

## **SAND abstract No. 49 from the BEACH program 2002–03**

### **Subject: Health status and management of patients on non-steroidal anti-inflammatory drugs**

**Organisation supporting this study:** Merck Sharp and Dohme

**Issues:** Prevalence of non-steroidal anti-inflammatory medication (NSAID) use in general practice patients; self-reported general health status of general practice patients taking NSAID medications; prevalence of rheumatoid arthritis among these patients; patient corticosteroid use among these patients; rate of hospitalisation associated with gastrointestinal problems for general practice patients taking NSAID medications; other gastrointestinal side effects for general practice patients taking NSAID medications.

**Sample:** 5,554 encounters from 192 GPs; data collection period 29/10/2002 – 21/12/2002 and 21/01/2003 – 24/02/2003.

**Method:** Detailed in the paper entitled 'SAND Method: 2002-03' on the FMRC website ([http://www.fmrc.org.au/publications/SAND\\_abstracts.htm](http://www.fmrc.org.au/publications/SAND_abstracts.htm)).

### **Summary of results**

The age-sex distribution of respondents had a somewhat greater proportion of female patients (62.5%, 95% CI: 60.1–64.8) than the total BEACH (general practice) encounters (57.4%, 95% CI: 57.0–58.6).

NSAIDs were taken by 14.3% (792/5554) of respondents - 7.8% (95% CI: 6.8–8.8) were taking a cox-2 inhibitors and 6.5% (95% CI: 5.6–7.3) were taking another NSAID. Only two respondents were taking both a cox-2 inhibitor and another NSAID. Over one third (37%, 294/788) of respondents on NSAIDs were aged between 45-64 years, while the age group most likely to be on NSAIDs were respondents aged 65 years and over (27% of those aged over 64 years were taking an NSAID). Of those on NSAIDs 6.8% had rheumatoid arthritis and 13.0% had taken corticosteroids in the previous 12 months, most for less than one month's duration.

Of those on NSAIDs, 5.7% (44/796) had previously been hospitalised with a gastrointestinal complaint. Of those previously hospitalised most were currently on cox-2 inhibitors (34/44). A further 31% of respondents on NSAIDs had experienced some adverse gastrointestinal side effects that did not lead to hospitalisation.

Using the Standardised Calculator of Risk Events (SCORE) to assess risk of future gastrointestinal events, two thirds of respondents on NSAIDs had a moderately increased risk of a serious GI side effect associated with taking NSAIDs (SCORE > 10). The mean risk levels for respondents on cox-2 inhibitors was significantly higher than for respondents on other NSAIDs (mean SCORE 14.6, 95% CI: 13.9-15.2 versus 10.8 95% CI:10.0-11.6).

*Correspondence to: Stephanie Knox, GPSCU*