



National Prescribing Service Limited

National GP Survey

September 2006

Executive Summary

This fifth national survey of general practitioners (GPs) undertaken by the National Prescribing Service Limited (NPS) has been carried out after eight years of NPS quality use of medicines (QUM) education to GPs in Australia. The survey has provided data on GPs' knowledge and behaviour around the activities of NPS; GP knowledge of evidence-based prescribing practices; use of different types of information sources; and GP awareness of the various NPS education materials, services and programs. Also included were questions which aimed at enhancing understanding of various aspects of computerised prescribing and GPs' views on generic and complementary medicines.

This report provides detail on the survey methods, analysis and results. This report is primarily intended for internal NPS use. NPS Program Evaluation uses the report to comment on any changes in GP awareness and perceived value of the organisation, products, activities and services. Program Evaluation also uses it to examine changes in GP knowledge of evidence-based prescribing and comment on whether any observed changes are consistent with expectations of specific NPS programs.

NPS Program Evaluation will also use the data to help inform program refinement and development. Recommendations recorded in this report are limited to those for NPS Program Evaluation and, in particular, national GP surveys. Specific recommendations for program refinement and development will be agreed to and articulated following discussion and review with program implementation staff. These recommendations will then be communicated to appropriate levels within the organisation where informed decisions can be made in the light of strategic priorities and budgetary considerations.

Response, respondents and representativeness

- Of the 2,080 surveys mailed, 860 (41%) were returned. Of these, 803 (39%) were included in the analysis.
- Male GPs accounted for 60% of the respondents and the GPs had a mean age of 50 years. The mean time in general practice was 20 years and just under three quarters (72%) had undertaken their undergraduate training in Australia. Only 14% of the GPs who responded to the survey were solo practitioners, 7% were from a corporate practice with the remaining 78% being from non-corporate group practices with two or more GPs.
- There was a slight under-representation of male GPs in the survey sample compared with national data, and also slight under-representation of GPs aged less than 35. This should be borne in mind in any extrapolation of the survey to the national level.

High awareness of organisation

- Awareness of NPS activities undertaken by local divisions of general practice was relatively high with just under three quarters of GPs (72%) aware of educational visits from NPS facilitators being carried out via their local division.
- There were some geographical variations in awareness of divisional NPS programs with GPs from Tasmania (86%) and Victoria (78%) being more aware and those from NSW/ACT (70%) and SA (56%) being least aware.
- Over half (57%) of the surveyed GPs thought that NPS information and activities were unduly influenced by government. In contrast, a quarter (25%) thought that the NPS was unduly influenced by the pharmaceutical industry while half (49%) agreed that the pharmaceutical industry did not unduly influence NPS activities. Interestingly, a quarter of GPs (26%) were unsure of the influence of the pharmaceutical industry on NPS.

A valuable program

- Encouragingly, many GPs (89%) rated NPS to be of either great or moderate value. The value of NPS to GPs has grown significantly over the years. In 2000, only 14% of GPs who responded to our survey considered NPS to be great value, this has more than doubled in six years to 36%.

Positive feedback on NPS information and activities

- GPs were very positive in their views on the clinical relevance, evidence-based nature and influence of NPS on their prescribing. In particular, the proportion who agreed or strongly agreed that NPS information and activities:
 - are clinically relevant, was 94%
 - are evidence-based, was 83%
 - are trustworthy, was 80%
 - are appropriate to their needs, was 76%
 - reduce uncertainty on medicines issues, was 69%
 - influence their prescribing, was 69%.

NPS products & services for health professionals

- The NPS health professional product/resource with the highest awareness was *Australian Prescriber* with 95% of GPs aware. Awareness of *NPS RADAR*, *NPS News* and *Prescribing Practice Review* was also high at around 90%. GPs were much less aware of the NPS website and Therapeutic Advice & Information Service (TAIS) with awareness of 49% and 39% respectively.
- Use of NPS health professional products/resources was, as a rule, also encouraging, perhaps with the exception of TAIS. In particular (in those aware):
 - 99% frequently or sometimes reported to read *Australian Prescriber*
 - 94% frequently or sometimes read *RADAR*
 - 96% frequently or sometimes read the *Prescribing Practice Review*
 - 96% frequently or sometimes read *NPS News*
 - 62% frequently or sometimes used the NPS website
 - 39% frequently or sometimes used TAIS.

NPS consumer products and services

- The “Common Colds Need Common Sense” campaign was the NPS consumer program most recognised by GPs (72%). More important, 67% of the GPs had used the materials and 40% felt that the campaign was very useful in promoting the message to patients that antibiotics were inappropriate for common colds. Awareness of other consumer programs and resources amongst the GPs was mixed:
 - 83% were aware of Consumer Medicine information (CMI)
 - 61% were aware of NPS patient information leaflets
 - 40% were aware of the NPS Medicines List
 - 39% were aware of Medicines Line
 - 36% were aware of Medimate

Quality use of prescription medicines

- In terms of GPs’ evidence-based knowledge of quality use of prescription medicines, the results are encouraging but also highlight areas where there is still work to be done in addressing knowledge gaps.
 - Treatment of heart failure
GPs knowledge around heart failure was variable. While nearly all (94%) correctly answered that ACE inhibitors have been shown to reduce mortality in heart failure, only 48% knew that this was also true for angiotensin II receptor antagonists. Only nine GPs (around 1% of the sample) were able to correctly identify the five medications known to reduce mortality in heart failure.
 - Choice of antibiotic for acute sinusitis
GPs were asked to record what antibiotic they would prescribe as their first choice for a patient presenting for the first time with acute sinusitis. Most GPs (68%) correctly indicated that they would use amoxicillin, this proportion has significantly increased over time from 44% in the GP survey in 2000, to 59% in 2002, and finally 70% in 2004. The slight decrease this year in correct response was not statistically significant.

Sources of therapeutic information

- *MIMs* (note that no differentiation was made between the bi-monthly and annual publications), the *PBS Book* and *Therapeutic Guidelines* were reported to be the most used paper-based sources of information in the past four weeks. Similarly these products were also ranked highest when GPs were asked about their use of electronic information resources, with 73% using electronic *MIMs*, 49% the *PBS schedule* in electronic format and 38% electronic *Therapeutic Guidelines*.
- *NPS RADAR* in paper format had been read by 31% of GPs in the previous four weeks but the electronic format by only 16% (note that the question did not differentiate between *RADAR* in prescribing software and that available on the internet). The paper version of *Australian Prescriber* was read by 42% GPs but only 7% had used the web-based version.

Aspects of computerised prescribing

- The majority (91%) of GPs in the survey used a computer for prescribing. Computerised prescribing was significantly associated with GP age, number of years in practice, and size/type of practice.
- The most commonly used prescribing software was Medical Director which was used by 74% of GPs.
- Most GPs (86%) were connected to the internet via broadband/network. The majority (95%) had their drug-to-drug interaction alerts activated and were also satisfied (92%) either fully or to some extent with the way alerts were displayed. There was a high level of satisfaction with the content of alerts with 90% either fully or to some extent satisfied. Despite this apparent satisfaction, GPs provided valuable comments on some of the problems associated with alerts. For example, they commented on the number of alerts and their non-specific nature. They felt desensitised by the sheer number of alerts and a common theme was that "there is no distinction between the minor and the lethal".

GPs' views on complementary, over-the-counter (OTC) and generic medicines

- GPs were divided on how often, when taking a medication history or reviewing a patient's medication, they asked about complementary medicines. A small number (4%) reported that they never did so, 12% did so all the time and a fifth (18%) did so half of the time. In contrast, most GPs (79%) agreed that it was important to ask patients if they were taking complementary medicines while a further 20% (n=163) agreed that it was to some extent important.
- GPs were similarly divided on how often they asked about OTC medicines. A few never asked (2%) while 15% always did and a fifth (20%) said they did so half of the time. Again the overwhelming majority agreed that it was important (82%) to ask patients if they were taking OTC medicines while a further 17% agreed that it was to some extent important.
- The surveyed GPs provided valuable feedback on their views around the place of generics in prescribing. Typical comments were around the confusion caused by different brand names, tablet shapes and sizes.
 - “Once supplied, a brand should not be changed. Repeated changes of brands is confusing and dangerous.”
 - “Inconsistency of brands and accidental double dosing are my main concern.”
- Some respondents were sceptical about the effectiveness of generic medicines and expressed their concern about quality control, quality assurance and bioequivalence.

Communication with patients and pharmacists on medicines issues

- The majority of GPs (89%) agreed that in the last five years they had noticed a positive change in the amount of time spent discussing medicines issues with patients. Fewer (62%) reported a similar change in communication with pharmacists.

General comments about NPS and the survey

A wide variety of views and opinions were voiced by the responding GPs about NPS, both the organisation and its resources. Encouragingly, many commented on the fact that they found the information provided by the NPS to be unbiased and practical: "I think the NPS provides an excellent educational service. I use it almost exclusively for my continuous education and updates on new medicines."

- Specific positive comments were made about, the patient education materials, facilitator visits and *Australian Prescriber*: "I find the info in *Australian Prescriber/NPS Radar* is valuable and recommend it to all my colleagues. Well done!" Other publications (such as *NPS News*) were seen as useful but some GPs had suggestions on how these could be condensed and/or combined into a single publication.

Negative opinions were of the nature that NPS was perceived to not be an independent organisation and appears to be influenced heavily by the Government. Similarly a few respondents commented that NPS was primarily aimed at cutting costs related to prescribing: "NPS pushes the government line & tries to lower spending on medication nothing more, nothing less. Also how can you claim independence if you are dependent on government for funding?"

- One activity singled out for negative comment was the clinical audits. There were several complaints about their length and time-consuming nature. It was also felt that the content of the audits did not match real life practice: "I hate the almost compulsory audits. Very arduous. Very useless. Statistically flawed".
- Several GPs also commented on the survey itself noting that it was too long, that they would like to know about the results and some were interested in what the NPS does with the survey information.