EURO DURG bulletin

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EUROPEAN DRUG UTILIZATION RESEARCH GROUP

Editors. *This issue was prepared by the following members of the Executive Committee of* EURO DURG*: Nicola Montanaro, Alberto Vaccheri, and Ulf Bergman.*

Berlin 1997 EURO DURG workshops
(continued from EURO DURG bulletin No. 3)

Report from the workshops on the user perspective project (TUPP)

Ebba Holme Hansen & Nicky Britten

Two workshops - each of 1_ hours - were held and both were well attended. Ebba Holme Hansen introduced the first workshop. Anna Birna Almarsdóttir spoke about "Why the user perspective? Personal experiences", Emilio Sanz spoke about "International projects on children and medicines", and Ebba Holme Hansen spoke about "Non-compliance or self-regulation". A recurring theme was how different perspectives change the research results. Participants formed discussion groups to consider "The case of variations in use of mood-modifying medicines". Each group was asked to formulate research questions and suggest ideas for projects.

The ideas were summarized and presented the following day in the 2nd workshop which more specifically discussed the project plan.

DEVELOPMENT OF PROJECT PLAN

It was agreed that the focus will be on drugs rather than diagnoses, with a special view to antidepressants and tranquilizers. Research issues will include

1. patients' expectations of drug treatment, reasons for using the drug, how it works, how drug use was started,
2. information about drugs,
3. the patient's relationship with the doctor, autonomy and power relations,
4. risk assessment and self regulation (compliance),
5. alternative therapies including lifestyle changes and homeopathy.

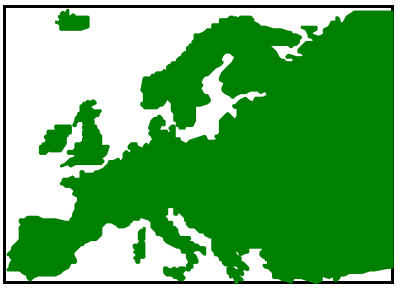
The empirical methods will primarily be qualitative. The project will consist of a common core, with individual researchers being free to do extra components if they choose.

ESTABLISHMENT OF NETWORK

It was agreed that Ebba Holme Hansen would act as coordinator and that Anna Birna Almarsdóttir would act as scientific secretary. The Steering Committee will consist of national coordinators. Different countries might have different numbers of national collaborators represented by their national coordinators.

RELATIONS WITH WHO

The project has support from WHO EURO Pharmaceuticals Unit. There



will be a meeting of the Steering Committee at the WHO office in Copenhagen 26-28 March 1998.

RESOURCES

It is intended to make a funding application to the BIOMED program for EU countries and/or a joint BIOMED/WHO application which could then include non EU countries. Resources will be needed at national level for individual projects. These might include Ph.D. or Master's students, especially those with training or experience in qualitative methods.

SCHEDULE AND FOLLOW UP

Participants were invited to send relevant literature to the project coordinator. A Ph.D. student will be starting a literature review in November 1997.

EURO DURGers who would like to participate in the project are invited to contact:

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IN THIS ISSUE

Workshop " Past, present and future of the ATC/DDD Methodology"

Kåre Øydvin

The workshop was held on Tuesday, September 16th, 14.30 - 16.30, and was chaired by Kåre Øydvin who first gave a brief historic overview of the ATC/DDD methodology, pointing out the major trends and determinants for the development of the system. Especially pointed out were the positive effect and influence on the system caused by

- Nordic co-operation in the development of the system
- the use by former Czechoslovakia, Yugoslavia, Italy and Spain
- use in education (pharmacology)
- use in drug catalogues (pharmaceutical industry)
- cost comparisons

The need for data on drug use allowing estimates of the level of drug use, the identification of problems related to the use of drugs, the monitoring of interventions and comparisons of drug use between countries and over time. The lack of information on drug use is still a problem and a lot of countries do not have the methodology to produce figures on drug use, thus lacking the possibility of following the drug development in their own country.

Marit RØnning gave a brief description of the present situation for the ATC/DDD system. The WHO Collaborating Centre for Drug Statistics Methodology is now formally linked to the WHO Headquarters in Geneva. This new situation has led to some changes in the procedure for assigning ATC codes and DDDs. The new ATC codes and DDDs will be issued in WHO Pharmaceutical Newsletter and in WHO Drug Information. The Centres publications will be issued as usual.

Marit RØnning emphasised that we should not take into consideration other uses than Drug Utilisation Review when assigning ATC codes and DDDs.

In 1997, a literature survey of drug utilisation studies concluded that it is not common practice to make references to the versions of the ATC/DDD methodology used. This fact indicates that the users are not aware of the ATC/DDD system as a dynamic system where alterations are made annually. Users, new and old, should be educated to make reference to the specific version of the ATC/DDD methodology used.

Kees de Jonchere, WHO-Euro, introduced the participants to some of the major achievements during the period of the WHO Collaborating Centre for Drug Statistics Methodology.

The items focused on during the discussion were:

- Do we need a European system?
- How can we establish a European system?
- Does a European system need a basis of officially approved national centres for
  - Methodology (ATC/DDD) ?
  - Production of drug statistics?

The consensus among the participants in the workshop was that

- history proved the need of a common European system
- it is important to link the scientific use of drug statistics to the governmental use
- this common system must be based on officially approved national centres
- these centres must have a sound financial basis

EURO DURG can assist in the establishment of such centres bases on its

- knowledge on methodology
- knowledge on drug statistics
- knowledge on drug utilisation research
- knowledge on the set-up of already established centres
- knowledge about cost, benefits and pitfalls
- its international network of scientists working in this field

The workshop concluded that the project should be incorporated in the "Mapping Europe" project and that financial support might be obtained from the EU.

The follow up of the workshop will be done within the "Mapping Europe project defining

- what must be done, on the supranational level
- what must be done on a national level.

Workshop 'Use of Drug Utilization Data in the Quality Assessment of Drug Therapy'

Ingrid Schubert

The aim of the workshop was to present and to discuss quality indi-

cators for drug prescribing. The different concepts presented - DU 90% (Bergman and colleagues) specific drug group indicators (Schubert et al.) and disease indicators (Haaijer-Ruskamp et al.) - proceeded from the experience that physicians in general can only master to prescribe a limited number of drugs. High quality prescribing is therefore associated with the use of a relatively limited number of drugs. Indicators of prescribing should be able to routinely assess the kind and number of drugs selected.

Ulf Bergman, who chaired the workshop, laid out the employment and modification of the general drug utilization indicator DU 90% (number of active substances/ trade names, which make up 90% of the number of DDDs- defined daily doses) (Eur J Clin Pharmacol 1998;54:113-8, Drug utilization 90% - a simple method for assessing the quality of drug prescribing). If one documents this number over a longer period of time, it is also possible to portray market changes or the consequences of health policies (such as reimbursement matters).

Dr. Cornelia Popa, Sweden presented results of a study where 24 primary health care centers were compared according to their prescribing profile of benzodiazepines and NSAIDs.

The DU 90% concept was as well applied in international comparisons of prescribing behavior. At the workshop F. Perlik et al (Czech Republic) presented results of a study where they observed the impact of hospital formularies in Czech Republic. The formularies had been introduced in 1996. The adherence to the formulary was compared to the results of Huddinge Hospital, Sweden. An Italian-Swedish comparison was introduced by A. Vaccheri (Italy). The comparison of the NSAID-prescription purchased in Bologna and Stockholm showed the impact of the drug market on the

prescribing habit related to the number of different trade names chosen by the doctors. Due to the drug market situation and the lack of a formulary or a so called "positive drug list" Dr. Schubert et al (Germany) suggested to combine the DU90% concept with markers assessing the qualitative aspect of drugs selected. Those markers have to be developed individually for the different pharmacological groups. As the discussion showed the number of different trade names or selected ATC's does not inform us whether the drug choice is rational and cost effective. Concerning the NSAIDs the following four markers were suggested: 1. percentage of recommended drugs - these are so called first choice drugs. 2. percentage of long acting drugs - drugs that should be prescribed under caution 3. percentage of drugs with questionable / unproven efficacy 4. percentage of high risk drugs - the prescribing of which should be avoided, alternatives should be preferred. Comparing the prescribing profile of NSAIDs of 15 general practitioner working as coordinators in quality circles with 15 randomly selected high-prescribers (both groups with 460 randomly selected NSAID treated patients) showed that the two groups differ according to

a) the percentage of recommended drugs (76% of the NSAID-DDD fell into this group with the coordinators and 55% for the high prescribers) and

b) according to the percentage of drugs with doubtful efficacy: the coordinators issued 12% of all DDDs, the high prescribers 31%.

Guidelines of certain disease treatment and adherence to guidelines was the starting point of the work of C. Verninga and colleagues (The Netherlands), presented by Professor Flora Haaijer-Ruskamp.

The plenary discussion showed that the thesis that a small number of different brands enable a better handling of the drugs was not accepted from everybody. It was recommended to concentrate on different active substances/ drug groups. As a reply it was argued that rational drug use has as well to bear in mind the drug costs. This is easier when restricting to a smaller number of different brands.

The discussion showed as well the tension (Spannungsverhältnis) between practice and science. As a general practitioner - as one participant mentioned - it might be quite "rational" in some situations to use different brands of one active agent concerning the own reputation towards the patients.

The main discussion centered on the topic that in order to use the DU90% indicator as a quality marker it may also be useful to combine this indicator with formularies or pharmacotherapeutic recommendations, national or international. This sounds easy but one has to realize that not all countries have formularies and besides - the pharmacotherapeutic recommendations might differ considerably or are not always available. The participants of the workshop could experience this last point when the German colleagues informed that three manufacturers had just gone to court to stop the publication of the "Arzneiverordnungs-Report", an annual analysis of all issued prescriptions funded by the national health insurance scheme, because some of the manufacturers products were listed under the heading: drug with doubtful efficacy.

Ulf Bergman closed the workshop and thanked the audience for the discussion. He expressed his regret that Hugh McGavock was not able to participate and present his experience with the COMPASS-system. This topic will be discussed at the next meeting.

Berlin 1997
EURO DURG/EACPT joint sessions

Around 1000 participants from all European countries visited the Second International Congress of the European Association for Clinical Pharmacology and Therapeutics (EACPT). One of the symposia took place in conjunction with EURO DURG. The main topic of this joint symposium, led by Professor Ulf Bergman (Huddinge, Sweden) and Dr. Liselotte von Ferber (Cologne, Germany), was the use of drugs and its determinants 'in real life' compared to its use under conditions of clinical research. The poster exhibition of this symposium included 80 posters. Attended by 110 participants from 25 countries, the EURO DURG workshop took place at the very beginning of the joint symposium. An extensive report "Drug utilization in Europe" by Ingrid Schubert was published in Int J of Clin Pharmacol & Ther 1998;36:176-9

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An update of National DURGs in Europe

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