020	2021	Change from 2020
Anti-arrhythmics	2,470	-1.2%	£18,226	-37.0%	£7.38	-35.4%
Anticoagulants and protamine	24,649	5.7%	£1,094,001	9.5%	£44.38	4.1%
Antifibrinolytic drugs	581	-1.2%	£467,647	9.1%	£804.90	10.2%
Antiplatelet drugs	36,753	0.3%	£59,035	3.6%	£1.61	3.3%
Beta-adrenoceptor blocking drugs	56,828	3.8%	£99,832	-2.1%	£1.76	-6.2%
Diuretics	53,170	-0.8%	£151,836	7.1%	£2.86	7.8%
Hypertension and heart failure	118,044	1.1%	£362,321	-7.9%	£3.07	-9.1%
Lipid-regulating drugs	111,563	3.2%	£241,930	4.5%	£2.17	1.4%
Nitrates, calcium- channel blockers & other antianginal drugs	81,173	1.9%	£277,853	7.6%	£3.42	5.8%
Positive inotropic drugs	3,216	-4.1%	£5,104	-4.0%	£1.59	0.1%
Sympathomimetics	401	3.7%	£28,672	-5.3%	£71.50	-9.4%
All CV	488,848	1.9%	£2,806,456	5.4%	£5.74	3.6%

➤ Respiratory system

There was a larger increase in numbers of prescriptions to treat respiratory disease in 2020 and their cost than in previous years. In 2021 there were moderate reductions, helped by a reduction in the costs of generic cromoglycate, leukotriene and phosphodiesterase type-4 inhibitors. Prescribing of inhaled corticosteroids and bronchodilators fell, perhaps confirming reports of some “anticipatory prescribing and/or dispensing” before and during the first lockdown. The increased use of one new drug for the management of severe asthma, omalizumab, levelled off somewhat in 2021. Respiratory costs are further reduced by one rebate. And two more were negotiated in 2021 as part of the NICE TA implementation work.

Table 5, as follows, contains the details.

Table 5: Respiratory Prescribing	Prescription items dispensed		Total net drug cost		Average net drug cost per prescription item	
	2021	Change from 2020	2021	Change from 2020	2021	Change from 2020
Antifibrinolytics (New treatments, so not prescribed in 2020)	3	N/A	£4,015	N/A	£1,338	N/A
Antihistamines, hyposensitisation and allergic emergencies	20,574	5.8%	£121,563	5.5%	£5.91	-0.3%
Bronchodilators	34,649	-4.5%	£308,207	-5.4%	£8.90	-0.9%
Corticosteroids (respiratory)	29,525	-2.6%	£791,094	-1.0%	£26.79	1.6%
Cromoglycate, leukotriene and phosphodiesterase type-4 inhibitors	6,536	4.2%	£14,922	-44.2%	£2.28	-50.5%
Mucolytics	3,135	3.2%	£177,079	4.7%	£56.48	1.5%
All Respiratory	94,439	-0.8%	£1,416,908	-0.9%	£15.00	-0.1%

➤ Central nervous system (CNS)

The number of CNS prescriptions increased in 2021 by 2%. But the total cost fell by 4.2% due to reduced prescribing of some expensive products and correction of generic prices that rose substantially in 2020.

There were 4.1% fewer prescription items for hypnotics and anxiolytics dispensed in 2021. Melatonin item numbers fell again. The prescribing of very high cost melatonin specials fell, avoiding an unknown sum in uplifts and carriage charges. Staff at CAMHS, Community pharmacy teams, MSG and GP colleagues were very supportive of this change. The savings from reduced prescribing of melatonin were again significant, island-wide the cost was £55K in 2021, compared with £146K in 2017 when costs were at their highest.

The prices of generic quetiapine and olanzapine rose sharply in 2020 and corrected somewhat in 2021.

The costs of generic antidepressants corrected and fell by 20.9% in 2021. Prescribing of antidepressants rose again by 4.4%, at a very slightly lower rate than in previous years. This slightly reduced rate may have been as a result of the effect of the lifting of lockdown on islanders' mental health or the introduction of Social Prescribing initiative or more publicity on the efficacy of self-care, self-help and non-pharmaceutical interventions for people with minor disease. However this figure includes 20,440 items of amitriptyline and nortriptyline which are no longer recommended for depression, but are recommended in various outputs by NICE for some types of persistent pain.

Guidelines on the use of antidepressants for anxiety and depression recommend their use as part of a course of treatment. For clinically-diagnosed mild to moderate depression, prescribing is recommended only after self-help strategies such as computerised CBT, increasing exercise and reduction in alcohol consumption have not been successful. People with more severe disease would be offered talking therapy, advice on self-help as well as an anti-depressant. Further advice from NICE on extending the recommendations on self-help before prescribing and agreeing exit strategies was published in early 2022.

The Prescribing and Formulary Panel recommended the removal from the Prescribing List of trimipramine for depression and alimemazine for allergies, as well as liothyronine in May 2019. These were older drugs subject to excessive price inflation by the manufacturers with several better value evidenced based alternatives available. The annual total cost of these drugs combined was £145K at their peak in 2016, no prescribing of these medicines took place in 2021.

Also on the advice of the Prescribing and Formulary Panel, Lidocaine plasters were restricted to their licensed indications or when prescribed by the Pain Clinic for peripheral neuropathic pain in 2017. This decision has also resulted in significant real savings. The cost of these plasters is gradually increasing again. It was £163K in 2016, £87K in 2017 and £62K in 2018, £71K in 2019, £88K in 2020 and £91K in 2021.

Every effort has been made in recent years to contain costs where clinically appropriate and evidence-based, without compromising care. Activity data on anxiolytic, hypnotic and opioid analgesic prescribing has been prepared and circulated at GP practice and doctor level for several years and is used in doctors' appraisals.

Table 6, as follows, contains the details on CNS Prescribing

Table 6: CNS Prescribing	Prescription items dispensed		Total net drug cost		Average net drug cost per prescription item	
	2021	Change from 2020	2021	Change from 2020	2021	Change from 2020
Analgesics	57,397	1.3%	£625,861	6.1%	£10.90	4.8%
Antidepressant drugs	117,910	4.4%	£428,388	-20.9%	£3.63	-26.4%
Antiepileptic drugs	19,999	0.7%	£292,954	5.5%	£14.65	4.9%
CNS stimulants and drugs used for ADHD	2,729	13.7%	£114,634	15.0%	£42.01	1.5%
Drugs for dementia	3,352	-11.3%	£89,302	-24.8%	£26.64	-12.1%
Drugs used in nausea and vertigo	7,748	1.9%	£55,101	-16.8%	£7.11	-19.1%
Drugs used in parkinsonism and related disorders	6,050	6.1%	£188,358	1.4%	£31.13	-5.0%
Drugs used in psychoses and related disorders	12,133	-0.6%	£85,868	-10.0%	£7.08	-9.3%
Drugs used in substance dependence	2,503	-16.0%	£119,359	-32.6%	£47.69	-14.3%
Drugs used in the treatment of obesity	466	11.4%	£11,135	-1.6%	£23.89	-14.6%
Hypnotics and anxiolytics	24,198	-4.1%	£128,931	3.4%	£5.33	7.2%
All CNS	254,485	2.0%	£2,139,891	-4.2%	£8.41	-6.4%

➤ Infections

There was another fall in the numbers of drugs used to treat all infections and in their costs.

The number of antibacterials prescribed in the Bailiwick fell by 14% in 2020, but unfortunately costs rose because older drugs that are normally cheap and are off-patent rose sharply in price. In 2021 there were modest increases in items and cost. HSC Infection Control, HSC Pharmacy and the PSU have all worked closely together and with colleagues in partner organisations to improve antimicrobial stewardship for many years to reduce the use of all antibiotics in general and broad spectrum antibiotics in particular, where appropriate and safe to do so.

New guidelines on antimicrobials in adults, based on Birmingham guidelines, were published and were added to the Microguide app in 2019. They were updated and published in early 2022. Feedback on Microguide has been very good.

Despite demographic changes in recent years, the number of antibiotic items dispensed by Primary Care practices in Guernsey and Alderney has fallen every year since 2014, eg from 54,550 in 2014 to

38,889 in 2020 to 37,025 in 2021. A further fall in primary care prescribing following a reduction in 2020 demonstrated a real commitment to antimicrobial stewardship.

Prescribing of antivirals rose and the cost increased by over £150K compared with 2020. Some of this will be reduced by the PEH pharmacy purchasing Hep C treatments at the highly discounted price obtained via the NHS supply chains. However there are plans for further medicines optimisation prescribing reviews in this area for 2022, which are expected to further reduce prescribing costs. Nearly £70K was saved by negotiating with the NHSBSA that that all prescriptions of the best value HIV treatment emtricitabine/tenofovir disoproxil would be priced at the cost of the best value generic.

Table 7, as follows, contains the details on prescribing for people with infections.

Table7 Prescribing for Infections	Prescription items dispensed		Total net drug cost		Average net drug cost per prescription item	
	2021	Change from 2020	2021	Change from 2020	2021	Change from 2020
Anthelmintics	113	-49.6%	£168	-55.2%	£1.49	-3.8%
Antibacterial drugs	46,034	3.7%	£279,052	2.3%	£6.06	-1.5%
Antifungal drugs	4,621	6.0%	£20,281	-23.6%	£4.39	-31.5%
Antiprotozoal drugs	3,320	-6.7%	£14,915	-13.8%	£4.49	-6.6%
Antiviral drugs	4,596	4.2%	£576,461	26.0%	£125.43	22.8%
All Infections	58,684	3.2%	£890,876	16.8%	£15.18	14.0%

➤ Endocrine disorders

High rates of generic prescribing and limited use of new treatments had kept increases in items and costs at moderate levels for many years. However in 2020 and again in 2021 there was an approximately 20% increase each year in the cost of drugs for diabetes, to £962K plus fees in 2021. This was driven mainly by new oral treatments for Type 2 diabetes.

PSU with Secondary Care worked on reducing inappropriate prescribing of test strips for several years with providing updates and education in the form of bulletins, workshops and letters. Updated advice from the Prescribing and Formulary Panel was issued on the use of test strips for blood glucose in 2020, recommending more cost effective products and advising on the lack of benefit of self-monitoring of blood glucose in people with Type 2 diabetes on oral treatments. Prescription numbers and total cost fell. In 2021 the cost was £66K plus fees lower than in 2015/2016, as follows.

Table 8A Test strips and monitoring	Prescription items dispensed	Net drug cost	NIC/ item
2014	6,683	£199,066	£29.79
2015	6,574	£205,379	£31.24
2016	6,333	£206,483	£32.60
2017	6,405	£207,567	£32.41
2018	6,222	£190,685	£30.65
2019	5,649	£170,682	£ 30.21
2020	5,504	£165,396	£30.05
2021	4,938	£141,700	£28.70

The use of FreeStyle Libre and the cost almost doubled between 2020 and 2021, from £106K to £188K. The cost of insulin remained the same at £260K approximately. Outcome data on FreeStyle Libre, which will be of great interest once available, are expected in the coming years.

The little-used alternative thyroid agent, liothyronine, has been subject to excessive price inflation by the manufacturer. Following advice from the PSU, prescribing had been gradually reduced over the past two years, suggesting that new patients are not being started on it and that some patients already on it are being stopped. With the strong support of the Consultant Endocrinologist and the Consultant Head and Neck Surgeon, the Prescribing Formulary Panel recommended that this product's removal from the Prescribing List in May 2019. The cost of liothyronine prescribing was £66K at its peak in 2016, which fell to zero in 2020. This £66K was another "real" saving and the sum has been available every year since then to support the funding of treatments with better evidence to support them.

The cost of prescribing of sex hormones rose again in 2021, reflecting the NICE NG that HRT is a safer and more effective treatment for menopausal symptoms than considered previously.

Details on the prescribing of drugs for endocrine disorders are as follows in Table 8.

Table 8: Endocrine Prescribing	Prescription items dispensed		Total net drug cost		Average net drug cost per prescription item	
Class of drug	2021	Change from 2020	2021	Change from 2020	2021	Change from 2020
Corticosteroids (endocrine)	12,898	1.9%	£68,282	-15.3%	£5.29	-17.6%
Drugs affecting bone metabolism	9,003	0.1%	£126,756	-9.7%	£14.08	-9.8%
Drugs used in diabetes	57,296	6.3%	£961,389	20.7%	£16.78	15.3%
Hypothalamic and pituitary hormones and anti-oestrogens	685	14.5%	£118,069	25.1%	£172.36	12.4%
Other endocrine drugs	127	-3.9%	£8,487	23.0%	£66.83	25.9%
Sex Hormones	33,006	11.3%	£196,997	13.5%	£5.97	2.5%
Thyroid and	89,728	2.5%	£161,421	-2.4%	£1.80	-5.0%

antithyroid drugs						
All Endocrine	202,743	4.9%	£1,641,401	14.0%	£8.10	9.6%

➤ Malignant Disease and Immunosuppression

Many new drugs were approved for the oral treatment of malignant disease for people in the community and the costs thereof, before discounts, rose by 50% to £3.631 million. There was a significant increase in the numbers of the prescriptions of sex hormones and hormone antagonists in malignant disease. Many were approved following the States of Guernsey vote on automatically approving all NICE TAs via a rolling programme.

Details are in Table 9 as follows

Table 9: Malignant Disease	Prescription items dispensed		Total net drug cost		Average net drug cost per prescription item	
	2021	Change from 2020	2021	Change from 2020	2021	Change from 2020
Cytotoxic drugs	1,428	20.1%	£1,161,301	71.8%	£813.24	64.8%
Drugs affecting the immune response	3,151	9.9%	£1,727,342	51.4%	£548.19	46.1%
Sex hormones and hormone antagonists in malignant disease	6,028	6.4%	£742,523	16.4%	£123.18	10.7%
All Malignant Disease Drugs	10,607	9.3%	£3,631,167	50.8%	£342.34	45.8%

➤ Nutrition and Blood

Primary and Secondary Care, Pharmacy and Dietetics have for many years worked closely together to ensure that nutrition products are used appropriately and that, where there is a choice, the best value products are used. A Community Dietician was appointed in late 2018 and since then her expertise has been in great demand from colleagues to review patients, prepare guidelines and deliver presentations on all nutrition matters, including Cows' Milk Allergies in infants and enteral feeds in adults in the practices. In 2109 there were 261 prescriptions at a cost of £68,657 for the most expensive products. This fell to 183 costing £44,735 in 2020. There was greater emphasis on a "food first" approach and increased use of starter packs and lower cost shake-type products.

However in 2021 costs and prescription numbers rose significantly. Possibly as a consequence of the COVID-19 pandemic and/or the increasing prevalence of obesity in the community, more cancers seemed to have presented and presented at more advanced stages than might have been expected. There was also an unexplained spike in diagnoses of two severe neurological conditions.

Table 10, as follows, contains the details

Table 10 Nutrition and Blood	Prescription items dispensed		Total net drug cost		Average net drug cost per prescription item	
Class of drug	2021	Change from 2020	2021	Change from 2020	2021	Change from 2020
Anaemias	32,298	10.6%	£236,790	9.7%	£7.33	-1.0%
Oral nutrition	8,270	1.6%	£468,112	8.2%	£56.60	6.7%
Vitamins	43,146	11.1%	£219,124	16.4%	£5.08	6.0%
All	93,967	9.9%	£1,084,490	9.2%	£11.54	-0.8%

➤ **Musculoskeletal and joint disease**

Musculoskeletal prescribing cost increases were attributable to increased cost of the biologic products, some of which were new NICE TAs. The use of biosimilar products or products significantly reduced in price to match biosimilar equivalents, reduced the true cost to the Health Fund by a large six figure sum in the year.

Table 11, as follows, contains the details.

Table 11: Musculoskeletal and Joint Disease	Prescription items dispensed		Total net drug cost		Average net drug cost per prescription item	
Class of drug	2021	Change from 2020	2021	Change from 2020	2021	Change from 2020
Drugs used in neuromuscular disorders	1,436	4.6%	£15,309	1.2%	£10.66	-3.6%
Drugs used in rheumatic diseases and gout	41,180	2.5%	£1,769,300	12.8%	£42.97	10.5%
Drugs for soft tissue disorders and topical pain relief	12,875	0.15%	£82,984	6.1%	£6.45	5.6%
All	55,491	0	£1,867,593	12.4%	£33.66	10.50%

➤ **Changes over time**

In the first full year of operation of the Prescribing Support Unit, 2000, the cost per prescription item was £10.42. It then rose to £11.53 in 2004. In 2021 it was £12.40 per item before deduction of rebates to CfESS and NHS discounts to CfHSC.

D. Prescribing Support Unit Activities in 2021

The role of the Prescribing Support Unit is to:

- Provide unbiased information on the evidence-based use of drugs to manage, influence and support cost-effective prescribing
- Provide feedback and prescribing data to individual prescribers and prescribing organisations
- Manage the entry of new drugs via the Prescribing and Formulary Panel
- Provide prescribing and other data to groups and individuals such as the local print, broadcast and social media, Primary Care, Immunisation and Vaccination Committee, the Drug and Alcohol Strategy Co-ordinator and the Potentially Addictive Prescription Only Drugs Committee.

All were maintained to the extent possible throughout the year. Details of the above, plus other projects undertaken in 2021, are as follows

➤ **Prescribing Panels**

In May 2018 the CfHSC and CfESS approved the formation of one island-wide panel, the Prescribing and Formulary Panel, to review and to make recommendations for approval of new drugs, to disinvest in poor value products and to agree guidelines on prescribing.

There were 35 applications for individual products for approval in 2021, some were reconsiderations of products already considered. Of the 35 products requested, 26 were approved.

An accurate estimate of the cost avoidance of the drugs declined for prescribing is difficult to make. Alternative treatments, not all pharmacological, of varying costs and in different care settings may have been offered. There may have been extra monitoring costs associated with the new drugs or potential savings by reduced use of secondary care facilities.

➤ **NICE Medicines and Prescribing Associate Programme**

There was no reaccreditation conducted in 2021 due to the COVID-19 pandemic and the widespread disruption to all aspects of the NHS. The team at NICE continued the usual face-to-face days on-line and in abbreviated formats. Face to face meetings were reinstated in 2022.

➤ COVID-19

The outbreak continued to have an effect on the islands, their healthcare system and especially the pharmaceutical service. Community pharmacists and their teams worked tirelessly in the most challenging and unprecedented of circumstances to maintain this vital service for their patients.

There was an unexpected lock down in January 2021 which, along with strict border controls, impacted on the islands' pharmacies and their staffing. To support the community, the funded prescription delivery service was reintroduced. This resulted in several hundred fewer return journeys to pharmacies, including the hospital pharmacy, and received excellent feedback from islanders and staff.

➤ Prescribing and Dispensing Audits

As in previous years audits were conducted in 2021 into all aspects of prescribing and dispensing. The NHSBSA, formerly known as the Prescription Pricing Authority, upgraded its cost and analysis system, EPACT2 in 2018. It has improved functionality to allow users to access more detailed prescribing and dispensing data. It is also gradually increasing the data set held from 5 years to 10 years. The PSU has been using EPACT data and benefiting from it since pre-1999. Close professional links with the NHSBSA Data Specialists, Pharmacists and others remained a greatly valued source of information, advice and support.

EPACT2 now provides more information and improved functionality with respect to drug pricing and charging for non-standard formulations or specials and products without a single fixed price. All prescribing was checked monthly on receipt of data from the NHSBSA. Doctors were written to with recommendations for switches to better value treatments where appropriate. Where costs were deemed excessive, the Prescribing Panel has in the past recommended changes to alternative products.

➤ Rebates and discounts

Costs of new drugs in the NHS are reduced by a series of complex rebates, discounts and patient access schemes. This is to satisfy patient demand for new drugs in the UK and to make them available at a price that might be affordable in the NHS. There are numerous supporting processes in the NHS including electronic prescribing, BlueTech, more hospital dispensing and dispensing Homecare Companies owned exclusively by the NHS.

Without these processes, rebates in the Bailiwick are far more complex to set up, to manage and to monitor. But every effort is always made to ensure that all of the rebates obtained in the NHS are obtained on behalf of the Bailiwick taxpayer by pharmacy.

➤ Inpatient Deprescribing Audits and Interface / Discharge Pharmacy Business Case

In late 2018 the then Chief Pharmacist and a Consultant Geriatrician, conducted an audit on inpatient prescribing in Victoria Wing and Carey Ward to check what products might be appropriate for deprescribing. The report was published in early 2019. In September 2019 the audit was

repeated on two surgical wards, two medical wards and the rehabilitation ward, Le Marchant. Due to time constraints and the imminent retirement of the Chief Pharmacist the second audit was less detailed than the first.

The findings of the first audit were that, in 20 patients, 30 drugs would be recommended for deprescribing. Potential savings would be £450 per month or £5,400 per year for 20 patients. In the second audit 73 patients were reviewed, 14 drugs were considered to be suitable for deprescribing. Potential savings would be £254 per month or £3,048 per year.

The reviewers calculated that if the samples seen were representative of the current position in the general population, savings generated from deprescribing would be between £185K and £1.2 million per year. The latter figure was based on the more detailed 2018 audit. The actual savings from deprescribing would be a part only of anticipated larger savings by active intervention at the interface between care settings. This would also reduce stockpiling of unwanted pharmaceuticals in homes, where it is a public health issue. The authors' recommendations included the investment in an interface pharmacy service and the sharing of the results with the wider community.

As a result of this audit, a business case for the pharmacy roles has been submitted for two pharmacists and two pharmacy technicians in late 2020. Though this was supported, funding was not identified in 2021. The business case will be resubmitted in 2022 for consideration of funding.

➤ Reducing wastage and polypharmacy

An important part of reducing wastage in the pharmaceutical service is disinvesting in high cost and low value products. As a result of evidence based medicines optimisation, prescribing was considerably reduced or stopped all together in products such as melatonin for insomnia for adults in primary care, liothyronine for thyroid disease, trimipramine for depression, alimemazine for allergies, lidocaine plasters in chronic pain, fish oils for cardiac disease, glucosamine for OA and specials. These measures resulted in real on-going significant savings.

Patients and community pharmacy staff have a central role to play in reducing wastage. Checks throughout the year showed that islanders, as well as pharmacy staff, continued to cross unwanted items off prescription forms, as advised on the back of prescription forms. The number of items per prescription form dispensed in 2021, remained the same as 2020. Details are as follows, in Table 12.

Table 12: Items per drug prescription form

Year	Items	Forms	Items per form
2015	1,471,888	682,269	2.16
2016	1,464,363	706,820	2.07
2017	1,450,609	721,442	2.01
2018	1,465,922	729,441	2.01
2019	1,485,554	746,062	1.99
2020	1,517,568	747,395	2.03
2021	1,565,246	770,931	2.03

➤ **Biosimilars**

Many of the expensive biologics dispensed in the community for arthritis, inflammatory bowel disease and psoriasis are available as lower priced biosimilars. In some cases the original product is discounted to match the cost of the biosimilar. As discussed previously, a biosimilar policy was agreed in late 2014 across Primary and Secondary Care. This was considered in the NHS to be an important opportunity to save money. Biosimilar specialist pharmacists and nurses were appointed in trusts to manage their introduction. The NHS initially set a target of saving £350 million per year by the use of biosimilars. Local savings in excess of £700K in 2021 were achieved without any extra expenditure on infrastructure or staff in Primary or Secondary Care.

➤ **States vote on Review by Solutions for Public Health**

A States debate on the islands' drug funding policy took place in January 2020, with Deputies voting to fund all NICE Technology Appraisals via a rolling programme. A large complex piece of work preceded this. The Chief Pharmacist, the Pharmacy Services Manager and the Prescribing Advisor all provided extensive expert advice, information, comment on the design and support to the reviewers. The expert input of a local Consultant Pharmacist was obtained. In 2021 the first NICE TAs were approved and the drugs made available to patients.

➤ **Prison pharmacy**

Outside of lockdown, the Prescribing Advisor continued to visit the prison once per week to support the excellent work of the Prison Healthcare team, to do audits and to review the treatments of admitted people. Pharmacists' input in secure environments is being increasingly required in the UK given the complex care needs of the population and the issues of misuse of prescribed drugs.

➤ **MicroGuide**

The new Guernsey and Alderney antibacterial guidelines were added to an app in Spring 2020 by SOG pharmacists. The app was developed for use on mobile phones or tablet devices. Updates guidelines were added on May 2022.

➤ **Prescribing data for GP activity reports**

This was downloaded, collated and sent to Primary Care for use in doctors' appraisals in early 2021. It was encouraging to see improvements every year in the quality of antibiotic, opioid and hypnotic and anxiolytic prescribing in Primary Care. These are real benefits for the health of the community as a whole.

Island-wide, in 2021, there were further improvements in the prescribing of hypnotics and anxiolytics as follows. There were marginal increases in the prescribing of opioids and antibacterials, now possibly linked to increases in cancer cases and the ageing population. Prescribing inevitably increases.

Table 13: Opioid Prescribing 2014 to 2021

Year	Opioid Items	Opioid NIC
2014	20,874	£350,472
2015	20,467	£351,368
2016	19,958	£351,450
2017	18,049	£305,411
2018	17,091	£286,829
2019	17,267	£267,529
2020	17,017	£248,601
2021	17,177	£240,632

Table 14: Antibacterial Prescribing 2014 to 2020

Year	Antibacterial Items	Antibacterial NIC
2012	66,435	£294,824
2013	60,733	£264,033
2014	59,386	£275,986
2015	56,765	£302,839
2016	55,969	£264,156
2017	53,689	£240,235
2018	53,472	£230,804
2019	51,535	£243,272
2020	44,332	£272,752
2021	46,034	£279,052

Table 15: Hypnotic and Anxiolytic Prescribing 2014 to 2020

Year	Hypnotic and Anxiolytic Items	Hypnotic and Anxiolytic NIC
2014	29,976	£210,653
2015	29,563	£231,497
2016	28,852	£187,755
2017	28,294	£211,396
2018	27,059	£163,228
2019	25,280	£120,582
2020	25,200	£124,557
2021	24,198	£128,931

➤ **High cost drugs**

A Senior Pharmacy Technician was appointed in late 2018 to manage the transition of some very high costs drugs from community to hospital dispensing. This work realised large savings again in 2021, as discussed previously.

➤ **NICE TAs**

In January 2020 the States of Guernsey debated possible changes to drug funding policy. The gap between what drugs are available in the UK and those available in the Bailiwick was considered too wide to be acceptable. Deputies voted to fund all NICE TAs via a rolling programme. Deputies also voted to fund the implementation programme. Due to the COVID-19 outbreak, implementation began in November 2020. Since January 2019, approximately 82 new TAs have now been approved for use via the rolling programme and as “business as usual” and have been added to the Prescribing List or the Hospital Formulary.

➤ **Health Benefit Transfer**

In May 2020 the States approved the transfer of responsibility for all health-related benefits, including pharmaceutical benefits, from CfESS to CfHSC. Senior pharmacy staff and other officers in both committees have been working closely together since the PSU was established in 1999. There should also be minimal if any changes to the day-to-day service given to our customers.

➤ **Priorities in 2022**

There are many uncertainties remaining about the health-related effects of the COVID-19 outbreak and any further waves in 2022. These include the cost of managing the outbreak, whether or not a third wave occurs and its effects, whether or not the virus mutates, and if drug treatment(s) as approved. There are still many uncertainties about the financial implications of BREXIT.

The following are the priorities for the rest of the year

- Reducing Polypharmacy and improved Deprescribing
- Implementing the Interface and Discharge Pharmacy Services
- Prescribing and dispensing audits
- Management of high-cost drugs
- Refining the merge of primary and secondary care pharmacy budgets
- Continued implementation programme for year 2 NICE TAs

➤ **Future savings**

Reductions in the use of the products discussed throughout this report will mean that costs in future years will be significantly lower than if this work had not been done. However increased monitoring will be required the medium term to ensure that these gains will not be lost. There will be opportunities for savings from projects such as high-cost drugs, specials, biosimilars, test strips, deprescribing and reducing polypharmacy, as well as reducing the use of drugs of concern and wastage.

Geraldine O’Riordan
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August 2nd 2022