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## 4.1 Prescribing - PCTs



# Increasing low cost statin prescribing

The volume of statin prescribing has increased several fold during recent years and there are large cost differentials between the different statin drugs. By ensuring that clinicians initiate patients on one of the lower cost drugs, PCTs can keep statin prescribing costs down.

There are five statins currently approved for use within the UK for the treatment of high cholesterol: atorvastatin, fluvastatin, pravastatin, rosuvastatin and simvastatin.

However these drugs vary markedly in price. There are non-proprietary versions of simvastatin and pravastatin, so by prescribing these two drugs generically clinicians can help keep prescribing costs down.

The indicator measures the percentage of scripts written for simvastatin and pravastatin. This is given as a percentage of the total volume of statin prescribing. A high proportion of prescribing for these statins will mean lower prescribing costs. Simvastatin at dose of 20mg or 40mg daily is a rational and cost-effective first choice, with extensive evidence of clinical effectiveness and safety, and a low cost.

The number of prescriptions for lipid-regulating drugs has risen by over 150% between 2001/02 and 2005/06. However, due to reductions in the prices of some drugs, the overall cost has risen by only 28%. In the financial year 2005/06, prescribing of lipid-regulating drugs accounted for 37.3 million items (see more detailed figures below) and £538 million in prescription costs. Statins accounted for 95% of these items. If PCTs with below 69% use (which is the level achieved by the top quartile of trusts) of simvastatin and pravastatin increased this to 69% over £84.7m would be saved in a year.

#### Prices for a 28-day course of statin treatment: 1

- Atorvastatin 10-80 mg/day is £18.03 £28.21 (Lipitor, Pfizer Ltd) (13.4 million items)
- Fluvastatin 20-80mg/day is £13.99 £17.60 (Lescol, Novartis Pharmaceuticals UK Ltd) (486,000 items)

- Pravastatin 10-40mg/day is £2.49 (20mg) £4.57 (non-proprietary), £15.05 £27.61 (Lipostat, Bristol-Myers Squibb Pharmaceuticals Ltd) (2.16 million items)
- Rosuvastatin 5-40mg/day is £18.03 £29.69
   (Crestor, AstraZeneca UK Ltd) (1.4 million items)
- Simvastatin 10-80mg/day is £1.89 £26.42 (non-proprietary), £18.03 - £29.69 (Zocor, Merck Sharp & Dohme Ltd) (17.8 million items)
- Simvastatin 10mg is also available OTC

#### Key steps to increasing low-cost statin prescribing:

- Ensure that NICE recommendations on statin prescribing are followed. NICE recommends statin therapy for the primary prevention of cardiovascular disease in adults who have a 20% or greater 10 -year risk of developing cardiovascular disease. In addition, guidance recommends that when therapy is initiated, the statin chosen should usually be of low acquisition cost. <sup>2</sup>
- Conduct a prescribing audit of new prescriptions of statins to check NICE recommendations are being complied with. Changing practice with new prescriptions is the simplest way to bring down rates of prescription of expensive statins.
- Conduct regular audits of statin prescribing to ensure NICE guidance is being complied with. There may be clinical reasons why some patients need to take a more expensive statin initially. Lower cost drugs, such as simvastatin or pravastatin, might not suit all patients. If the drug first chosen is poorly tolerated and leads to adverse reactions which cannot be addressed by modifying the dose, the patient will need to be transferred to another statin. However, in the absence of these factors simvastatin or pravastatin should be prescribed.

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- Conduct a prescribing audit of patients who have been taking statins for some time. These patients can also be transferred by GPs to a low-cost statin, such as simvastatin or pravastatin, provided that there are no clinical reasons for them to continue on the more expensive drug.
- Analyse prescribing data down to GP practice level and offer prescribing advice to GP practices prescribing more expensive statins without good reason.

#### **Endnotes**

- <sup>1</sup> Drug Tariff for statins, September 2006. www.ppa.org.uk/edt/September\_2006/mindex.htm
- $^{\rm 2}\,$  NICE. Statins for the prevention of cardiovascular events, January 2006.

www.nice.org.uk/page.aspx?o=TA094guidance

#### **Further information**

NICE. Statins for the prevention of cardiovascular events, January 2006. www.nice.org.uk/page.aspx?o=TA094guidance

PACT Centre - Primary prevention of cardiovascular disease, May 2005 www.ppa.org.uk//news/pact-052005.htm

Drug Tariff online www.drugtariff.com/

#### Percentage of low cost statin prescribing

The indicator is the number of prescription items for low cost statins (simvastatin and pravastatin). This is expressed as a percentage of the total number of prescriptions for all statins (excluding combination products). The data is for the quarter shown at the top of the page.

For a full definition of how this is calculated go to: www.productivity.nhs.uk/definitions

#### **Productivity opportunity**

This is the money that would be saved if every PCT achieved a 68.7% rate of low cost statin prescribing. This is the level achieved by the top quartile of trusts in Q1 2006/7. The average cost for prescriptions for simvastatin and pravastatin together is substituted for the average cost for other statins, to reach 68.7%. Greater savings will be achieved for larger shifts. Savings are expressed as annualised figures by multiplying by four the savings of the quarter measured.

For a full definition of how this is calculated go to: www.productivity.nhs.uk/definitions

For frequently asked questions go to: www.productivity.nhs.uk/faq

The following tables show the percentage of low cost statin prescribing relative to total statin prescribing.

For further information go to <a href="www.institute.nhs.uk">www.institute.nhs.uk</a> For queries about your data, please email productivity@institute.nhs.uk

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# NHS

# Percentage of low cost statin prescribing

<b>∇</b> National position		Percentage of low cost statins	Productivity opportunity  Change from last period		•
)	Haringey Teaching PCT	80.8%	£0	<b>A</b>	+2.1%
2	Southwark PCT	79.4%	£0	<b>A</b>	+2.5%
13	Islington PCT	79.4%	£0	<b>A</b>	+0.4%
4	Tower Hamlets PCT	79.3%	£0	<b>A</b>	+7.1%
22	City and Hackney Teaching PCT	77.9%	£0	<b>A</b>	+2.4%
25	Kingston PCT	77.8%	£0	<b>A</b>	+5.5%
NATIO	ONAL TOP QUARTILE: Trusts above this line performed in	1 the top 25% [77.0%]			
37	Lambeth PCT	76.6%	£4,920	<b>A</b>	+2.5%
88	Bromley PCT	76.6%	£8,580	<b>A</b>	+1.5%
11	Waltham Forest PCT	76.4%	£7,726	<b>A</b>	+7.2%
13	Richmond and Twickenham PCT	76.2%	£8,267	<b>A</b>	+0.6%
17	Harrow PCT	75.2%	£26,852		0.0%
51	Lewisham PCT	74.9%	£31,209	<b>A</b>	+1.8%
55	Camden PCT	74.6%	£22,930	<b>A</b>	+1.2%
6	Sutton and Merton PCT	74.5%	£57,919	<b>A</b>	+0.5%
57	Hounslow PCT	74.4%	£37,938	<b>A</b>	+0.6%
52	Greenwich Teaching PCT	74.1%	£34,056	<b>A</b>	+3.4%
66	Newham PCT	73.5%	£61,721	<b>A</b>	+2.3%
70	Enfield PCT	72.7%	£82,266	<b>A</b>	+2.8%
7	Wandsworth PCT	71.9%	£70,783	<b>A</b>	+4.1%
<u> </u>	Redbridge PCT	71.8%	£87,474	_	-0.8%
34	Brent Teaching PCT	70.8%	£108,230	<b>A</b>	+1.6%
36	Croydon PCT	70.7%	£113,419	_	-0.1%
	DNAL AVERAGE Grey shading indicates poorer than aver		2110,410		<b>U.1.</b>
39	Havering PCT	70.1%	£127,581	_	+6.5%
8	Hammersmith and Fulham PCT	68.5%	£72,525		0.0%
05	Kensington and Chelsea PCT	67.7%	£87,357	<b>V</b>	-0.3%
13	Barking and Dagenham PCT	66.5%	£122,366	_	+3.7%
14	Hillingdon PCT	66.4%	£179,042	_	+1.4%
17	Ealing PCT	65.7%	£258,957	_	+0.9%
22	Barnet PCT	64.2%	£300,666	_	+2.6%
27	Westminster PCT	63.2%	£152,932		+0.5%
	ata / Not Applicable	00.270	2132,332		- 0.0 /

The change from last period gives the absolute value change in the indicator compared to the previous quarter. A green arrow indicates an improvement and a red arrow indicates a deterioration in performance. The changes reflect both real changes and also changes in data quality, especially in the case of larger changes. Where a trust provided invalid data in the last quarter, or it is a new organisation, no change is shown.

**3.1 Increasing low cost statin prescribing:** The indicator is the number of prescription items for low cost statins (simvastatin and pravastatin). This is expressed as a percentage of the total number of prescriptions for all statins (excluding combination products). The data is for the quarter shown at the top of the page.

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## Percentage of low cost statin prescribing

SHA: London						
	Percentage of low cost statins	Productivity opportunity	Change from last period			
Bexley Care Trust						

The change from last period gives the absolute value change in the indicator compared to the previous quarter. A green arrow indicates an improvement and a red arrow indicates a deterioration in performance. The changes reflect both real changes and also changes in data quality, especially in the case of larger changes. Where a trust provided invalid data in the last quarter, or it is a new organisation, no change is shown.

**3.1 Increasing low cost statin prescribing:** The indicator is the number of prescription items for low cost statins (simvastatin and pravastatin). This is expressed as a percentage of the total number of prescriptions for all statins (excluding combination products). The data is for the quarter shown at the top of the page.