

Our Ref:

TCM/JV/tr

Date:

1st March 2018

David J. Rowlands Chair Petitions Committee National Assembly for Wales Cardiff Bay Cardiff CF99 1NA ABMU Health Board Headquarters One Talbot Gateway, Seaway Parade, Port Talbot SA12 7BR

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Dear Mr Rowlands

Thank you for your letter asking for the Health Boards perspective, in respect to the petition P-05-784 Prescription drug dependence and withdrawal – recognition and support.

Across Wales there is a recognition of high volume of prescribing of both anxiolytics and hypnotics and antidepressants. The All Wales Medicines Strategy Group (AWMSG) Primary Care Prescribing Indicators has shown that, although the prescribing volume of hypnotics and anxiolytics has reduced, there remains variation between the Health Boards and GP Practices. Our rate in Wales remains high in comparison with England, with six of the seven Health Boards in Wales within the highest prescribing quantity when compared to the English Clinical Commissioning Groups.

Dependence on Benzodiazepines is a well known risk and clear guidelines exist for the prescribing of these products as short term anxiolytics and hypnotics, so as to reduce the risk of prescribing dependency e.g. BNF, Maudsley Prescribing Guidelines. In addition there is a NICE guidance on short term management of insomnia which advises that, if after non-drug therapy options have been explored, they should be used in the lowest dose possible for the shortest duration possible, in strict accordance to their licensed indications and for no more than 2-4 weeks. If used in this way then dependence is unlikely.

If longer term prescriptions are required which could lead to dependence there are also clear guidelines on gradual withdrawal of these medications so as to minimize the withdrawal symptoms should the patient request this or should the Clinician feel it is

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clinically indicated. If patients present with a complex picture e.g. significant psychosocial, psychological problems or co morbidity they can access specialist help from local drug and alcohol services and / or the Community Mental Health Team.

AWMSG has developed an Educational Pack: Material to Support Appropriate Prescribing of Hypnotics and Anxiolytics across Wales and provides examples of practice protocols to allow Clinicians to agree a consistent approach for the prescribing, review and discontinuation of treatment.

Significant work has been undertaken in primary care to help people to reduce and stop benzodiazepines, some of which have been led by pharmacist led reduction clinics.

Antidepressants do not cause dependence and are generally not considered to be addictive. The fear of addiction can sometimes be a barrier to concordance with antidepressants which are the first line choice for depression and anxiety.

When stopping therapy with antidepressants, guidance advises that this should be done slowly, over at least 4 weeks, in order to avoid experiencing 'discontinuation effects'. These effects are usually mild and short lived and are not unlike the withdrawal syndrome with rebound anxiety, mood disturbances and a variety of physical complaints e.g. dizziness.

Patients are advised of these possible effects on commencement of antidepressants and through the use of patient leaflets etc. Again, should the patient struggle with cessation of medication, they would have access to specialist medical advice through Community Mental Health Team or Local Primary Care Mental Health Services.

ABMU Health Board officers work in close collaboration with partners across Western Bay including Local Authority, Leisure and Third Sector partners to identify and put into place alternative pathways, group therapy and one to one support to individuals to address underlying mental health issues, loneliness and isolation and to prevent and mitigate the need for prescribing. Each Local Authority area has introduced Local Community Connects who work in geographically defined communities to link people into local support services. There is a wealth of Third Sector support groups and Men's Sheds that have also been successfully established which provide stress management, mindfulness activities and coping strategies.

A number of the GP clusters across the Health Board have also invested a considerable proportion of their cluster funding to contract in low level (tier 0 and 1) advice and support to patients with low mood, anxiety and depression, including CBT and one-to-one counselling. For example, Bridgend East have invested £121,000 in a 5 day a week counselling service through a local provider, Karuna Counselling. Bridgend North have invested £93,000 in Ty Elis, a local Third Sector Counselling and counsellor training provider, and Llwchwr have invested £68,000 in CBT Counselling sessions.

In addition, the Neath Hub Pacesetter employs the services of a Health Board Tier 1/zero Mental Health Counsellor to receive patients triaged from the GP practices in Neath with

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low mood, anxiety and depression and provides one-to-one support to address underlying issues and signpost into the most appropriate support service.

A number of the clusters across the Health Board have also invested in Cluster Pharmacists who work within individual practices to support appropriate medicines usage, audit and support practices with appropriate management and reduction of benzodiazepines and anti-depressants.

ABMU Health Board recognises the issues these medications have in relation to their use and there has been a focus on reducing prescribing, through the mechanisms we identify. The Health Board recognises that there is further potential to support patients to reduce their medication burden.

I trust you will find this response helpful and if I can help further please do not hesitate to contact me.

Yours sincerely

TRACY MYHILL
CHIEF EXECUTIVE

Tracy Myhell