Respiratory Dashboard

Version: May 2018

Comparator Descriptions and Specifications

Contents

Background

Respiratory prescribing is highly complex, with a huge variety of inhalers and medicines available. There are several illnesses affecting the respiratory system, but the main two areas of interest for this dashboard are asthma and chronic obstructive pulmonary disease (COPD). Patients with other illnesses will be included in the results of the comparators, but the group has not considered the evidence for illnesses other than asthma and COPD.

Purpose

The purpose of this dashboard is to allow prescribers to see some clinically appropriate comparators that have been developed by clinicians to support better prescribing. The comparators do not show 'good' or 'bad' prescribing, but allow users to see variation and identify areas of interest for further investigation and/ or patient review.

Limitations

Historically, primary care prescribing information was derived from the reimbursement processes for dispensed medicines. However, the NHSBSA is now able to capture extra information that undoubtedly adds value to prescribing measures. The NHS number of the recipient of a medicine prescribed in primary care can now be linked to items prescribed. This development enables the data to show how many patients are prescribed a medicine or group of medicines (rather than presentation of drugs prescribed by each GP practice). In this way, we are able to demonstrate much better the quality of prescribing in key areas.

NHS number is routinely captured through the Electronic Prescription Service (EPS) with complete accuracy. Therefore, CCGs are encouraged to drive up the uptake of EPS. To support this improvement, EPS levels will be included alongside the comparators.

Information governance is very important and in the preparation of these comparators all data protection legislation and patient confidentiality has been carefully considered and adhered to. While the comparators are derived from patient level records, personal identifiable data will not be included within the reports.

Each comparator has a full specification outlining the evidence base behind the comparator; the rationale for inclusion and the data source (see Table 1 for list of comparators).

This comparator specification document is NOT a prescribing guideline. It simply shows how the comparators were developed and the rationale behind each comparator.

Table 1: List of comparators

Comparator Title
High dose ICS items as a % of all ICS items
Inhaled steroid prevention including ICS LABA
Prescribing of montelukast
Prescribing frequency of prednisolone 5mg tablets
Prescribing of smoking cessation products inc. nicotine replacement (NRT), varenicline and bupropion
Excess SABA prescribing
Patients on triple therapy

Prescribing data used in these comparators

Users of these comparators must be aware of the following parameters:

- Covers all items prescribed in primary care by practices and cost centres linked to CCGs. It includes acute and repeat items.

- Does not include hospital prescribing.

- Does not include medicines supplied over the counter.

- Does not include medicines supplied by NHS community services.

- Data restricted to prescription items where the NHS number could be identified for the patient.

Each comparator is derived using prescribing data and reported by month, although some figures may be based on a 12 month rolling period. Historic data is available to allow CCGs and Practices to chart their progress in addressing a particular comparator area.

All of the comparators show monthly data at Practice level (aggregated to CCG level) and are available for all patients.

Patient counts: Some comparators are based on a number of unique patients. This has been determined from prescriptions where the NHSBSA has been able to obtain details regarding patient NHS number and age at practice location. Where the same patient appears in the data for more than one practice location they will be counted as one patient for each of the practice locations they appear in.

NB: While NHS numbers are used to formulate these comparators, no personal identifiable data will be released through these comparators.

How to use these comparators

We envisage that the comparators will be used by CCGs in collaboration with local GP practices and with the relevant and appropriate education and training support in place.

Data Source: NHS Business Services Authority - based on data from the NHSBSA's data warehouse system which contains all NHS prescription data, with the exception of prescriptions which are dispensed in prisons, hospitals and private prescriptions.

Analysis is based on drugs that were reimbursed by the NHSBSA. It excludes items not dispensed and disallowed. If a prescription was issued, but not presented for dispensing or was not submitted to NHS Prescription Services by the dispenser, then it is not included in the data provided.

Data owner & contact details: nhsbsa@nhs.net

Time Frame: Refreshed monthly

Data quality assurance

NHS Prescription Services have their own internal quality process to assure the data they provide matches what was originally submitted as part of the prescription processing activity. Some processes are complex and manual therefore there may be random inaccuracies in capturing prescription information which are then reflected in the data but checks are in place to reduce the chance of issues occurring. The processes operate to a number of key performance indicators, one of which is the percentage Prescription Information Accuracy, the target being 99.3% and as of October 2017 prescribing, the accuracy level achieved over the latest 12 month rolling period was 99.62%.

The comparators take advantage of the developments linking the NHS number to prescription items. Currently, nearly 95% of all paper prescription items can be linked to an NHS number with an accuracy of over 99%. Age and date of birth can be linked to 73% of paper prescription items with an accuracy of 97%. As the utilisation of EPS increases, the coverage and accuracy of this data will increase.

Respiratory Comparator Specifications

High dose ICS items as a % of all ICS items

Section 1: Introduction / Overview		
1.1	**Title**	High dose ICS items as a % of all ICS items
1.2	**Definition**	Identifying the level of 'high dose' ICS prescribing as a percentage of prescribing for all ICS products.
1.3	**Reporting Level**	Practice level (aggregated to CCG).
1.4	**Numerator**	Total number of 'high dose' ICS items prescribed during a single month.

The 'high dose' ICS items have been defined based on the following BNF presentations:

BNF Presentation	BNF Code
Aerivio Spiromax_Inh 500/50mcg (60D)	0302000N0BHAAAZ
Aerobec Fte 250_Autohaler (200 D)	0302000C0BEABAU
AirFluSal_Inh 250mcg/25mcg (120D)	0302000N0BGACBG
Aloflute_Inh 250mcg/25mcg (120D)	0302000N0BJABBG
Asmabec Clickhaler_D/P Inh 250mcg(100 D)	0302000C0BIAFBK
Asmabec Spacehaler_Inha 250mcg (200 D)	0302000C0BIACBC
Asmanex Twisthaler_D/P Inh 400mcg (30 D)	0302000R0BBACAC
Asmanex Twisthaler_D/P Inh 400mcg (60 D)	0302000R0BBADAD
Beclazone 200_Inha 200mcg (200 D)	0302000C0BFAGAR
Beclazone 250 E-Breathe_Inha 250mcg(200D	0302000C0BFAFAU
Beclazone 250_Inha 250mcg (200 D)	0302000C0BFACAC
Becloforte E-Breathe_Inha 250mcg (200 D)	0302000C0BBAIAU
Becloforte Integra_Inha 250mcg + Spacer	0302000C0BBAGAY
Becloforte Integra_Inha 250mcg Ref	0302000C0BBAHAZ
Becloforte_Disk 400mcg & Diskhaler	0302000C0BBACAJ
Becloforte_Disk 400mcg Ref	0302000C0BBADAQ
Becloforte_Inha 250mcg (180 D) (Import)	0302000C0BBAJBT
Becloforte_Inha 250mcg (200 D)	0302000C0BBAAAC
Becloforte_Inha 250mcg (80 D)	0302000C0BBAEAX
Becloforte-VM_Inha (80 D) + Volumatic	0302000C0BBAFA0
Beclomet Diprop_Inha 250mcg (180 D)	0302000C0AABTBT
Beclomet Diprop_Inha 250mcg (200 D) CFF	0302000C0AABWBW
Beclomet Diprop_Inha 250mcg (200 D) Ref	0302000C0AAAZAZ
Beclomet Diprop_Inha 250mcg (200 D)+Spac	0302000C0AAAYAY
Beclomet Diprop_Inha 250mcg (200D)	0302000C0AAACAC
Beclomet Diprop_Inha 250mcg (80 D)	0302000C0AAAXAX
Beclomet Diprop_Inha 250mcg 200 D+V/Spac	0302000C0AABCBC
Beclomet Diprop_Inha 400mcg (100 D)	0302000C0AABPBP
Beclomet Diprop_Inha B/A 250mcg (200 D)	0302000C0AAAUAU
Beclomet Diprop_Inha B/A 400mcg (100 D)	0302000C0AABSBS
Beclomet Diprop_Pdr For Inh 250mcg(100 D	0302000C0AABKBK
Beclomet Diprop_Pdr For Inh Cap 400mcg	0302000C0AAAIAI
Beclomet Diprop_Pdr Inh 400mcg Disk Ref	0302000C0AAAQAQ
Beclomet Diprop_Pdr Inh 400mcg Disk+Dev	0302000C0AAAJAJ
Beclometasone 400 Cyclocaps_Cap 400mcg	0302000C0BMACAI
Beclotaide_R/Cap 200mcg	0302000C0BKAAAF
Becodisks_Disk 200mcg & Diskhaler	0302000C0BHACAH
Becodisks_Disk 200mcg Ref	0302000C0BHADAK
Becodisks_Disk 400mcg & Diskhaler	0302000C0BHAEAJ
Becodisks_Disk 400mcg Ref	0302000C0BHAFAQ
Becotide_Becodisk 200mcg Ref	0302000C0BCAKAK

		Becotide_Becodisk 400mcg & Diskhaler	0302000C0BCANAJ
		Becotide_Becodisk 400mcg Ref	0302000C0BCAPAQ
		Becotide_R/Cap 400mcg	0302000C0BCAGAI
		Budesonide 400 Cyclocaps_Cap 400mcg	0302000K0BEABAS
		Budesonide/Formoterol_InhaB/A 400/12(60D	0302000K0AAAUAU
		Budesonide_Inh Soln 500mcg/2ml Ud Vl	0302000K0AAAJAJ
		Budesonide_Inh Soln 500mcg/ml 2ml Ud @gn	0302000K0AAANAN
		Budesonide_Pdr For Inh 400mcg (100 D)	0302000K0AAAYAY
		Budesonide_Pdr For Inh 400mcg (50 D)	0302000K0AAAHAH
		Budesonide_Pdr For Inh Cap 400mcg	0302000K0AAASAS
		Clenil Modulite_Inha 200mcg (200D)	0302000C0BPACBV
		Clenil Modulite_Inha 250mcg (200D)	0302000C0BPADBW
		DuoResp Spiromax_Inh 320mcg/9mcg (60 D)	0302000K0BHABAU
		Easyhaler_Budesonide 400mcg (100 D)	0302000K0BGACAY
		Filair Fte_Inha 250mcg (200 D)	0302000C0BGACAC
		Flixotide_Accuhaler 250mcg (60 D)	0302000N0BBATAT
		Flixotide_Accuhaler 500mcg (60 D)	0302000N0BBAUAU
		Flixotide_Disk 250mcg & Diskhaler	0302000N0BBAEAE
		Flixotide_Disk 250mcg Ref	0302000N0BBAFAF
		Flixotide_Disk 500mcg & Diskhaler	0302000N0BBAPAP
		Flixotide_Disk 500mcg Ref	0302000N0BBAQAQ
		Flixotide_Evohaler 250mcg (120 D)	0302000N0BBAZBC
		Flixotide_Evohaler 250mcg (60 D)	0302000N0BBBABD
		Flixotide_Inha 250mcg (120 D)	0302000N0BBAMAM
		Flixotide_Inha 250mcg (60 D)	0302000N0BBANAN
		Flixotide_Nebules 500mcg/2ml Ud	0302000N0BBAVAV
		Fluticasone Prop_Inh Soln 500mcg/2ml Ud	0302000N0AAAVAV
		Fluticasone Prop_Inha 250mcg (120 D) CFF	0302000N0AABCBC
		Fluticasone Prop_Inha 250mcg (60 D)	0302000N0AAANAN
		Fluticasone Prop_Inha 250mcg (60 D) CFF	0302000N0AABDBD
		Fluticasone Prop_Pdr For Inh 250mcg(60D)	0302000N0AAATAT
		Fluticasone Prop_Pdr For Inh 500mcg(60D)	0302000N0AAAUAU
		Fluticasone Prop_Pdr Inh 250mcg Disk @gn	0302000N0AABIBI
		Fluticasone Prop_Pdr Inh 250mcg Disk Ref	0302000N0AAAFAF
		Fluticasone Prop_Pdr Inh 250mcg Disk+Dev	0302000N0AAAEAE
		Fluticasone Prop_Pdr Inh 500mcg Disk Ref	0302000N0AAAQAQ
		Fluticasone Prop_Pdr Inh 500mcg Disk+Dev	0302000N0AAAPAP
		Fluticasone/Formoterol_Inh 250/10mcg120D	0302000N0AABKBK
		Fluticasone/Salmeterol_Inh 250/25mcg120D	0302000N0AABGBG
		Fluticasone/Salmeterol_Inh 250/50mcg 60D	0302000N0AAAYAY
		Fluticasone/Salmeterol_Inh 500/50mcg 60D	0302000N0AAAZAZ
		Flutiform_Inha 250/10mcg (120 D)	0302000N0BDABBK
		Fobumix_Easyhaler 320mcg/9mcg (60 D)	0302000K0BIAAAU
		Mometasone Fur_Pdr For Inh 400mcg (30 D)	0302000R0AAACAC
		Mometasone Fur_Pdr For Inh 400mcg (60 D)	0302000R0AAADAD
		Pulmaxan_Turbohaler 400mcg (50 D)	0302000K0BCAAAH
		Pulmicort_Respule 250mcg/ml 2ml Ud	0302000K0BBAJAJ
		Pulmicort_Respule 500mcg/ml 2ml Ud	0302000K0BBAGAI
		Pulmicort_Turbohaler 400mcg (50 D)	0302000K0BBAIAH
		Pulvinal Beclomet_Inha 200mcg (100 D)	0302000C0BLAABM
		Pulvinal Beclomet_Inha 400mcg (100 D)	0302000C0BLACBP
		Sereflo_Inh 250mcg/25mcg (120D)	0302000N0BIABBG
		Seretide 250_Accuhaler 250mcg/50mcg(60D)	0302000N0BCABAY
		Seretide 250_Evohaler 250mcg/25mcg(120D)	0302000N0BCAFBG

		Seretide 500_Accuhaler 500mcg/50mcg(60D)	0302000N0BCACAZ	
		Sirdupla_Inh 250mcg/25mcg (120D)	0302000N0BFABBG	
		Symbicort_Turbohaler 400mcg/12mcg (60 D)	0302000K0BDACAU	

1.5	**Denominator**	Total number of all ICS items prescribed during a single month.

The ICS items have been defined based on the following BNF chemical substances:

BNF Chemical Substance	BNF Code
Beclometasone Dipropionate	0302000C0
Budesonide	0302000K0
Ciclesonide	0302000U0
Fluticasone Propionate (Inh)	0302000N0
Mometasone Furoate	0302000R0

1.6	**Methodology**	Numerator divided by denominator, presented as a percentage.

Section 2: Rationale

2.1	**Purpose**	Inhaled corticosteroids (ICS) are commonly prescribed for patients with COPD and asthma, although the risk of systemic side effects is greater when higher doses are used.
		Sometimes it is appropriate to continue this high dose long-term, but often patients can be 'stepped-down' again if clinically appropriate.
		This metric highlights the variation in the number of patients in each CCG / GP practice who are prescribed a high dose steroid, allowing commissioners and prescribers to see how much variation exists.
2.2	**Evidence and Policy Base**	National guidelines from NICE and BTS for asthma and COPD state that the patient should be maintained on the lowest effective dose of ICS.

Inhaled steroid prevention including ICS LABA

Section 1: Introduction / Overview		
1.1	**Title**	Inhaled steroid prevention including ICS LABA
1.2	**Definition**	Identifying the proportion of patients receiving 5 or fewer steroid inhalers including ICS LABA products. Figures are reported for a rolling 12 month period.
1.3	**Reporting Level**	Practice level (aggregated to CCG).
1.4	**Numerator**	Number of patients receiving 5 or fewer steroid inhalers including ICS LABA products within a rolling 12 month period. The steroid inhalers including ICS LABA products have been defined based on the following BNF chemical substances: <table><tr><td>**BNF Chemical Substance**</td><td>**BNF Code**</td></tr><tr><td>Beclometasone Dipropionate</td><td>0302000C0</td></tr><tr><td>Budesonide</td><td>0302000K0</td></tr><tr><td>Ciclesonide</td><td>0302000U0</td></tr><tr><td>Fluticasone Propionate (Inh)</td><td>0302000N0</td></tr><tr><td>Mometasone Furoate</td><td>0302000R0</td></tr></table>
1.5	**Denominator**	Total number of patients receiving any prescription items for steroid inhalers including ICS LABA products (see numerator for list) within a rolling 12 month period.
1.7	**Methodology**	Numerator divided by denominator, presented as a percentage
Section 2: Rationale		
2.1	**Purpose**	Steroid-containing inhalers are used as maintenance therapy for COPD and asthma. They are most likely to be effective if taken regularly. This metric shows the number of patients who have collected 5 or fewer prescriptions for preventer medication, and who might benefit from a medication review with respect to adherence.
2.2	**Evidence and Policy Base**	Regular maintenance treatment is recommended by both NICE and BTS.

Prescribing of montelukast

Section 1: Introduction / Overview			
1.1	**Title**	Prescribing of montelukast	
1.2	**Definition**	Identifying the proportion of prescribing for montelukast in relation to the number of patients on the asthma register, based on the data available via QOF (AST003).	
1.3	**Reporting Level**	Practice level (aggregated to CCG).	
1.4	**Numerator**	Number of prescription items prescribed for any Montelukast products. The Montelukast products has been defined based on the following BNF chemical substance:<table><tr><td>**BNF Chemical Substance**</td><td>**BNF Code**</td></tr><tr><td>Montelukast</td><td>0303020G0</td></tr></table>	
1.5	**Denominator**	Number of patients on the asthma register, based on figures available from QoF (AST003). Data for the denominator is only available as a figure for a complete financial year and is published annually in November. As the comparator is reported on a monthly basis, the same figure is used for each month within the financial year. The latest available data will be reported until a new QOF dataset is published at which point the figures will be retrospectively adjusted accordingly. For example, the dashboard figures for Apr-17 to Mar-18 will use the QOF figures for 2016/17 until the November 2018 QOF publication at which point the figures will then be amended based on the latest available results.	
1.6	**Methodology**	Numerator divided by denominator multiplied by 1,000. Presented as number of patients prescribed montelukast per 1,000 patients on the asthma register.	
Section 2: Rationale			
2.1	**Purpose**	NICE recommends an early 4-8 week trial of montelukast plus low dose ICS if newly diagnosed asthma is not controlled by a low dose ICS inhaler alone (before adding a LABA).	
2.2	**Evidence and Policy Base**	NICE guideline for asthma	

Prescribing frequency of prednisolone 5mg tablets

Section 1: Introduction / Overview		
1.1	**Title**	Prescribing frequency of prednisolone 5mg tablets
1.2	**Definition**	Prescribing of Prednisolone 5mg tablets, to patients receiving medication to treat asthma or COPD, where the quantity prescribed per item was less than or equal to 60 tablets. Results identify the total number of prescription items prescribed during a rolling 12 month period, with each item relating to a quantity of 60 tablets or fewer.
1.3	**Reporting Level**	Practice level (aggregated to CCG).
1.4	**Numerator**	Number of patients receiving "x" (i.e. 1, 2,3…13+) number of prescription items for Prednisolone 5mg tablets over a rolling 12 month period. Prescription items are only included where the quantity prescribed was less than or equal to 60 tablets. Patients have only been included where they have also been prescribed medication to treat asthma or COPD during the reported period. The prednisolone products has been defined based on the following BNF presentation:

BNF Presentation	BNF Code
Prednisolone_Tab 5mg	0603020T0AAACAC

The asthma/COPD medications have been defined based on the following BNF chemical substances:

BNF Chemical Substance	BNF Code
Aclidinium Bromide	0301020R0
Aminophylline	0301030B0
Aminophylline Hydrate	0301030C0
Aminophylline With Antacid	0301030D0
Atropine Methonitrate	0301020A0
Atropine Sulfate	0301020B0
Bambuterol Hydrochloride	0301011B0
Beclometasone Dipropionate	0302000C0
BeclometDiprop/Formoterol/Glycopyrronium	0301011AB
Betamethasone Valerate	0302000G0
Budesonide	0302000K0
Ciclesonide	0302000U0
Clenbuterol Hydrochloride	0301011C0
Fenoterol Hydrobromide	0301011F0
Fluticasone Fuorate (Inh)	0302000V0
Fluticasone Propionate (Inh)	0302000N0
Formoterol Fumarate	0301011E0
Glycopyrronium Bromide	0301020S0
Indacaterol Maleate	0301011X0
Ipratropium Bromide	0301020I0
Mometasone Furoate	0302000R0
Montelukast	0303020G0
Nedocromil Sodium	0303010J0
Olodaterol	0301011Z0
Omalizumab	0304020X0
Other Theophylline Preps	030103000
Oxitropium Bromide	0301020P0
Pirbuterol Acetate	0301011K0
Pirbuterol Hydrochloride	0301011J0
Reproterol Hydrochloride	0301011M0
Rimiterol Hydrobromide	0301011P0

		Salbutamol	0301011R0	
		Salmeterol	0301011U0	
		Sodium Cromoglicate	0303010Q0	
		Terbutaline Sulphate	0301011V0	
		Theophylline	0301030S0	
		Tiotropium	0301020Q0	
		Triamcinolone Acetonide	0302000T0	
		Tulobuterol Hydrochloride	0301011W0	
		Umeclidinium Brom	0301020T0	
		Zafirlukast	0303020Z0	

1.5	**Denominator**	n/a
1.6	**Methodology**	There is no denominator for this comparator with results simply being reported based on the numerator.
Section 2: Rationale		
2.1	**Purpose**	Rescue therapy for COPD and asthma usually includes an oral steroid. This metric shows the number patients using an inhaler who have received a prescription for a short course of prednisolone over the last 12 months, and groups them together by the number of prescriptions received. NB: not all prescriptions for short courses of prednisolone are for rescue therapy. Some of the results of this will be for the acute treatment of other medical conditions.
2.2	**Evidence and Policy Base**	This comparator is based on NICE guidelines for COPD and asthma and expert opinion.

Prescribing of smoking cessation products inc. nicotine replacement (NRT), varenicline and bupropion

Section 1: Introduction / Overview		
1.1	**Title**	Prescribing of smoking cessation products inc. nicotine replacement (NRT), Varenicline and Bupropion
1.2	**Definition**	Identifying the prescribing of smoking cessation products, including nicotine replacement (NRT), Varenicline and Bupropion. Results identify the total number of prescription items prescribed for any smoking cessation product (BNF section 4.10.2).
1.3	**Reporting Level**	Practice level (aggregated to CCG).
1.4	**Numerator**	Number of prescription items prescribed for any smoking cessation products. Figures restricted to patients aged 15 and over in line with the denominator figures. The smoking cessation products has been defined based on the following BNF chemical substances: <table><tr><th>BNF Chemical Substance</th><th>BNF Code</th></tr><tr><td>Nicotine</td><td>0410020B0</td></tr><tr><td>Nicotine Bitartrate</td><td>0410020D0</td></tr><tr><td>Varenicline Tartrate</td><td>0410020C0</td></tr><tr><td>Bupropion Hydrochloride</td><td>0410020A0</td></tr></table>
1.5	**Denominator**	The number of patients, aged 15 and over, recorded as current smokers within the QOF dataset SMOK004. Data for the denominator is only available as a figure for a complete financial year and is published annually in November. As the comparator is reported on a monthly basis, the same figure is used for each month within the financial year. The latest available data will be reported until a new QOF dataset is published at which point the figures will be retrospectively adjusted accordingly. For example, the dashboard figures for Apr-17 to Mar-18 will use the QOF figures for 2016/17 until the November 2018 QOF publication at which point the figures will then be amended based on the latest available results.
1.6	**Methodology**	Numerator divided by denominator multiplied by 1,000. Presented as number of items prescribed for smoking cessation products per 1,000 recorded smokers.
Section 2: Rationale		
2.1	**Purpose**	The highest value intervention for both COPD and asthma is smoking cessation. Prescribing rates for stop smoking products should be increasing, to help more smokers to quit smoking.
2.2	**Evidence and Policy Base**	

Excess SABA prescribing

Section 1: Introduction / Overview			
1.1	**Title**		Excess SABA prescribing
1.2	**Definition**		Identifying the proportion of patients prescribed preventer inhalers without antimuscarinics who were also prescribed 6 or more SABA inhalers. Figures are reported for a rolling 12 month period.
1.3	**Reporting Level**		Practice level (aggregated to CCG).
1.4	**Numerator**		No. patients prescribed 6 or more SABA inhalers in a 12 month period, who were also prescribed a preventer inhaler but not prescribed an antimuscarinic.

The SABA inhaler products have been defined based on the following BNF chemical substances:

BNF Chemical Substance	BNF Code
Salbutamol	0301011R0
Terbutaline Sulphate	0301011V0

The preventer inhaler products have been defined based on the following BNF chemical substances:

BNF Chemical Substance	BNF Code
Alclometasone Dipropionate	1304000B0
Beclometasone Dipropionate	0302000C0
Beclometasone Dipropionate	1202010C0
Beclometasone Dipropionate	1304000C0
Betamethasone Valerate	0302000G0
Budesonide	0302000K0
Budesonide	1304000E0
Ciclesonide	0302000U0
Fluticasone Fuorate (Inh)	0302000V0
Fluticasone Propionate (Inh)	0302000N0
Mometasone Furoate	0302000R0
Mometasone Furoate	1202010U0
Mometasone Furoate	1304000Y0

The antimuscarinic products have been defined based on the following BNF chemical substances:

BNF Chemical Substance	BNF Code
Aclidinium Brom/Formoterol	0301040V0
Aclidinium Bromide	0301020R0
BeclometDiprop/Formoterol/Glycopyrronium	0301011AB
Indacaterol/Glycopyrronium	0301040Y0
Tiotropium	0301020Q0
Tiotropium Brom/Olodaterol	0301040X0
Umeclidinium Brom	0301020T0
Umeclidinium Brom/Vilanterol	0301040W0

1.5	**Denominator**		No. of patients prescribed a preventer inhaler (see numerator) but not an antimuscarinic (see numerator).
1.6	**Methodology**		Numerator divided by denominator, presented as a percentage.

Section 2: Rationale			
2.1	**Purpose**		The NRAD report highlighted that asthma patients who overused their SABA medication were at higher risk of death. This metric identifies patients who are potentially overusing SABA medication.
2.2	**Evidence and Policy Base**		

Patients on triple therapy

	Section 1: Introduction / Overview		
1.1	**Title**		Patients on triple therapy
1.2	**Definition**		Identifying the proportion of patients, receiving medication used to treat asthma/COPD, prescribed triple therapy based on receiving prescriptions for a combination of LAMA, LABA and ICS inhalers. Results presented for a 12 month rolling period.
1.3	**Reporting Level**		Practice level (aggregated to CCG).
1.4	**Numerator**		No. of patients receiving triple therapy (LAMA + LABA + ICS) within a 12 month period.

No. of patients receiving triple therapy (LAMA + LABA + ICS) within a 12 month period.

The LAMA products has been defined based on the following BNF chemical substances:

BNF Chemical Substance	BNF Code
Aclidinium Brom/Formoterol	0301040V0
Aclidinium Bromide	0301020R0
BeclometDiprop/Formoterol/Glycopyrronium	0301011AB
Fluticasone Fuorate (Inh)	0302000V0
Indacaterol/Glycopyrronium	0301040Y0
Tiotropium	0301020Q0
Tiotropium Brom/Olodaterol	0301040X0
Umeclidinium Brom	0301020T0
Umeclidinium Brom/Vilanterol	0301040W0

An additional product has been identified, which could be classed as a LAMA, based on the following BNF presentation:

BNF Presentation	BNF Code
Trelegy Ellipta_Inha 92/55/22mcg (30 D)	0302000V0BCAAA0

The LABA products has been defined based on the following BNF chemical substances:

BNF Chemical Substance	BNF Code
Aclidinium Brom/Formoterol	0301040V0
Bambuterol Hydrochloride	0301011B0
BeclometDiprop/Formoterol/Glycopyrronium	0301011AB
Beclometasone Dipropionate	0302000C0
Budesonide	0302000K0
Fluticasone Fuorate (Inh)	0302000V0
Fluticasone Propionate (Inh)	0302000N0
Formoterol Fumarate	0301011E0
Indacaterol Maleate	0301011X0
Indacaterol/Glycopyrronium	0301040Y0
Olodaterol	0301011Z0
Tiotropium Brom/Olodaterol	0301040X0
Umeclidinium Brom/Vilanterol	0301040W0

The ICS products has been defined based on the following BNF chemical substances:

BNF Chemical Substance	BNF Code
BeclometDiprop/Formoterol/Glycopyrronium	0301011AB
Beclometasone Dipropionate	0302000C0
Beclometasone Dipropionate	1304000C0
Budesonide	0302000K0
Ciclesonide	0302000U0
Fluticasone Fuorate (Inh)	0302000V0
Fluticasone Propionate (Inh)	0302000N0
Mometasone Furoate	0302000R0

1.5	Denominator	No. of patients receiving any medication used to treat asthma/COPD within the reported 12 month rolling period. The asthma/COPD medications have been defined based on the following BNF chemical substances:

BNF Chemical Substance	BNF Code
Aclidinium Bromide	0301020R0
Aminophylline	0301030B0
Aminophylline Hydrate	0301030C0
Aminophylline With Antacid	0301030D0
Atropine Methonitrate	0301020A0
Atropine Sulfate	0301020B0
Bambuterol Hydrochloride	0301011B0
Beclometasone Dipropionate	0302000C0
BeclometDiprop/Formoterol/Glycopyrronium	0301011AB
Betamethasone Valerate	0302000G0
Budesonide	0302000K0
Ciclesonide	0302000U0
Clenbuterol Hydrochloride	0301011C0
Fenoterol Hydrobromide	0301011F0
Fluticasone Fuorate (Inh)	0302000V0
Fluticasone Propionate (Inh)	0302000N0
Formoterol Fumarate	0301011E0
Glycopyrronium Bromide	0301020S0
Indacaterol Maleate	0301011X0
Ipratropium Bromide	0301020I0
Mometasone Furoate	0302000R0
Montelukast	0303020G0
Nedocromil Sodium	0303010J0
Olodaterol	0301011Z0
Omalizumab	0304020X0
Other Theophylline Preps	030103000
Oxitropium Bromide	0301020P0
Pirbuterol Acetate	0301011K0
Pirbuterol Hydrochloride	0301011J0
Reproterol Hydrochloride	0301011M0
Rimiterol Hydrobromide	0301011P0
Salbutamol	0301011R0
Salmeterol	0301011U0
Sodium Cromoglicate	0303010Q0
Terbutaline Sulphate	0301011V0
Theophylline	0301030S0
Tiotropium	0301020Q0
Triamcinolone Acetonide	0302000T0
Tulobuterol Hydrochloride	0301011W0
Umeclidinium Brom	0301020T0
Zafirlukast	0303020Z0

1.6	Methodology	Numerator divided by denominator, reported as a percentage.
Section 2: Rationale		
2.1	Purpose	Triple therapy is the lowest value intervention according to the value pyramid developed by the London Respiratory Network. For both COPD and asthma, patients receiving triple therapy should be reviewed at least annually with a view to stepping down treatment.
2.2	Evidence and Policy Base	

Appendix 1

Working group:

Name	Organisation	Role
Paul Davies	NHS BSA	Senior Innovation and Delivery Partner (Medicines)
Charlene Kirk	NHS BSA	Assistant Business Lead Pacific Programme
Margaret Dockey	NHS BSA	Prescribing Information Services Manager
Mike Morgan	NHS England	Respiratory National Clinical Director
Jonathan Underhill	NICE	Associate Director for Medicines Evidence
Jas Khambh	NHS England (RightCare)	Pharmacy Advisor
Sue Hart	AHSN for North East and North Cumbria	Respiratory Programme Lead
Anna Murphy	University Hospitals of Leicester NHS Trust	Consultant Pharmacist
Nick Beavon	Primary Care Pharmacy Association	PAG Lead/Chief Pharmacist
Toby Capstick	Leeds Teaching Hospitals NHS Trust	Lead Respiratory Pharmacist
Vince Mak	Imperial College Healthcare NHS Trust	Consultant in Respiratory and Critical Care Medicine
Eric Power	NHS England (RightCare)	Delivery Partner
Monica Mason	Regional Drug and Therapeutics Centre (RDTC)	Senior Pharmacist

Expert input provided by:

Name	Role/Organisation
	London Procurement Partnership