



National Prescribing Service Limited

Optimising use of proton pump inhibitors – pre and post survey of GPs' knowledge and attitudes:

Executive Summary

This evaluation involved a survey of a sample of GPs both before the series of NPS initiatives to improve use of proton pump inhibitors (PPIs) (April 2004) *Optimising use of proton pump inhibitors* and then again after this program (Nov. 2004 – Feb. 2005). The survey enquired about GPs' knowledge and attitudes regarding the use of PPIs. The results are very encouraging and demonstrate GPs' knowledge and attitudes towards the quality use of PPIs has improved in line with best practice evidence.

This report provides a brief summary of the survey response, methods and results.

Response and representativeness

- The survey sample was selected by choosing GPs from divisions of general practice known to be participating in the NPS visiting program (number of divisions=15) and a sample known to be from divisions that were not going to have a visiting program on this topic (number of divisions=14).
- GPs had previously participated in at least one NPS activity in the past 5 years.
- Response rates were 42% (n=872) for pre survey and 38% (n=772) for follow-up.
- Demographics of pre and follow-up survey respondents were similar, but the survey overall had an under-representation of younger GPs; only 5% were aged less than 35, compared to 11% nationally.

Survey design

- Questions were aligned to specific key messages of the PPI program.
- The questionnaire was designed in a brief, double-sided, one-page format with 9 questions on PPIs and 5 demographic questions. A slightly modified design which included a question on participation in NPS activities was used in the follow-up survey.
- Surveys did not have an individual identifier, therefore it was not possible to track returns from individual GPs nor was it possible to match GPs in the pre and post surveys.

Results

- Self-reported participation in NPS activities for the 772 respondents who returned a follow-up survey:
 - 32% (n=242) had a visit from an NPS facilitator on PPIs
 - 28% (n=207) completed a clinical audit on PPIs
 - 23% (n=173) completed a case study on PPIs
 - 20% (n=151) had participated in small group discussion on PPIs

- Two-thirds (67%) of respondents recalled receiving *NPS News, PPIs: too much of a good thing*, with 89% of these saying they had read the publication.
- Approximately three-quarters (72%) of respondents recalled receiving prescribing feedback and the majority of these (97%) had read it.
- The proportion of respondents strongly agreeing with the statement “The volume of PPIs used in Australia on the PBS is very high” increased significantly from 36% in the pre survey to 46% post.
- In line with key messages of the PPI program, the proportion of GPs who said they would frequently consider a ‘step-down’ approach (i.e. from high dose to low-dose or to intermittent) when reviewing therapy for patients with GORD significantly increased from 52% in the pre survey to 67% post.
- Those GPs who said they would frequently suggest intermittent, symptom-driven use of PPIs to patients on long-term PPI therapy significantly increased from 36% in the pre survey to 51% post.
- Responses to a case scenario featuring therapeutic management of a patient with GORD showed that GPs significantly changed their knowledge of treatment options in line with the key messages of the PPI program. In particular, the proportion who said they would reduce the dose of omeprazole from 20 mg to 10 mg (in a patient who had been treated for 6 months with omeprazole 20 mg and now with no symptoms) significantly increased from 12% pre to 19% post.
- A key message of the program was that “all PPIs are very effective and clinically equivalent in most patients”. This statement was endorsed by 87% of GPs pre the NPS PPI program and 92% post.
- The fact that urea breath test, faecal antigen test (FAT) and serology are all suitable for detecting *H. pylori* was known to be true by 62% of GPs in the pre survey and increased significantly to 70% post.
- Almost all GPs (96% pre and post) said that they recommended that patients with dyspepsia should avoid medications like NSAIDs which may exacerbate the condition.
- In their communication from gastroenterologists regarding information routinely provided for patients recommended PPI therapy, only one quarter (26% pre & 23% post) of GPs said they were provided with a period after which drug therapy should be reviewed or changed.

Dissemination of results

- Several of the participating GPs commented that they would like to know the results of the survey. Aggregated results were sent out to each GP who had been invited to participate.

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