

Government pledges to reduce overprescribing of medicines

- Government-commissioned review estimates 10% of items dispensed in primary care are overprescribed with 15% of people taking five or more medicines a day, increasing the risk of adverse effects
- Around 1 in 5 hospital admissions in over-65s are caused by the adverse effects of medicines
- Ministers accept all recommendations including introducing a new national clinical director for prescribing, increased use of social prescribing and better handovers between hospitals and the community

The Government will take action to prevent medicines being prescribed unnecessarily in England, as a new review highlights the impact of overprescribing.

Led by Chief Pharmaceutical Officer for England Dr Keith Ridge CBE, the government-commissioned review into overprescribing – published today – found 10% of the volume of prescription items dispensed through primary care in England are either inappropriate for that patients' circumstances and wishes, or could be better served with alternative treatments.

Overprescribing describes a situation where people are given medicines they do not need or want, or where potential harm outweighs the benefit of the medication. It can happen when a better alternative is available but not prescribed, the medicine is appropriate for a condition but not the individual patient, a condition changes and the medicine is no longer appropriate, or the patient no longer needs the medicine but continues to be prescribed it.

Around 1 in 5 hospital admissions in over-65s and around 6.5% of total hospital admissions are caused by the adverse effects of medicines. The more medicines a person takes, the higher chance there is that one or more of these medicines will have an unwanted or harmful effect. Some medicines, such as those to reduce blood pressure, can also increase the risk of falls amongst the frail and elderly.

The review sets out a series of practical and cultural changes to make sure patients get the most appropriate treatment for their needs while also ensuring clinicians' time is well spent and taxpayer money is used wisely. This includes shared decision making with patients about starting or stopping a medicine, better use of technology, ways to review prescriptions more effectively, and considering alternative medicines which would be more effective.

Ministers have accepted all recommendations and work will now begin to implement them, with reforms to pharmacist training already underway.

Health and Social Care Secretary Sajid Javid said:

This is an incredibly important review which will have a lasting impact on people's lives and improve the way medicines are prescribed.

With 15% of people taking 5 or more medicines a day, in some cases to deal with the side effects of another medicine, more needs to be done to listen to patients and help clinical teams tackle overprescribing.

I look forward to working with Dr Keith Ridge and our dedicated NHS teams to deliver on these recommendations.

Dr Keith Ridge CBE, chief pharmaceutical officer for England, said:

Medicines do people a lot of good and the practical measures set out in this report will help clinicians ensure people are getting the right type and amount of medication, which is better for patients and also benefits taxpayers, by preventing unnecessary spending on prescriptions.

This report recognises the strong track record of the NHS in the evidence-based use of medicines, thanks to the clinical expertise of GPs and pharmacists and their teams, and our achievements to date in addressing overprescribing which is a global issue.

Continuing to tackle overprescribing requires a whole system approach involving clinicians and patients, so we can continue to build the change we all wish to see in how medicines are used for the benefit of patients, and with medicines production and use a major driver of greenhouse gas emissions – contributing to the NHS's net zero ambition.

The key recommendations from the review are:

- the introduction of a new National Clinical Director for Prescribing to lead a 3 year programme including research and training to help enable effective prescribing;
- system-wide changes to improve patient records, improve handovers between primary and secondary care, develop a national toolkit and deliver training to help general practices improve the consistency of repeat prescribing processes;
- improving the evidence base for safely withdrawing inappropriate medication (deprescribing), and updated clinical guidance to support

more patient-centred care. This would include ensuring GPs have the data and medical records they need, and are empowered to challenge and change prescribing made in hospitals;

- cultural changes to reduce a reliance on medicines and support shared decision-making between clinicians and patients, including increasing the use of social prescribing, which involves helping patients to improve their health and wellbeing by connecting them to community services which might be run by the council or a local charity.
- providing clear information on the NHS website for patients about their medication and the creation of a platform for patients to be able to provide information about the effectiveness and the adverse effects of their medicines; and
- the development of interventions to reduce waste and help deliver NHS's net zero carbon emissions. The review also calls for more research to investigate the reasons why overprescribing is more likely to affect older people, people from ethnic minority communities and people with disabilities.

Health Minister Lord Syed Kamall said:

This vital review is a significant step forward which will benefit patients across the country, and we will help ensure busy primary care teams are supported with improved systems and resources.

Whether it's helping to change a culture of demand for medicines that are not needed, providing better alternatives and preventing ill-health in the first place, we will take a range of steps to act on this review.

The review concludes that key to stopping overprescribing is ensuring that patients are prescribed the right medicines, at the right time, in the right doses – known as 'medicines optimisation'. It also notes that reducing overprescribing will help the NHS fulfil its commitment to become carbon net zero, as the production and use of some medicines can generate significant greenhouse gas emissions. Currently, 25% of the NHS carbon footprint is as a result of medicines, some of this is down to the use of anaesthetic gases and inhalers, however it is mostly caused by the manufacturing and freight in the supply chain.

The causes of overprescribing medicines are complex due to a range of systemic and cultural factors. Significant progress has been made in this area in recent years, thanks to the hard work of GPs, pharmacists and their teams.

This includes the rapid expansion of clinical pharmacists working alongside GPs to review medication, and the move to more personalised care, shared decision making between patients and staff and the scaling up of social prescribing.