

Family Practitioner Services

General Pharmaceutical Services

Annual Statistics 2021/22



Published June 2022

Purpose

The data contained in this publication are presented on a financial year basis for the year ending 31st March 2022. They present a view of community prescription dispensing in Northern Ireland and are primarily based on prescription forms submitted by primary pharmaceutical contractors to Family Practitioner Services, BSO for payment. They do not cover secondary and private pharmaceutical provision.

Information is provided on dispensing contractors as well as volumes and costs of items dispensed by various patient demographics and therapeutic groups. Comparator information on dispensing contractors and dispensed items from across the UK is also presented. Data detailed in this publication are also available in spreadsheet format (Microsoft Excel) to aid secondary analysis on the [General Pharmaceutical Services and Prescribing Statistics website](#).

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We want your feedback

We welcome any feedback on any aspect of these statistics, which can be provided by email to: Info.BSO@hscni.net

Additional information about these statistics is located at the back of this publication.



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Key Facts



- **There were 43.2 million items dispensed**
This was an increase of 3.6% on 2020/21 and was a similar level of dispensing to that seen prior to the COVID-19 pandemic.
- **The total ingredient cost was £456.2 million**
This was an increase of 0.4% on the previous year.
- **Anti-depressants were dispensed to almost 20% of the population**
This figure rose to more than 25% in the most deprived areas in Northern Ireland.



- **Northern Ireland had 526 community pharmacies**
This is the lowest figure recorded since the beginning of this series.
- **There were 27.6 pharmacies per 100,000 people**
Fermanagh & Omagh had the highest per capita concentration of pharmacies (38.9 per 100,000 people).

Lisburn & Castlereagh had the lowest concentration with 18.1 pharmacies per 100,000 people.

Introduction

This publication provides a statistical overview of pharmaceutical activity in Northern Ireland between April 2021 and March 2022. It is based on payment claims (prescription forms) submitted by community pharmacists, dispensing doctors and appliance suppliers to Family Practitioner Services (FPS). The information does not include prescribing in a secondary care (e.g. hospital) or private setting.

This is a National Statistics Publication

It has been produced by independent statisticians within the FPS Information Unit. They are on secondment from the Northern Ireland Statistics and Research Agency (NISRA).



The UK Statistics Authority designated these statistics as National Statistics on 11th May 2022. National Statistics status means that official statistics meet the highest standards of trustworthiness, quality and public value.

All official statistics should comply with all aspects of the [Code of Practice for Statistics](#). They are awarded National Statistics status following an [assessment](#) by the Authority's regulatory arm.

The Authority considers whether the statistics meet the highest standards of Code compliance, including the value they add to public decisions and debate.

These statistics were considered as part of a wider assessment of the BSO Family Practitioner Services statistics. Since the assessment by the UK Statistics Authority, we have continued to comply with the Code of Practice for Statistics. Find out more about National and Official Statistics [here](#).

Use of a new data source

The data source used to compile this publication has changed since the 2020/21 report. This is due to the introduction of a new prescription dispensing database by FPS during 2021/22. The new database incorporated a number of improvements compared with the data source previously used. The impact of these changes is summarised below.

Cost Adjustments

The new database allows for retrospective cost adjustments to be assigned to individual contractors and prescription items. These adjustments typically arise due to uncollected prescriptions or late cost changes.

This enhancement means that ingredient cost totals can be more accurately categorised in this publication in terms of contractor type and dispensing pharmacy location.

As a result, this annual publication fully reflects the impact of cost adjustments. It should be noted though that associated quarterly data, issued during 2021/22, was based on unadjusted costs because of timing issues associated with retrospective adjustments.

The difference between the unadjusted and adjusted cost figures for 2021/22 was approximately £57,000.

Age figures

The new database calculates patient age based on the last day of the month during which the prescription was processed. The previous data source calculated this figure based on the first day of the month. This has led to differences in the region of 0.5% to 0.6% for some age categories. Differences of this magnitude will not distort any trend analysis.

Geographic breakdowns

The proportion of records which can be matched to geographic areas (such as Local Commissioning Group or Local Government District) has improved under the new database. This has led to a difference of 0.1% to 0.2% for geographic breakdowns. Differences of this magnitude will not distort any trend analysis.

British National Formulary (BNF) classifications

The new database removed any historic differences between the BNF classifications used by FPS and those used by the NHS Business Services Authority in England, ensuring consistency when making comparisons between Northern Ireland and England. It should be noted that the reporting of BNF has recently been reviewed in England as well to further improve consistency.

Around 0.5% of items dispensed in Northern Ireland had a different classification to that used in England. The overwhelming majority of these items were recorded as Appliances (chapter 21) in Northern Ireland but classified as being in the Eye (chapter 11), Ear, Nose and Oropharynx (chapter 12) and Skin (chapter 13) in England.

The English classifications are now used in this report and caution should be exercised when comparing figures for previous years for chapters 11, 12, 13 and 21.

Other developments

This year's report introduces a number of changes to the detailed analysis provided concerning anti-depressants, diabetes medication and products, and opioid analgesics.

The information for individuals receiving such items is now taken at the time the first prescription containing those items was processed during the financial year. In last year's publication, this information had been extracted based on the date of the final prescription processed.

This change was made to ensure consistency with historic figures previously provided in response to Freedom of Information requests and Assembly Questions. All the relevant pre-2021/22 figures contained in this report and the associated annex tables have been revised to reflect the new methodology.

The analysis has also been enhanced to encompass additional breakdowns of dispensing by Multiple Deprivation Measure (MDM) quintiles, following user feedback.

User Engagement

Statisticians in the Information Unit are regularly in contact with key users of the statistics. While previously readership surveys were used to provide an overall assessment of whether user needs were being met, the current approach employed is to supplement these surveys with focused consultations with key users on a rolling basis.

This approach helps to gain greater insight into how the statistics are used and to identify additional specific requirements. In addition, any ad hoc requests for information are recorded centrally in a database and these records are used to provide intelligence from a wider set of users in relation to changing requirements. An outline of future developments as a result of user engagement is provided in the [General Pharmaceutical Services Statistics User Engagement Action Plan](#).

1. Overview

This section provides statistics on dispensing activity across all contractors in Northern Ireland in 2021/22.

1.1 Dispensing by contractor type

There were 536 contractors dispensing prescription items in Northern Ireland on 31st March 2022. This was a decrease of two contractors compared with the previous year. Whilst a series low, contractor numbers have remained relatively stable in recent years, only decreasing by 1.8% since 2014/15 when there were 546 active contractors.

Table 1.1: Total Number of Contractors by Type, 2021/22

Contractor Type	Number of contractors	%
Community Pharmacy	526	98.1
Appliance contractors	2	0.4
Dispensing doctors	8	1.5
Overall Total	536	100

1.2 Total dispensing

There were 43.2 million items dispensed in the community in Northern Ireland in 2021/22 across all contractors. This was an increase of 3.6% on the previous year and similar to the number of items dispensed in 2019/20, prior to the Covid-19 pandemic.

Dispensing activity in Northern Ireland continues to be dominated by community pharmacies, who accounted for 99.2% of all items dispensed.

Table 1.2: Millions of items dispensed by contractor type, 2021/22

Contractor Type	No of items	%
Community Pharmacy	42.9	99.2
Appliance contractors	0.2	0.6
Dispensing doctors	0.1	0.2
Overall Total	43.2	100

1.3 Most dispensed medications

The ten most commonly dispensed medications accounted for nearly one quarter (23.4%) of total dispensing in Northern Ireland in 2021/22. The most commonly dispensed medication was Atorvastatin, which is typically used to treat high blood cholesterol, with almost 1.5 million items dispensed.

The ten most commonly dispensed medications and some of their typical uses are listed below. All medications are listed under their generic non-branded name and the figures incorporate all strengths available on prescription.

Table 1.3: Ten most commonly dispensed medications in Northern Ireland, 2021/22

Medication	Items Dispersed	Typical use
Atorvastatin	1,474,064	Treatment of high blood cholesterol
Omeprazole	1,431,233	Treatment of excess stomach acid
Co-codamol	1,249,817	Pain relief
Levothyroxine	1,088,383	Treatment for thyroid hormone deficiency
Sertraline	879,901	Treatment for depression and anxiety
Bisoprolol	827,817	Treatment for hypertension
Salbutamol	822,006	Treatment for respiratory conditions
Aspirin	797,244	Pain relief / heart attack prevention
Lansoprazole	790,077	Treatment of excess stomach acid
Amlodipine	730,796	Treatment for hypertension / angina

1.4 Total ingredient cost

The total ingredient cost¹ for prescription items dispensed in Northern Ireland in 2021/22 was £456.2 million. This was an increase of 0.4% on the previous year, which was substantially lower than the increase in the number of items dispensed (3.6%).

Ingredient costs for prescription items can vary and therefore can impact the total cost. An example is Sertraline, an anti-depressant which was the fifth most commonly dispensed medication in 2020/21 and 2021/22. Although the number of Sertraline items increased

¹ Ingredient cost is based on the gross cost of items before discounts. It will not necessarily reflect the actual amount paid by FPS. It also excludes payments made to community pharmacists for providing dispensing services.

between 2020/21 and 2021/22 (from 813,243 to 879,901), the total ingredient cost over this period decreased from £8 million to £2.9 million. As shown below, dispensing from community pharmacies accounted for 96.2% of the total ingredient cost for 2021/22.

Table 1.4: Ingredient cost by contractor type, 2021/22

Contractor Type	Ingredient cost (£ millions)	%
Community Pharmacy	439.0	96.2
Appliance contractors	16.6	3.6
Dispensing doctors	0.5	0.1
Overall Total	456.2	100

1.5 Total ingredient costs by medication

The ten medications with the highest ingredient costs represented almost 14% of the total ingredient cost for 2021/22. Apixaban, a medication used for the treatment and prevention of blood clots, had the highest ingredient cost at £18.8 million.

Table 1.5 lists the ten medications with the highest ingredient costs in 2021/22 and their typical uses. All medications are listed under their generic non-branded name and the figures incorporate all strengths available on prescription.

Table 1.5: Ten medications with highest total ingredient costs in Northern Ireland, 2021/22

Medication	Ingredient Cost (£ millions)	Typical use
Apixaban	18.8	Treatment and prevention of blood clots
Budesonide + Formoterol	6.2	Treatment for asthma
Melatonin	5.9	Treatment for insomnia
Fluticasone + Salmeterol	5.2	Treatment for asthma
Co-codamol	4.9	Pain relief
Lamotrigine	4.7	Treatment for epilepsy
Sacubitril + Valsartan	4.7	Treatment for heart failure
Buprenorphine	4.5	Pain relief
Insulin aspart	4.4	Treatment for diabetes
Omeprazole	4.4	Treatment for excess stomach acid

There is minimal crossover between the ten most dispensed medications (see table 1.3) and the ten with the highest ingredient costs. Following the significant reduction in the cost of Sertraline, Co-codamol and Omeprazole are the only medications to appear on both lists in 2021/22.

This highlights the relatively low ingredient costs of many commonly dispensed medications. As a result, an increase in total ingredient cost for a particular medication is not necessarily the result of increased total dispensing.

Part One

**Community Pharmacy
in Northern Ireland 2021/22**

2. Pharmacy Statistics

This section contains basic statistics on community pharmacies including the number, size and distribution of pharmacies throughout Northern Ireland².

2.1 Number of Pharmacies

There were 526 community pharmacies in Northern Ireland on 31st March 2022. This was a reduction of two pharmacies compared with 2020/21. This is the lowest number of pharmacies here in the last ten years.

This does not mean that there has been a consistent pattern of declining numbers. There remains considerable variation across the region due to local variations in terms of openings and closures.

At Local Government District (LGD) level, pharmacy numbers have increased slightly or remained static in six of Northern Ireland's 11 districts over the last 10 years. The greatest percentage increase has been in Fermanagh & Omagh where there are now 46 pharmacies, an increase of 2.2% (or one pharmacy) since 2011/12.

The greatest percentage drop in pharmacy numbers has been in Lisburn & Castlereagh, which had 27 pharmacies at the end of 2021/22. This was a reduction of 6.9% (or two pharmacies) on its total in 2011/12.

A full breakdown of changes in pharmacy numbers across all LGDs over the past decade can be seen in Table 2.1 on the following page.

² All geographic breakdowns in this chapter are based on pharmacy location.

Table 2.1: Change in pharmacy numbers at LGD level between 2011/12 and 2021/22

Local Government District	2011/12	2021/22	% Change
Antrim & Newtownabbey	33	33	0.0
Ards & North Down	41	39	-4.9
Armagh City, Banbridge & Craigavon	48	48	0.0
Belfast	132	128	-3.0
Causeway Coast & Glens	41	40	-2.4
Derry City & Strabane	44	44	0.0
Fermanagh & Omagh	45	46	2.2
Lisburn & Castlereagh	29	27	-6.9
Mid & East Antrim	31	31	0.0
Mid Ulster	39	38	-2.6
Newry, Mourne & Down	51	52	2.0
Northern Ireland	534	526	-1.5

2.2 Pharmacies per 100,000 population

The number of pharmacies per 100,000 people in Northern Ireland was 27.6 in 2021/22, which was a reduction of 0.3 on the previous year.

This continues the slow decline in the ratio of pharmacies to population which began in 2011/12. At that time there were 29.4 pharmacies per 100,000 population. This trend has been caused by population growth combined with a reduction in pharmacy numbers.

There is considerable variation in the figures for individual LGDs across Northern Ireland, which can be seen in Table 2.2 on the following page.

In 2021/22, Fermanagh & Omagh had the most pharmacies per 100,000 people. Its figure, 38.9 pharmacies, was more than twice that of Lisburn & Castlereagh, which had the lowest ratio of pharmacies to population (18.1).

Table 2.2: Pharmacies per 100,000 population for Northern Ireland LGDs, 2021/22

Local Government District	Pharmacies per 100,000 population ³
Fermanagh & Omagh	38.9
Belfast	37.2
Derry City & Strabane	29.1
Newry, Mourne & Down	28.3
Causeway Coast & Glens	27.6
Mid Ulster	25.1
Ards & North Down	24.0
Antrim & Newtownabbey	22.8
Mid & East Antrim	22.1
Armagh City, Banbridge & Craigavon	21.8
Lisburn & Castlereagh	18.1
Northern Ireland	27.6

At a UK level, Northern Ireland continues to have the most pharmacies per 100,000 population. The latest available statistics, which relate to 2020/21, show that the UK average was 21.1 pharmacies per 100,000 people. Northern Ireland's figure was 27.9, which was over 30% higher than the UK average.

Table 2.3: Pharmacies per 100,000 population across the United Kingdom, 2020/21

Region	Pharmacies per 100,000 population
Northern Ireland	27.9
England	20.6
Scotland	23.0
Wales	22.5
United Kingdom	21.1

The higher figure for Northern Ireland may be linked to the low number of dispensing GP practices here. These practices can dispense prescriptions directly to patients who meet

³ The LGD figures have been calculated using a 2018-based population projection for 2021 due to the unavailability of 2021 mid-year estimates at the time of production. The Northern Ireland figure is based on 2021 Census data.

certain criteria⁴. In Northern Ireland, there are four dispensing practices (with eight dispensing doctors), accounting for 0.2% of all items dispensed. In the rest of the UK, according to the latest available figures, there are 1,223 dispensing practices, representing around 7% of all medicines dispensed annually⁵.

2.3 Distance to Nearest Pharmacy⁶

It is estimated that over 99% of the Northern Ireland population lived within five miles of their nearest pharmacy in 2021/22. In many cases, the distance between home and pharmacy was far shorter – 72.6% of all people lived within one mile of their nearest pharmacy. This meant that the average distance from home to pharmacy was 0.9 miles. A full overview is provided in Table 2.4 below.

Table 2.4: Population proximity to pharmacies at LGD level, 2021/22

Local Government District	Population within 1 mile (%)	Population within 3 miles (%)	Population within 5 miles (%)
Antrim & Newtownabbey	76.4	96.7	100.0
Ards & North Down	84.2	99.1	100.0
Armagh City, Banbridge & Craigavon	60.3	90.4	99.0
Belfast	98.8	100.0	100.0
Causeway Coast & Glens	57.5	86.6	98.9
Derry City & Strabane	81.8	94.9	99.2
Fermanagh & Omagh	47.9	82.0	97.9
Lisburn & Castlereagh	80.5	96.4	100.0
Mid & East Antrim	70.9	89.8	98.7
Mid Ulster	48.9	83.4	98.8
Newry, Mourne & Down	59.3	92.2	100.0
Northern Ireland	72.6	93.0	99.4

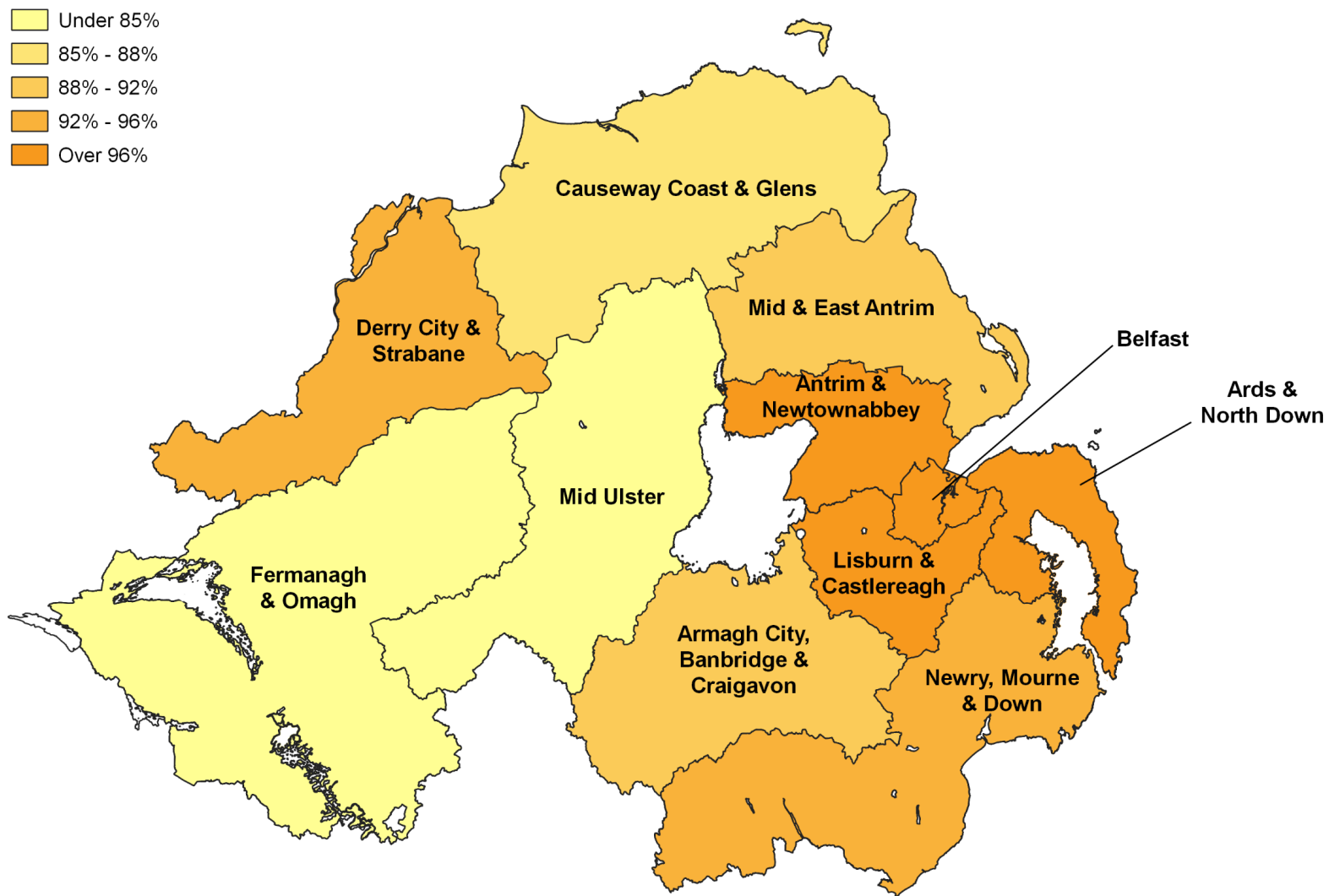
⁴ Full details of these criteria are available in the technical notes at the back of this publication.

⁵ Figures taken from [Dispensing Doctors' Association](#).

⁶ Population is defined as active GP registration person counts at postcode level at October 2021. Distance is calculated on a straight line basis. See technical notes for further information.

While pharmacy coverage is almost universal at five mile level, there is some local variation across Northern Ireland at shorter distances. This is illustrated in Map 2.1 on the following page which shows the percentage of the population living within a three mile radius of a community pharmacy by LGD in 2021/22.

Map 2.1: Percentage of population living within three miles of a pharmacy by LGD, 2021/22



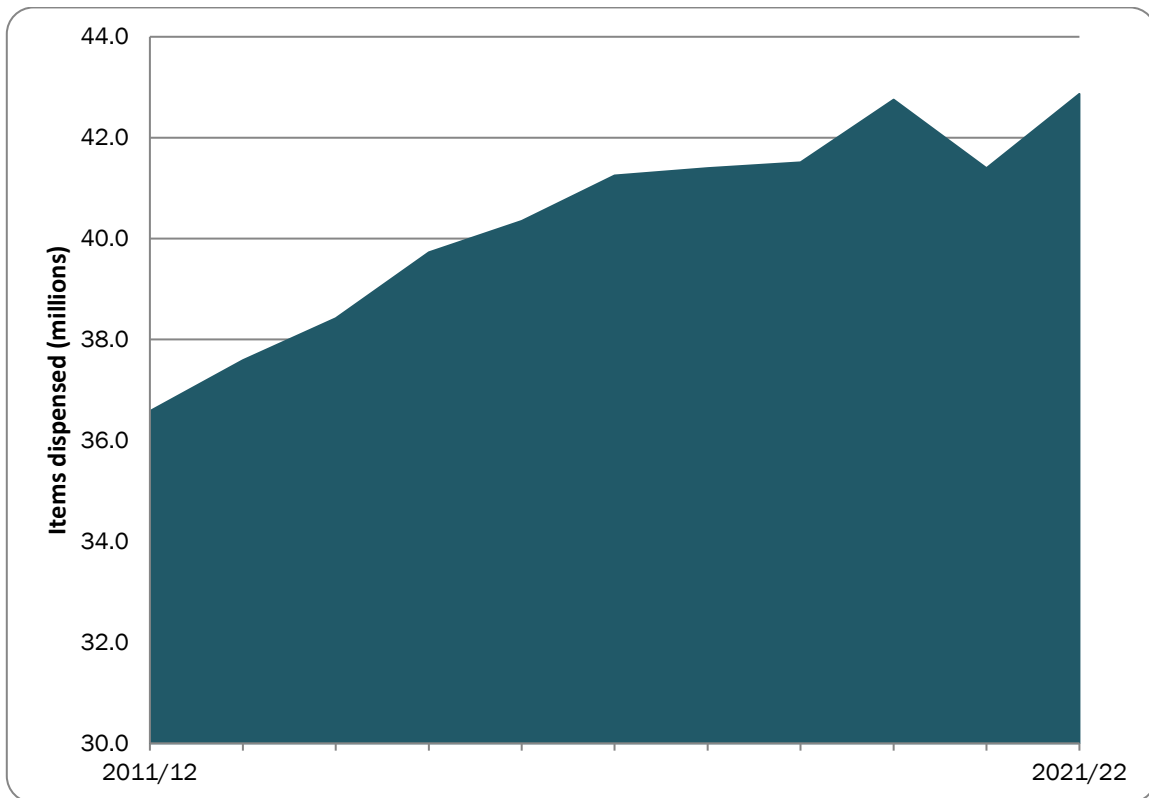
3. Pharmacy Dispensing Volumes

This section contains information on items dispensed solely within community pharmacies throughout Northern Ireland in 2021/22⁷.

3.1 Total Dispensing

The total number of prescription items dispensed by community pharmacies was 42.9 million in 2021/22. This was an increase of 3.6% on the previous year and a similar level of item dispensing to that seen prior to the COVID-19 pandemic. The total number of items dispensed has risen by 17.2% since 2011/12, when the figure stood at 36.6 million items.

Chart 3.1: Trend in number of items dispensed, 2011/12 to 2021/22



In terms of Local Government Districts, Derry City & Strabane had the greatest number of items dispensed per head of the population at 28.0. The lowest figure was recorded in Lisburn & Castlereagh where 17.3 items were dispensed per person in 2021/22.

⁷ All geographic breakdowns in this chapter are based on pharmacy location.

Table 3.1: Total number of items dispensed by LGD, 2021/22

Local Government District	Items dispensed (millions)	Items per person ⁸
Derry City & Strabane	4.2	28.0
Belfast	9.0	26.1
Fermanagh & Omagh	2.8	23.7
Newry, Mourne & Down	4.1	22.5
Causeway Coast & Glens	3.3	22.4
Ards & North Down	3.6	22.0
Mid & East Antrim	3.0	21.7
Mid Ulster	3.1	20.6
Armagh City, Banbridge & Craigavon	4.3	19.6
Antrim & Newtownabbey	2.8	19.5
Lisburn & Castlereagh	2.6	17.3
Northern Ireland	42.9	22.5

3.2 Dispensing by pharmacy

The average number of items dispensed per pharmacy was 81,482 in 2021/22, an increase of 4.1% on the previous year. This reflected the general increase in the number of items dispensed, coupled with the reduction in the number of pharmacies.

The average number of items dispensed per pharmacy varied considerably across individual LGDs in 2021/22. Average dispensing volumes were highest in Mid & East Antrim, where pharmacies dispensed an average of 97,963 items. Fermanagh & Omagh had the lowest average figure at 61,043 items per pharmacy.

While lower dispensing volumes are often associated with rural areas, the figure for Belfast suggests that this is not always the case. It had the second-lowest average in Northern Ireland at 70,103 items per pharmacy. This appears to be driven by the high concentration of smaller pharmacies in this council area.

⁸ The LGD figures have been calculated using a 2018-based population projection for 2021 due to the unavailability of 2021 mid-year estimates at the time of production. The Northern Ireland figure is based on 2021 Census data.

Table 3.2: Average annual dispensing per pharmacy by LGD, 2021/22

Local Government District	Average Items Dispensed ⁹
Mid & East Antrim	97,963
Derry City & Strabane	96,300
Lisburn & Castlereagh	95,461
Ards & North Down	91,666
Armagh City, Banbridge & Craigavon	90,048
Antrim & Newtownabbey	85,346
Mid Ulster	82,075
Causeway Coast & Glens	81,260
Newry, Mourne & Down	79,693
Belfast	70,103
Fermanagh & Omagh	61,043
Northern Ireland	81,482

There were 17 pharmacies in Northern Ireland which dispensed an average of 2,000 or fewer items per month in 2021/22. This represented a 22.7% decrease on the previous year and possibly reflects the general increase in dispensing volumes seen in 2021/22.

Almost 60% of pharmacies dispensing 2,000 or fewer items per month are located in Belfast, representing 7.8% of all pharmacies in that LGD.

At a UK level, Northern Ireland had the lowest average dispensing volumes per pharmacy in 2020/21, the most recent year for which comparable statistics are available. At the time, the UK average was 7,275 items per pharmacy per month. Northern Ireland's figure was 6,538 items, which was 10.1% lower than the UK average. These figures can be seen in Table 3.3 on the following page.

⁹ These figures do not include items dispensed from pharmacies which closed permanently prior to 31st March 2022.

Table 3.3: Average monthly dispensing at UK level, 2020/21

Region	Average items dispensed
Northern Ireland	6,538
England	7,282
Scotland	6,608
Wales	8,883
United Kingdom	7,275

It should be noted that average dispensing numbers may not be directly comparable across the UK due to differences in prescribing practices.

For example, in Northern Ireland and Scotland, GPs and other prescribers can instruct pharmacists to split single items and dispense them at set intervals in the interest of patient safety. In England and Wales, the practice can be to prescribe a reduced quantity of items at a greater frequency. See the further information section for additional details.

Further information about monthly average dispensing volumes, including historical trend data, is available in [Annex tables](#) 1.4 and 1.5.

4. Pharmacy Dispensing Costs

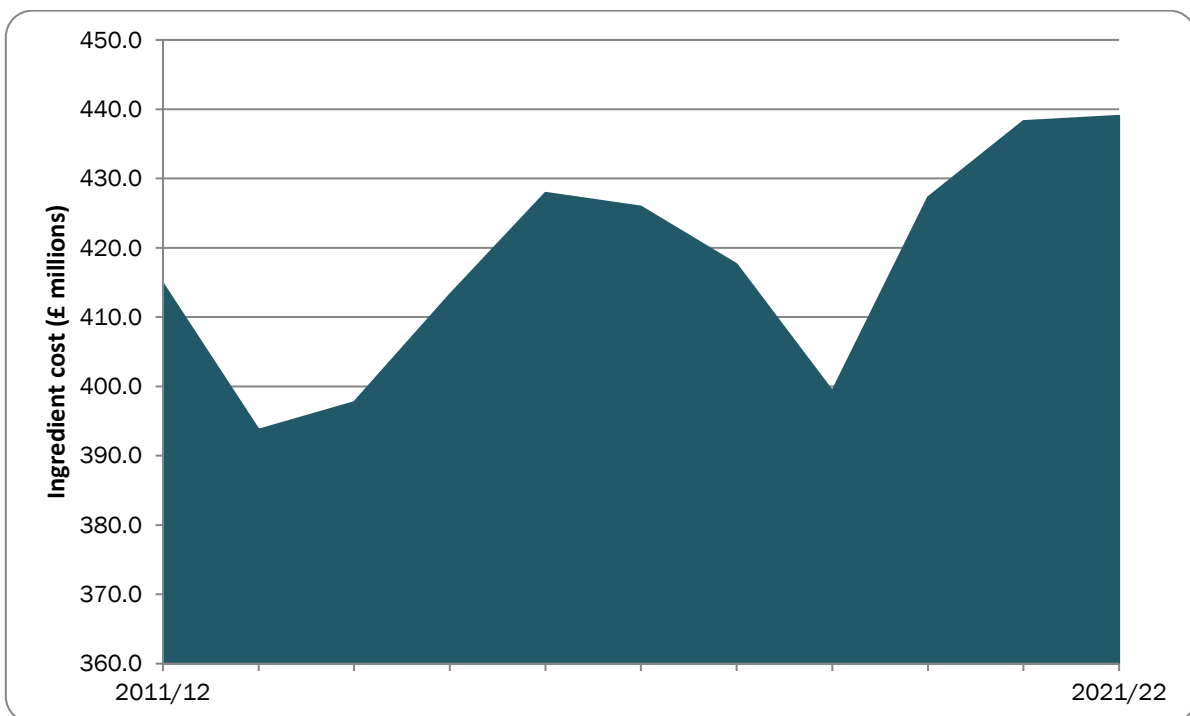
This section contains information on ingredient cost¹⁰ of items dispensed solely within community pharmacies throughout Northern Ireland in 2021/22¹¹.

4.1 Total ingredient cost

The total ingredient cost for prescription items dispensed by community pharmacies in 2021/22 was £439 million. This was an increase of 0.2% on the previous year, which was much lower than the percentage increase in items dispensed during the period.

The annual total is influenced by drug prices as well as dispensing volumes. As a result, total ingredient cost has fluctuated since 2011/12 despite generally increasing dispensing levels. For example, this year's total ingredient cost was affected by a drop in the cost of Sertraline, one of Northern Ireland's most commonly dispensed medications¹².

Chart 4.1: Trend in total ingredient cost, 2011/12 to 2021/22



¹⁰ Ingredient cost is based on the gross cost of items before discounts. It will not necessarily reflect the actual amount paid by FPS. It also excludes payments made to community pharmacists for providing dispensing services.

¹¹ All geographic breakdowns in this chapter are based on pharmacy location.

¹² See Section 1.4 for more information.

The average cost per item dispensed by community pharmacies across Northern Ireland was £10.24 in 2021/22. There was, however, some variation at LGD level. The average figure ranged from £9.29 per item in Derry City & Strabane to £11.57 per item in Ards & North Down.

Table 4.1: Total ingredient cost and cost per item by LGD, 2021/22

Local Government District	Ingredient Cost (£millions)	Cost per item
Ards & North Down	41.4	£11.57
Lisburn & Castlereagh	28.7	£11.13
Antrim & Newtownabbey	29.8	£10.57
Causeway Coast & Glens	34.1	£10.48
Mid & East Antrim	31.5	£10.36
Belfast	92.6	£10.31
Armagh City, Banbridge & Craigavon	43.2	£9.98
Fermanagh & Omagh	28.0	£9.96
Newry, Mourne & Down	40.4	£9.76
Mid Ulster	30.2	£9.69
Derry City & Strabane	39.4	£9.29
Northern Ireland	439.0	£10.24

Belfast had the highest total ingredient cost at £92.6 million. This accounted for 21.1% of the total ingredient cost for Northern Ireland. Fermanagh & Omagh had the lowest cost at £28.0 million.

4.2 Ingredient cost per pharmacy

The average ingredient cost of items dispensed per pharmacy was £834,536 in 2021/22. This was an increase of 0.5% on the previous year.

As with dispensing volumes, there were noticeable local variations at LGD level. There were three LGDs – Lisburn & Castlereagh, Ards & North Down, and Mid & East Antrim – where the average ingredient cost per pharmacy was over £1 million. By contrast, pharmacies in Fermanagh & Omagh had an average ingredient cost of £607,801 in

2021/22. A full breakdown of average ingredient costs per pharmacy at LGD is provided below.

Table 4.2: Average annual ingredient cost per pharmacy by LGD, 2021/22

Local Government District	Average Total Ingredient Cost (£) ¹³
Lisburn & Castlereagh	1,062,960
Ards & North Down	1,060,335
Mid & East Antrim	1,014,853
Antrim & Newtownabbey	902,265
Armagh City, Banbridge & Craigavon	899,033
Derry City & Strabane	894,365
Causeway Coast & Glens	851,832
Mid Ulster	795,068
Newry, Mourne & Down	777,787
Belfast	722,519
Fermanagh & Omagh	607,801
Northern Ireland	834,536

¹³ These figures do not include items dispensed from pharmacies which closed permanently prior to 31st March 2022.

Part Two

**Dispensing in
Northern Ireland 2021/22**

5. Dispensing Analysis

This section provides a detailed analysis of total dispensing activity in Northern Ireland in 2021/22. Unlike previous sections, it includes dispensing information from all dispensing contractors i.e. community pharmacies, dispensing doctors and appliance contractors¹⁴.

5.1 Background information

The majority of the figures within this section are based on the matching of patient attributes, such as age, gender and geographical location, to prescription records.

This process relies on data captured during the scanning of paper prescriptions submitted for payment by contractors to FPS. In some cases, the data capture is unable to successfully read the patient attributes printed on the prescription.

In 2021/22, patient attribute information was retrieved for 90.7% of all prescription items dispensed. This sample has been investigated for any significant bias and is considered to be representative of patient prescribing patterns across Northern Ireland.

However, the incomplete nature of this data should be considered when examining absolute numbers or trends across time. In particular, it should be noted that scan rates vary on an annual basis. For instance, patient attributes were only retrieved from around 75% of prescriptions scanned in 2018/19.

This limitation only applies to demographic and geographical breakdowns based on patient attributes within this part of the publication. Overall figures for Northern Ireland and geographic information based on community pharmacy location are not affected by the scanning issue.

5.2 Dispensing by age and gender

Females accounted for 56.7% of all prescription items which could be attributed to a gender in 2021/22. This proportion varied little at LGD level – the highest figure was 58.0% for Mid & East Antrim, the lowest was 54.9% in Fermanagh & Omagh.

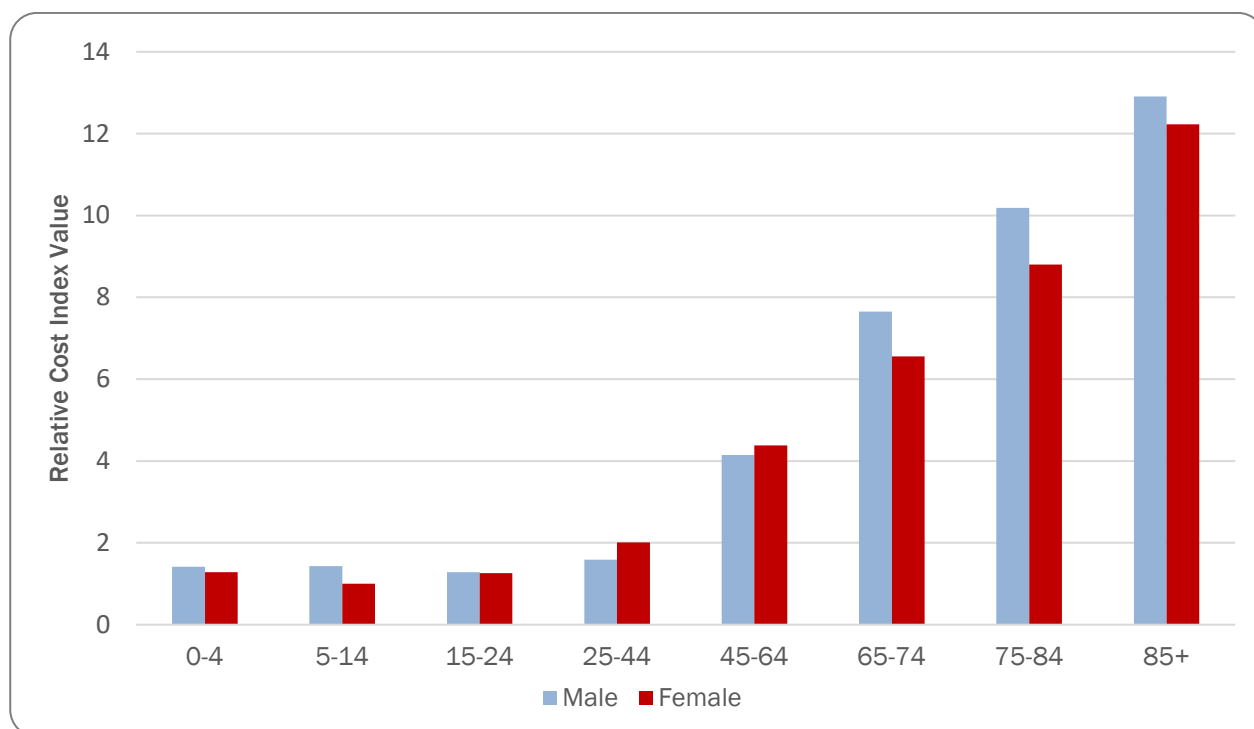
¹⁴ All geographic breakdowns in this chapter are based on patient location.

Around 45% of items which could be attributed to an age were dispensed to patients aged 65 or over, with a further 34.5% to patients in the 45-64 age group. These groups also had the highest total ingredient costs of £176.0 million and £132.2 million respectively. A full breakdown is provided in the statistical tables accompanying this publication.

5.3 Relative Cost Index

The relationship between age/gender and prescribing cost can be examined through the use of a relative cost index. The index values are calculated by dividing the total ingredient cost of items dispensed to each age and gender group by the equivalent mid-year population estimates¹⁵.

Chart 5.1: Relative Cost Index values by age and gender, 2021/22



The chart above shows that broadly speaking, as might be expected, prescribing costs for both genders progressively increase with age. For example, a male in the 85+ group will typically have a cost index value which is 12.9 times higher than that for a female in the 5-14 group. In older age brackets, men tend to have higher costs than their female counterparts, reflecting the generally poorer health of older males.

¹⁵ At the time of creation, 2021 mid-year estimates were not available and 2018-based population projections for 2021 were used for 2021/22 calculations.

5.4 Dispensing by BNF Chapter

The British National Formulary (BNF) is a reference source published jointly by the British Medical Association and the Royal Pharmaceutical Society providing professional guidelines on medicine use. It is divided into chapters relating to therapeutic groups, which provide an indication of the condition for which they have generally been prescribed.

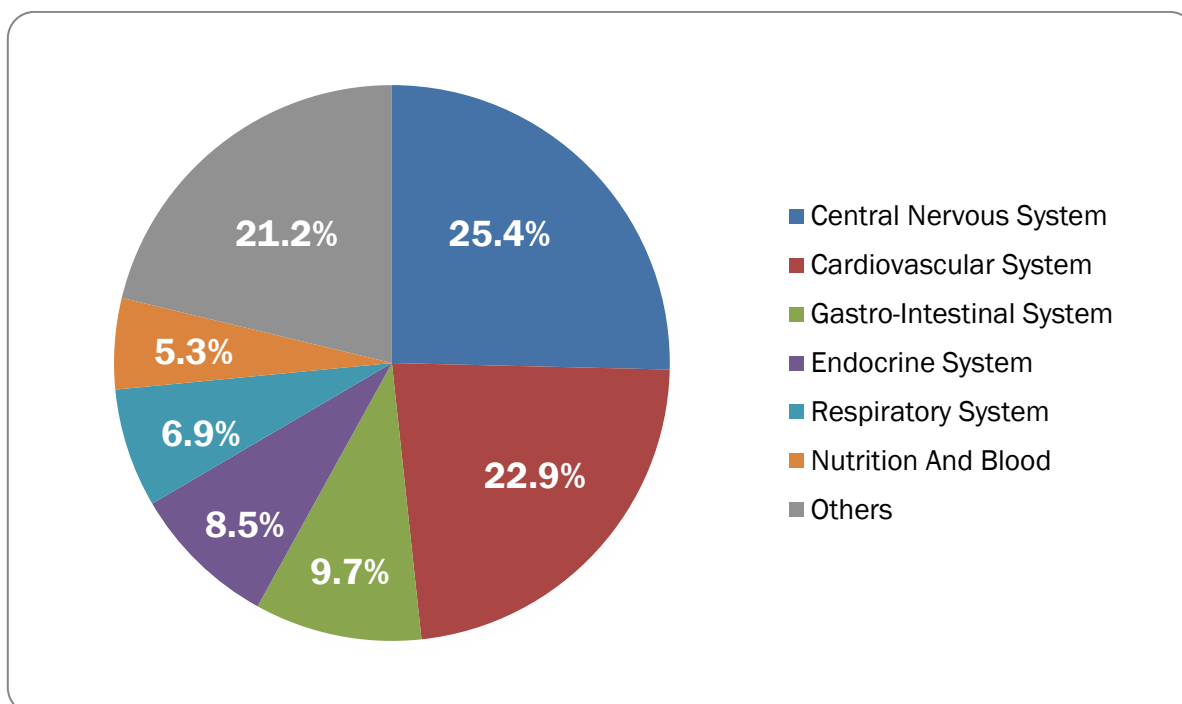
The table below contains an overview of dispensing and associated ingredient cost by BNF chapter in Northern Ireland in 2021/22.

Table 5.1: Items dispensed and total ingredient cost by BNF chapter, 2021/22

BNF Chapter	No of items (millions)	Ingredient Cost (£millions)
1. Gastro-Intestinal System	4.2	28.2
2. Cardiovascular System	9.9	66.5
3. Respiratory System	3.0	43.0
4. Central Nervous System	11.0	97.3
5. Infections	1.9	9.8
6. Endocrine System	3.7	58.3
7. Obstetrics, Gynaecology And Urinary Tract Disorders	1.1	10.6
8. Malignant Disease And For Immunosuppression	0.2	12.3
9. Nutrition And Blood	2.3	35.0
10. Musculoskeletal And Joint Diseases	1.5	9.3
11. Eye	0.5	4.4
12. Ear, Nose And Oropharynx	0.6	4.3
13. Skin	1.7	14.7
14. Immunological Products And Vaccines	0.0	0.2
15. Anaesthesia	0.1	3.0
19. Other Drugs And Preparations	0.1	1.8
20. Dressings	0.4	12.1
21. Appliances	1.0	21.5
22. Incontinence Appliances	0.1	2.0
23. Stoma Appliances	0.2	12.8
99. Unclassified	0.1	9.2
Overall Total	43.2	456.2

It is clearly evident from the overview that a small number of BNF chapters represent the bulk of items dispensed. These are the chapters for the central nervous system, the cardiovascular system, the gastro-intestinal system, the endocrine system, the respiratory system and nutrition & blood. As chart 5.2 shows, these six chapters accounted for over three quarters of all items dispensed in Northern Ireland in 2021/22.

Chart 5.2: Items dispensed by BNF chapter, 2021/22



There isn't necessarily a correlation between dispensing volumes and total ingredient cost among BNF chapters, leading to significant variations in the average cost per item.

The highest average cost per item in 2021/22 was for items related to BNF chapter 8 (malignant disease and for immunosuppression) at £66.71. Meanwhile, items related to the treatment of infections (BNF chapter 5) had the lowest average cost per item at £5.24.

Dispensing associated with BNF chapter 14 (immunological products and vaccines) continues to be affected by the Covid-19 pandemic. In 2021/22, 6,733 items belonging to this chapter were dispensed, which remains 81.3% lower than the equivalent figure for 2019/20. Vaccinations which were specifically provided for protection against Covid-19 did not require a prescription and so are not included in this total.

5.5 Dispensing by Age Group and BNF chapter

The overall figures for dispensing by BNF chapter hides variations in the type of conditions most commonly treated across different age groups. For example, medications for skin appear among the most-dispensed treatments for patients aged below 25 but do not feature within the top six BNF chapters discussed above.

Table 5.2: The three most commonly dispensed chapters by age group, 2021/22

Age Group	Most dispensed chapters	% of Items
0-4	5. Infections	20.0
	13. Skin	17.9
	9. Nutrition and Blood	15.7
5-14	3. Respiratory System	25.2
	4. Central Nervous System	15.9
	13. Skin	13.5
15-24	4. Central Nervous System	26.5
	3. Respiratory System	13.6
	13. Skin	11.0
25-44	4. Central Nervous System	38.2
	1. Gastro-Intestinal System	9.9
	3. Respiratory System	8.3
45-64	4. Central Nervous System	30.3
	2. Cardiovascular System	20.9
	1. Gastro-Intestinal System	10.5
65-74	2. Cardiovascular System	32.1
	4. Central Nervous System	20.4
	6. Endocrine System	9.8
75-84	2. Cardiovascular System	34.3
	4. Central Nervous System	17.8
	6. Endocrine System	9.6
85+	2. Cardiovascular System	30.6
	4. Central Nervous System	18.5
	1. Gastro-Intestinal System	10.4

The breakdown of items dispensed to the 0-4 age group indicates how, in some cases, normal dispensing patterns are re-establishing themselves after the initial disruption of the Covid-19 pandemic.

The 0-4 age group have historically received a much higher proportion of items relating to BNF chapter 5 (infections) than other groups. This chapter, which includes antibiotics, is generally the most dispensed chapter for that group.

But during 2020/21, which encompassed the initial phases of the pandemic, dispensing of such items to 0-4 year olds fell by 57.6%. As a result, chapter 5 dropped out of the three most dispensed chapters for that age cohort.

In 2021/22, however, the number of items dispensed to the 0-4 age group for the treatment of infections have returned to their pre-pandemic levels and the associated BNF chapter has re-emerged as the most dispensed chapter for the group.

5.6 Dispensing by Deprivation

Patient postcode information was available for 90.7% of all items dispensed in 2021/22. Data is unavailable for the remaining prescriptions due to the limitations of the prescription scanning process used by FPS.

The availability of postcode information allows dispensing activity to be mapped to the Multiple Deprivation Measure (MDM), which is the official measure of geographical deprivation for Northern Ireland.

For the purposes of this publication, the areas covered within the MDM were divided into five quintiles, each of which contained approximately 20% of Northern Ireland's population.

The data indicates that the number of items dispensed and the total ingredient cost is higher for areas with higher levels of deprivation. There were 9.1 million items dispensed to patients living in the most deprived quintile in 2021/22 whereas 6.1 million were dispensed to those residing in the least deprived quintile.

Table 5.3: Items dispensed and ingredient cost by deprivation quintile, 2021/22

Deprivation Quintile	Total items (million)	% Items	Total Ingredient cost (£millions)	% Cost
1 (most)	9.1	21.1	88.3	19.4
2	8.6	19.9	87.6	19.2
3	8.0	18.6	84.3	18.5
4	7.2	16.8	79.2	17.4
5 (least)	6.1	14.1	71.5	15.7
Unassignable	4.1	9.5	45.4	9.9

The relationship between deprivation and ingredient cost is more complex. While more deprived quintiles have higher total ingredient costs, this arises due to the volume of prescriptions dispensed. Meanwhile, for most BNF chapters, the ingredient cost per item is higher for patients residing in less deprived areas. This can be illustrated using the figures related to the six most dispensed BNF chapters in 2021/22.

Table 5.4: Cost per item by deprivation quintile for most dispensed BNF chapters, 2021/22

BNF Chapter	Quintile 1 (most)	Quintile 2	Quintile 3	Quintile 4	Quintile 5 (least)
1. Gastro-Intestinal System	£5.89	£6.39	£6.81	£7.26	£7.88
2. Cardiovascular System	£5.69	£6.37	£6.73	£7.22	£7.92
3. Respiratory System	£13.85	£14.25	£14.28	£14.71	£15.83
4. Central Nervous System	£8.30	£8.68	£8.89	£8.87	£9.49
6. Endocrine System	£15.53	£15.39	£15.63	£16.23	£17.18
9. Nutrition And Blood	£13.99	£14.91	£15.17	£16.33	£17.42

It is evident that the ingredient cost per item is substantially greater across all six chapters for those residing in the least deprived quintile compared with those in the most deprived one.

The differences between the most and least deprived quintiles are particularly large in terms of the Cardiovascular System. In that case, the ingredient cost per item for the least deprived quintile is almost 40% greater than that for the most deprived quintile.

5.7 UK comparisons

There are some differences in how dispensing statistics are produced across the UK, which can make comparisons difficult. As a result, the Northern Ireland figures in this sub-section have been calculated on a calendar year basis to facilitate comparisons with England and Wales.

In 2021, Northern Ireland had the second-highest level of dispensing in the UK at 22.5 items per person. By comparison, Wales had the highest figure at 26.1 items. Both had a notably higher level of dispensing than either Scotland or England. These figures may, however, not be directly comparable due to differing prescribing practices across each region as described in section 3.2.

Northern Ireland had the highest ingredient cost per person in the UK in 2021. Its figure increased by 0.3% compared with the previous year to £240.84 per person. By comparison, the equivalent figure for England was £170.92. A summary of the comparative figures for 2021 is provided in the table below.

Table 5.5: Prescription items and ingredient cost per person across the UK, 2021

Region	Prescription items per person	Ingredient cost per person
Northern Ireland	22.5	£240.84
England	19.9	£170.92
Scotland†	18.7	£204.43
Wales	26.1	£195.72

† Figures for 2020/21 financial year

6. Detailed analysis

This section provides more detailed dispensing statistics for classes of medication which have been identified as being of particular interest to publication users.

6.1 Background Information

This section contains detailed patient statistics relating to the dispensing of anti-depressants, opioid analgesics and diabetes medication & products in Northern Ireland during 2021/22.

The figures in this section are based on matching patient attributes to prescription records. This process and its limitations were previously outlined in section 5.1. Due to these limitations, statistics can only be provided for 2019/20 onwards.

Although not all prescriptions can be matched, it is likely that the available data presents an accurate picture of individuals receiving medications on a long-term basis. Such individuals generally receive multiple prescriptions over a year and their information can be retrieved if any of these prescriptions are successfully matched.

It should be noted that it is impossible to infer the medical conditions for which patients are being treated on the basis of the medications dispensed to them. Many medications are used to treat multiple conditions. For example, anti-depressants are often used in the treatment of anxiety disorders.

6.2 Anti-depressants

Anti-depressants were dispensed to 372,134 people in Northern Ireland during 2021/22, equating to 19.6% of its total population. The number of individuals prescribed anti-depressants represented an increase of 4.2% compared with 2020/21.

There was significant variation in relation to the proportion of individuals receiving anti-depressants across different groups within the population. As illustrated by Table 6.1 on the following page, 63.6% of individuals who received anti-depressants were female.

Table 6.1: Individuals receiving anti-depressants by sex, 2021/22

Sex	Number of individuals	%
Male	135,471	36.4
Female	236,663	63.6
Northern Ireland	372,134	100.0

These figures indicate that anti-depressants were dispensed to almost one-quarter (24.5%) of Northern Ireland’s female population in 2021/22. The equivalent figure for males was 14.5%.

The overall numbers conceal significant variation in the proportion of individuals receiving anti-depressants across different age/gender segments of the population¹⁶. The lowest proportion (0.5%) was observed among males aged under 18. The highest (37.9%) was seen among females aged between 45 and 64. The proportions for each segment are provided in Table 6.2 below.

Table 6.2: Percentage of population receiving anti-depressants by age and sex, 2021/22

Age Group	% Male	% Female	% Overall
Under 18	0.5	0.9	0.7
18 – 24	9.4	17.9	13.5
25 – 34	14.0	23.6	18.8
35 – 44	18.1	29.4	23.9
45 – 64	23.3	37.9	30.8
65 – 74	21.7	34.6	28.3
75 – 84	20.4	33.3	27.5
85+	20.9	32.4	28.3
All Ages	14.5	24.5	19.6

¹⁶ Please refer to the Introduction for details on a methodology change concerning the categorisation of individuals into age groups within this section.

There continued to be significant variations in the level of anti-depressant dispensing across Northern Ireland. In terms of Local Government Districts (LGDs), the proportion of the population receiving anti-depressants in 2021/22 was highest in Derry City & Strabane at 22.5%. It was closely followed by Belfast at 21.9%. By contrast, anti-depressants were dispensed to 16.0% of the population of Mid Ulster and 17.5% of the population in Fermanagh & Omagh.

Despite this variation, the proportion of the population who had been dispensed anti-depressants rose in all LGDs in 2021/22. A full breakdown of anti-depressant dispensing at LGD level is provided in table 6.3 below.

Table 6.3: Number of individuals receiving anti-depressants by LGD, 2021/22

Local Government District	Number of Individuals	% of total Population
Antrim & Newtownabbey	28,346	19.6
Ards & North Down	32,346	19.9
Armagh City, Banbridge & Craigavon	40,360	18.3
Belfast	75,496	21.9
Causeway Coast & Glens	27,762	19.1
Derry City & Strabane	34,069	22.5
Fermanagh & Omagh	20,690	17.5
Lisburn & Castlereagh	26,468	17.8
Mid & East Antrim	28,252	20.2
Mid Ulster	24,177	16.0
Newry, Mourne & Down	33,302	18.1
Unknown ¹⁷	866	N/A
Northern Ireland	372,134	19.6

An analysis of anti-depressant dispensing by deprivation quintile showed that the proportion of the population receiving such medications was highest in areas with higher levels of deprivation. In the most deprived quintile, anti-depressants were dispensed to over 25% of the population. In the least deprived areas, the equivalent figure was 16.4%.

¹⁷ Geographic information is not available for a small number of individuals due to errors and omissions in the address information. They are included in the overall Northern Ireland figures and age/sex breakdowns.

Table 6.4: Number of individuals receiving anti-depressants by deprivation quintile, 2021/22

Deprivation Quintile	Number of Individuals	% of total Population
1 (most)	90,117	25.4
2	80,554	20.8
3	72,600	18.2
4	68,901	17.5
5 (least)	59,096	16.4
Unassignable	866	N/A
Northern Ireland	372,134	19.6

6.3 Diabetes medication and products

Diabetes medication and products were dispensed to 102,740 people in 2021/22, which was an increase of 5.5% on the previous year. Overall, 5.4% of Northern Ireland's population received diabetes medication and products during the year.

As shown in Table 6.5, males represented 56.0% of individuals who received diabetes medication and products. This meant that these medications were dispensed to 6.1% of the male population in 2021/22. The equivalent figure for females was 4.7%.

Table 6.5: Individuals receiving diabetes medication & products by sex, 2021/22

Sex	Number of individuals	%
Male	57,488	56.0
Female	45,252	44.0
Northern Ireland	102,740	100.0

There were significant differences in dispensing activity across different population groups. At one extreme, the proportion of individuals receiving diabetes medication and products was 0.4% among those aged under 18. At the other, these items were dispensed to 21.2% of males aged between 75 and 84.

As shown in Table 6.6, there is also a general trend whereby, after the age of 44, there is a significant rise in the number of males receiving diabetes medication and products compared with their female peers.

Table 6.6: Percentage of population receiving diabetes medication & products by age and sex, 2021/22

Age Group	% Male	% Female	% Overall
Under 18	0.4	0.4	0.4
18 – 24	0.9	1.4	1.1
25 – 34	1.3	3.0	2.1
35 – 44	2.7	3.1	2.9
45 – 64	9.3	5.9	7.5
65 – 74	18.1	10.9	14.4
75 – 84	21.2	13.4	16.9
85+	17.5	11.1	13.4
All Ages	6.1	4.7	5.4

Although the proportion of the population who had been dispensed diabetes medication and products rose in all LGDs in 2021/22, there was some geographic variation.

Mid & East Antrim had the highest rate of dispensing at 5.9% of the population in 2021/22. At the other end of the scale, the equivalent rate for Mid Ulster was 4.8%. A breakdown of dispensing by LGD is provided in Table 6.7 on the following page.

An analysis of dispensing by deprivation quintile showed that the proportion of the population receiving diabetes medication and products was highest in areas with higher levels of deprivation. In the most deprived quintile, these items were dispensed to 6.3% of the population. In the least deprived areas, the equivalent figure was 4.7%. A breakdown of dispensing by deprivation quintile is provided in Table 6.8 on the following page.

Table 6.7: Number of individuals receiving diabetes medication & products by LGD, 2021/22

Local Government District	Number of Individuals	% of total Population
Antrim & Newtownabbey	8,044	5.6
Ards & North Down	9,462	5.8
Armagh City, Banbridge & Craigavon	11,571	5.3
Belfast	18,533	5.4
Causeway Coast & Glens	7,948	5.5
Derry City & Strabane	8,459	5.6
Fermanagh & Omagh	6,286	5.3
Lisburn & Castlereagh	7,432	5.0
Mid & East Antrim	8,279	5.9
Mid Ulster	7,194	4.8
Newry, Mourne & Down	9,356	5.1
Unknown	176	N/A
Northern Ireland	102,740	5.4

Table 6.8: Number of individuals receiving diabetes medication & products by deprivation quintile, 2021/22

Deprivation Quintile	Number of Individuals	% of total Population
1 (most)	22,224	6.3
2	22,231	5.8
3	21,202	5.3
4	20,024	5.1
5 (least)	16,883	4.7
Unassignable	176	N/A
Northern Ireland	102,740	5.4

6.4 Opioid Analgesics

Opioid analgesics were dispensed to 100,785 people in 2021/22, which was an increase of 0.6% on the previous year. Overall, the proportion of the population receiving opioid analgesics remained static at 5.3%.

As shown in Table 6.9 below, females accounted for 60.9% of individuals who received opioid analgesics. This meant that those medications were dispensed to 6.3% of the female population during 2021/22. The equivalent figure for males was 4.2%.

Table 6.9: Individuals receiving opioid analgesics by sex, 2021/22

Sex	Number of individuals	%
Male	39,443	39.1
Female	61,342	60.9
Northern Ireland	100,785	100.0

There was a clear link between the dispensing of opioid analgesics and age. The proportion of individuals receiving such medications is less than 10% in all groups under the age of 65. After this point, the level of dispensing rises to a maximum of 25.0% observed among females aged 85 and over. A detailed breakdown is provided in Table 6.10 below.

Table 6.10: Percentage of population receiving opioid analgesics by age and sex, 2021/22

Age Group	% Male	% Female	% Overall
Under 18	0.1	0.1	0.1
18 – 24	0.5	0.8	0.6
25 – 34	1.5	2.3	1.9
35 – 44	3.1	4.5	3.8
45 – 64	7.1	9.5	8.3
65 – 74	9.9	12.8	11.4
75 – 84	11.2	16.7	14.2
85+	16.0	25.0	21.7
All Ages	4.2	6.3	5.3

As with other medications, there is some local variation in the dispensing of opioid analgesics at LGD level. Due to the link between opioid analgesic dispensing and age, it is likely that these differences are, in part, influenced by local variations in population structure.

In 2021/22, Ards & North Down had the highest proportion observed with 6.5% of its population receiving an opioid analgesic. By contrast, the equivalent figure for Mid Ulster was 4.0%. A full breakdown of the figures for opioid analgesics dispensing at LGD level are provided in Table 6.11 below.

Table 6.11: Number of individuals receiving opioid analgesics by LGD, 2021/22

Local Government District	Number of Individuals	% of total Population
Antrim & Newtownabbey	7,689	5.3
Ards & North Down	10,510	6.5
Armagh City, Banbridge & Craigavon	11,266	5.1
Belfast	20,075	5.8
Causeway Coast & Glens	7,098	4.9
Derry City & Strabane	8,493	5.6
Fermanagh & Omagh	5,724	4.8
Lisburn & Castlereagh	7,353	4.9
Mid & East Antrim	7,498	5.4
Mid Ulster	6,006	4.0
Newry, Mourne & Down	8,870	4.8
Unknown	203	N/A
Northern Ireland	100,785	5.3

An analysis of dispensing by deprivation quintile showed that the proportion of the population receiving opioid analgesics was highest in more deprived areas. In the most deprived quintile, these items were dispensed to 6.8% of the population. In the least deprived areas, the equivalent figure was 4.2%. A breakdown of dispensing by deprivation quintile is provided in Table 6.12 on the following page.

Table 6.12: Number of individuals receiving opioid analgesics by deprivation quintile, 2021/22

Deprivation Quintile	Number of Individuals	% of total Population
1 (most)	24,242	6.8
2	22,654	5.9
3	20,143	5.1
4	18,300	4.6
5 (least)	15,243	4.2
Unassignable	203	N/A
Northern Ireland	100,785	5.3

Additional Notes

1. Dispensing Contractors

There are three types of dispensing contractors featured in this report. These are:

Community Pharmacy –

Community Pharmacies provide various healthcare services to local communities in Northern Ireland. Although the dispensing of prescriptions is often seen as the primary part of their role, they do provide a range of other services such as Health Promotion, Medicines Usage Reviews, Manage Your Medicines and a Minor Ailments service.

Dispensing Doctors –

Dispensing doctors are general practitioners (GPs) who provide primary healthcare to patients who have difficulty getting access to a community pharmacy. Under current arrangements such patients can be put onto a dispensing patients list if they meet the following criteria:

- A patient lives more than five kilometres away from a community pharmacy; and
- The GP practice where a patient normally attends is more than one kilometre from a community pharmacy.

Appliance Supplier –

Appliance suppliers are authorised to dispense pharmaceutical appliance devices such as Stoma appliances.

2. Prescriptions

Prescription forms or prescriptions are submitted on a monthly basis to the Business Services Organisation (BSO) for payment by community pharmacies, appliance contractors and dispensing doctors. In 2021/22, 24.2 million prescriptions were processed and paid by BSO.

They are prescribed by GPs and other non-medical prescribers such as Community Nurses, Supplementary Prescribers, Dentists and a small proportion from Consultants working in the community.

In addition, prescriptions written in other parts of the UK but dispensed in Northern Ireland are also included. The data will include prescriptions that have been ordered on Stock Orders, Hospice Invoices and Pharmacy Vouchers.

Only prescriptions that are subsequently dispensed are included in the data – for example, if a patient does not take a prescription to the pharmacy for dispensing, then no information about that prescription is included in the dataset.

3. Prescription Items

A prescription item is a single supply of a medicine, dressing or appliance written on a prescription form.

If a prescription form includes three medicines it is counted as three prescription items. Item figures do not provide any indication of the length of treatment or quantity of medicine prescribed.

Patients with a long-term condition usually get regular prescriptions.

It should also be noted that the Northern Ireland drug tariff includes the facility of instalment or Multiple Dispensing where the pharmacy supplies part of the total quantity of a prescribed medicine at set intervals (e.g. weekly or daily) as requested by the GP or other authorised prescriber. Regardless of this method of dispensing the prescription item still only counts as one item.

A similar dispensing practice is available in Scotland whilst the instalment dispensing of controlled drugs in England and Wales is

facilitated through prescription items of lesser quantities being prescribed more frequently.

Further information on Multiple Dispensing in Northern Ireland can be found on page 9 of the latest version of the [NI Drug Tariff](#).

4. Ingredient Cost

This is the basic cost of a drug as used in primary care. This is the cost at list price excluding VAT, i.e. the price listed in the national Drug Tariff or in standard price lists and is not necessarily the price that has been paid.

It does not take into account any contract prices or discounts, dispensing costs or fees, so the actual cost to the health service will be different.

In other parts of the UK the equivalent is called the Net Ingredient Cost (NIC) and is used in Prescription Services reports and other analyses, as it standardises prescribing costs nationally, and allows comparisons of data from different sources.

5. British National Formulary (BNF)

From BNF Edition 70 onwards, the British National Formulary moved to a disease-based classification of drugs rather than a drug-based classification.

The Family Practitioner Services Payment System requires the drug-based classification to ensure the accurate reimbursement of drugs to community pharmacists. All statistics on BNF chapters are therefore based on pseudo BNF chapters as of Edition 69. This is consistent with the NHS Business Services Authority method of reporting.

6. Patient Information

Patient information is linked to dispensing data when a prescription form has been successfully scanned. The captured patient Health and Care Number (HCN) is then used to link to patient registration records on the National Health Application and Infrastructure

Services (NHAIS) system. Further information on NHAIS data can be found [here](#).

In the past, BSO had experienced a reduction in scan rates resulting in around 25% of prescription items not having attributed patient information in 2017/18 and 2018/19.

The historic reduction in scanning quality was widespread across Northern Ireland and not just isolated to any particular areas. Further information on scan rates by geographical location can be found in the [Background Quality Report](#).

However, this has recently improved and in 2021/22, 90.7% of prescription items had attributed patient information. This has meant that this proportion of prescriptions will have a geographical area or patient profile assigned.

This constitutes an extremely large and representative sample of patient prescribing patterns across Northern Ireland. As a result, the impact on the robustness of the age, gender and geographical estimates is negligible. Further information on the statistical uncertainty associated with these estimates will be provided in an updated Background Quality Report, to be published by September 2022 on the [BSO website](#).

7. Population

NISRA population figures are used in this release.

The 2021 mid-year estimate was not available at the time of preparation. As a result, a 2018-based population projection for 2021 was used for all sub-Northern Ireland geographies

The population figure for Northern Ireland was taken from the 2021 census. All figures used are published on NISRA website.

Technical Notes

Target Audience

The target audience for this publication has been defined as: the Department of Health, Chief Executives of HSC Trusts in Northern Ireland, health professionals, academics, HSC Stakeholders, the media and the general public.

Main usages

This publication contains national statistics on community pharmacy and general pharmaceutical dispensing for the most recent financial year (and earlier years where available on a comparable basis).

They can be used to monitor trends in general pharmaceutical service over time and across Northern Ireland.

The information can be used to support decision making, inform policy, provide advice to ministers, answer a wide range of Assembly Questions and Freedom of Information requests, for national and local press articles and, where appropriate, for international comparison.

Data Source Information

The data has been primarily sourced from the Family Practitioner Service (FPS) Pharmacy Payment System. Resident population data has been sourced from official NISRA demographic statistics.

The Pharmacy Payment System enables BSO to make payments to pharmaceutical contractors for dispensing prescription items that have been prescribed in primary care (e.g. by General Practitioner, Nurse Practitioner, Dentist, Podiatrist) as well as through the minor ailments scheme available in a number of pharmacies.

Further information on this process can be found [here](#) on the FPS website.

Coverage

Data in this report are published by the financial year (1st April – 31st March) in which the dispensed prescriptions were reimbursed. Although the majority of prescriptions will have been reimbursed in the same month they were dispensed, there will be some that will lie outside this timeframe.

Such cases will include prescriptions submitted for payment at the end of the previous financial year and exclude some prescriptions submitted towards the end of this reporting year which were not submitted for payment by March 2022.

The data is based on prescriptions provided to the Family Practitioner Service (FPS) for reimbursement by community pharmacists, dispensing doctors and appliance suppliers. The information does not include prescribing in a secondary care or private setting for example medications received while in hospital.

Community Pharmacy counts are taken at 31st March for each financial year.

Data Quality Summary

The Pharmacy Payment System is a business-critical payment system which is subject to period audit. The data quality is assessed as very good based on the low percentage of claims which have to be adjusted following payment.

As an administrative data system, there will inevitably be some manual entry errors and, even for automated processes, there may be errors within the claims submitted by primary care contractors.

The extensive validation that occurs prior to payments being made, coupled with the consistency and variance checks carried out during the compilation of this publication means that the data provides a good

representation of FPS activity for the years covered by the report.

Further information can be found in the [background data quality report](#) and [the Quality Assurance of Administrative Data Report](#).

National comparisons

This publication contains comparisons between Northern Ireland and other regions of the United Kingdom. The comparative data is available from the following sources:

England

Statistics on General Pharmaceutical Services:
[General Pharmaceutical Services in England 2015/16 - 2020/21](#)

Prescription Cost Analysis:
[Prescription Cost Analysis – England – 2021/22](#)

Wales

Statistics on General Pharmaceutical Services:
[Community pharmacy services: April 2020 to March 2021](#)

Prescription Cost Analysis:
[Prescription Cost Analysis - NHS Wales Shared Services Partnership](#)

Scotland

Statistics on General Pharmaceutical Services:
[Community Pharmacy - Contractor Activity - Datasets - Scottish Health and Social Care Open Data](#)

Prescription Cost Analysis:
[Dispenser payments and prescription cost analysis - financial year 2020 to 2021 - Dispenser payments and prescription cost analysis](#)

Publication Information

Family Practitioner Services

Family Practitioner Services (FPS) is part of the BSO's Operations Directorate. It provides a range of essential services to Health and Social Care organisations, primary care contractors and patients.

FPS calculates payments to health professionals in the dental, pharmacy, general practice and ophthalmic sectors through Northern Ireland. It also maintains the central register of patients registered with GP practices in Northern Ireland, issuing medical cards and processing changes such as name, address and doctor.

It provides professional advice, support and information to customers and members of the public and maintains the pharmaceutical, dental and the Northern Ireland Primary Medical Performers lists. FPS also provides the call and recall services for breast, cervical and bowel cancer screening in Northern Ireland.

About this publication

This report has been produced by independent statisticians within the FPS Information Unit. They are on secondment from the Northern Ireland Statistics and Research Agency (NISRA). This publication has been compiled in accordance with the Code of Practice for Statistics.

Next edition

This publication is issued annually. It is expected that the next edition shall be published in June 2023. In the interim, quarterly tables are published separately [here](#). The quarterly figures are provisional until the annual publication for that year issues, at which point they are finalised. The release calendar for future statistical publications is available on the BSO website [here](#).

This statistical bulletin and others published by Information Unit within BSO are available to download from the [BSO Internet site](#)