

# Explaining variation in the use of non-steroidal anti-inflammatory drugs

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**Overall research objective:** To examine Non-steroidal anti-inflammatory drug (NSAID) prescribing patterns, and assess the impact NICE guidance has had on NSAID prescribing patterns.

**Background:** NSAIDs can induce adverse events, and in England prescription of NSAIDs has been estimated to result in approximately 12,000 upper gastro-intestinal (GI) events (perforations, ulcers, bleeds, etc.) and 2,500 potentially avoidable deaths each year (Blower et al, 1997). Due to selective NSAIDs having a lower incidence of GI events (Laine et al, 2003) NICE (NICE, 2001) recommended that certain high risk groups of arthritis patients (e.g. those aged over 65) should be prescribed selective NSAIDs, rather than non-selective NSAIDs. We plan to extract data from GP computer systems in order to assess whether the introduction of guidelines has had an effect on clinical practice, and thereby reduced the level of inappropriate care. Attempts will also be made to identify other doctor, practice, and patient characteristics that are associated with variation in the prescribing of NSAIDs.

## References

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