



Business Services
Organisation

Family Practitioner Services

GENERAL PHARMACEUTICAL SERVICES STATISTICS FOR NORTHERN IRELAND ANNUAL STATISTICS

2023 - 2024

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NISRA

Northern Ireland
Statistics and Research Agency

Gníomhaireacht Thuaisceart Éireann
um Staitisticí agus Taighde



Purpose

The data contained in this publication are presented on a financial year basis for the year ending 31st March 2024. 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 45.4 million items dispensed**
This is the highest figure on record and was an increase of 1.7% on 2022/23.
- **The total ingredient cost was £501.3 million**
This was an increase of 3.0% on the previous year and is the highest cost on record.
- **Anti-depressants were dispensed to 26% of the female population**
For males the equivalent proportion was 15%.



- **Northern Ireland had 511 community pharmacies**
This is the lowest figure recorded since the beginning of this series.
- **There were 26.8 pharmacies per 100,000 people**
Fermanagh & Omagh had the highest per capita concentration of pharmacies (39.3 per 100,000 people) but still had the longest average travel distance (1.6 miles compared to the NI average of 0.9 miles).

Lisburn & Castlereagh had the lowest concentration with 17.4 pharmacies per 100,000 people.

Introduction

This publication provides a statistical overview of pharmaceutical activity in Northern Ireland between April 2023 and March 2024. 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.

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). This publication has been compiled in accordance with the Code of Practice for Statistics.

Further information about the work of FPS and the manner in which these statistics were produced can be found at the back of this publication.

This is an Accredited Official Statistics publication



Accredited official statistics are called National Statistics in the Statistics and Registration Service Act 2007 – see [here](#) for further explanation of this terminology. These official statistics were independently reviewed by the Office for Statistics Regulation (OSR) in May 2022. They comply with the standards of trustworthiness, quality and value in the [Code of Practice for Statistics](#) and should be labelled ‘accredited official statistics’. All accredited official statistics should comply with all aspects of the Code of Practice for Statistics. 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, we have continued to comply with the Code of Practice for Statistics, and have made the following improvements this year:

- Quarterly Family Practitioner Services (FPS) General Pharmaceutical Services Statistics publication now includes a new HTML format Key Facts with interactive graphics and the ability to automatically download the data presented in the charts.
- Introduction of additional detailed analyses (Chapter 6) for both anticoagulant and antibiotic medications in the annual excel tables and report.

We have developed a series of statements to demonstrate how we meet the Code in our everyday work. These cover our independence, data quality procedures, how we make our statistics accessible whilst protecting your data, engage with you to meet your needs and, when things go wrong, how we make corrections or, should our services fall below the required standard, how you can make a complaint. All of this information is included in our [Statistics Charter](#).

Our statistical practice is regulated by the OSR. You are welcome to contact us directly with any comments about how we meet these standards (contact the responsible statistician listed at beginning of this publication). Alternatively, you can contact OSR by emailing regulation@statistics.gov.uk or via the OSR website [here](#).

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. In March 2023 a pilot User Engagement showcase event was held to advise users of the current capabilities and future developments of the statistics and obtain feedback from users. 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 2023/24.

1.1 Dispensing by contractor type

There were 522 contractors dispensing prescription items in Northern Ireland on 31st March 2024. This was a decrease of thirteen contractors compared with the previous year. Contractor numbers had remained relatively stable in recent years, but overall have decreased by 4.4% since 2014/15 when there were 546 active contractors.

Table 1.1: Total Number of Contractors by Type, 2023/24

Contractor Type	Number of contractors	%
Community Pharmacy	511	97.9
Appliance contractors	2	0.4
Dispensing doctors	9	1.7
Overall Total	522	100

1.2 Total dispensing

There were 45.4 million items dispensed in the community in Northern Ireland in 2023/24 across all contractors. This was an increase of 1.7% on the previous year and is the highest level of dispensing recorded. This equated to BSO processing 2.1 million prescription forms per month, on average, throughout the year, up 2.0% on 2022/23.

Dispensing activity in Northern Ireland continues to be dominated by community pharmacies, which accounted for 99.3% of all items dispensed.

Table 1.2: Millions of items dispensed by contractor type, 2023/24

Contractor Type	No of items	%
Community Pharmacy	45.1	99.3
Appliance contractors	0.2	0.5
Dispensing doctors	0.1	0.2
Overall Total	45.4	100.0

1.3 Most dispensed medications

The ten most commonly dispensed medications accounted for over one quarter (25.3%) of total drug dispensing¹. The most commonly dispensed medication was Atorvastatin, which is typically used to treat high blood cholesterol, with over 1.7 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, 2023/24

Medication	Items Dispensed	Typical use
Atorvastatin	1,710,349	Treatment of high blood cholesterol
Omeprazole	1,480,562	Treatment of excess stomach acid
Co-codamol	1,250,812	Pain relief
Levothyroxine	1,115,142	Treatment for thyroid hormone deficiency
Sertraline	1,003,530	Treatment for depression and anxiety
Bisoprolol	872,939	Treatment for hypertension
Salbutamol	848,831	Treatment for respiratory conditions
Lansoprazole	826,410	Treatment of excess stomach acid
Amlodipine	813,540	Treatment for hypertension / angina
Aspirin	763,169	Pain relief / heart attack prevention

1.4 Total ingredient cost

The total ingredient cost² for prescription items dispensed in Northern Ireland in 2023/24 was £501.3 million. This was an increase of 3.0% on the previous year.

Ingredient costs for prescription items are quite sensitive to market conditions and hence can vary, impacting the total cost. An example is Co-codamol, a pain relief medication which was the third most commonly dispensed medication in 2023/24. Although the number of Co-codamol items dispensed fell slightly between 2022/23 and 2023/24 (from 1,252,606 to 1,250,812), the total ingredient cost over this period increased from £3.7

¹ Total drug dispensing excludes appliances.

² 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.

million to £4.0 million. As shown below, dispensing from community pharmacies accounted for 96.5% of the total ingredient cost for 2023/24.

Table 1.4: Ingredient cost by contractor type, 2023/24

Contractor Type	Ingredient cost (£ millions)	%
Community Pharmacy	483.8	96.5
Appliance contractors	16.9	3.4
Dispensing doctors	0.6	0.1
Overall Total	501.3	100.0

1.5 Total ingredient costs by medication

The ten medications with the highest total ingredient costs represented almost 15% of the total ingredient cost for total drug dispensing³ for 2023/24. Apixaban, a medication used for the treatment and prevention of blood clots, had the highest total ingredient cost at £12.3 million, a decrease of over 40% on the cost of Apixaban for 2022/23 despite an 8.3% increase in the number of Apixaban items dispensed. Table 1.5 lists the ten medications with the highest total ingredient costs in 2022/23 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, 2023/24

Medication	Ingredient Cost (£ millions)	Typical use
Apixaban	12.3	Treatment and prevention of blood clots
Dapagliflozin	8.6	Treatment for type 2 diabetes mellitus
Sacubitril + Valsartan	8.3	Treatment for heart failure
Omeprazole	7.3	Treatment for excess stomach acid
Empagliflozin	6.7	Treatment for type 2 diabetes mellitus
Budesonide + Formoterol	6.4	Treatment for asthma
Melatonin	5.9	Treatment for insomnia
Atorvastatin	5.0	Treatment for high blood cholesterol

³ Total ingredient cost by medication excludes appliances.

Semaglutide	4.7	Treatment for type 2 diabetes / obesity
Insulin aspart	4.7	Treatment for diabetes

There is minimal crossover between the ten most dispensed medications (see Table 1.3) and the ten with the highest ingredient costs. Omeprazole and Atorvastatin are the only medications to appear on both lists in 2023/24. This highlights the relatively low ingredient costs of many commonly dispensed medications.

Part One

**Community Pharmacy
in Northern Ireland 2023/24**

2. Pharmacy Statistics

This section contains basic statistics on community pharmacies including the number, size and distribution of pharmacies throughout Northern Ireland⁴.

2.1 Number of Pharmacies

There were 511 community pharmacies in Northern Ireland on 31st March 2024. This was a reduction of fourteen pharmacies compared with 2022/23. This is the lowest number of pharmacies here in the last ten years, a period in which numbers were relatively stable until around 2018/19 when numbers began reducing from the 532 open in that year.

At Local Commissioning Group (LCG) level, pharmacy numbers have declined in all but one of Northern Ireland's 5 Health Trust areas over the last 10 years. The Western Trust has retained the same number of pharmacies as were open in 2013/14 at 98 pharmacies, though the current position is a decrease of one pharmacy on the previous year.

The greatest decrease has been in both Belfast and Northern LCGs where the number of pharmacies has reduced by 6.0% (eight and seven pharmacies respectively) since 2013/14.

At Local Government District (LGD) level, pharmacy numbers have declined in all but one of Northern Ireland's 11 districts over the last 10 years. The only increase has been in Fermanagh and Omagh where there are now 46 pharmacies, an increase of 2.2% (or one pharmacy) since 2013/14.

The greatest percentage drop in pharmacy numbers has been in Lisburn & Castlereagh, which had 26 pharmacies at the end of 2023/24. This was a reduction of 10.3% (or three pharmacies) on its total in 2013/14.

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.

⁴ All geographic breakdowns in this chapter are based on pharmacy location.

Table 2.1: Change in pharmacy numbers at LGD level between 2013/14 and 2023/24

Local Government District	2013/14	2023/24	% Change
Antrim & Newtownabbey	33	31	-6.1
Ards & North Down	40	38	-5.0
Armagh City, Banbridge & Craigavon	48	46	-4.2
Belfast	132	125	-5.3
Causeway Coast & Glens	41	38	-7.3
Derry City & Strabane	44	43	-2.3
Fermanagh & Omagh	45	46	2.2
Lisburn & Castlereagh	29	26	-10.3
Mid & East Antrim	31	30	-3.2
Mid Ulster	39	37	-5.1
Newry, Mourne & Down	52	51	-1.9
Northern Ireland	534	511	-4.3

2.2 Pharmacies per 100,000 population

The number of pharmacies per 100,000 people in Northern Ireland was 26.8 in 2023/24, which was a reduction of 2.9% on the previous year.

This continues the gradual decline in the ratio of pharmacies to population over more than a decade. In 2013/14 there were 29.2 pharmacies per 100,000 population. This trend has been influenced by a combination of population growth and 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 2023/24, Fermanagh & Omagh had the most pharmacies per 100,000 people at 39.3. This rate was more than twice that of Lisburn & Castlereagh, which had the lowest ratio of pharmacies to population (17.4).

Table 2.2: Pharmacies per 100,000 population for Northern Ireland LGDs, 2023/24

Local Government District	Pharmacies per 100,000 population ⁵
Fermanagh & Omagh	39.3
Belfast	36.2
Derry City & Strabane	28.5
Newry, Mourne & Down	28.0
Causeway Coast & Glens	26.8
Mid Ulster	24.6
Ards & North Down	23.2
Mid & East Antrim	21.6
Antrim & Newtownabbey	21.3
Armagh City, Banbridge & Craigavon	21.0
Lisburn & Castlereagh	17.4
Northern Ireland	26.8

At a UK level, Northern Ireland continues to have the most pharmacies per 100,000 population. The latest available statistics for all countries, which relate to 2022/23, show that the UK average was 20.6 pharmacies per 100,000 people. Northern Ireland's figure was 27.6, which was 34% higher than the UK average.

Table 2.3: Pharmacies per 100,000 population across the United Kingdom, 2022/23

Region	Pharmacies per 100,000 population
Northern Ireland	27.6
England	20.0
Scotland	23.1
Wales	22.6
United Kingdom	20.6

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

⁵ The Northern Ireland and sub-Northern Ireland figures have been calculated using 2021 mid-year estimates due to the unavailability of 2022 (at LCG level) or 2023 mid-year estimates at the time of production.

certain criteria⁶. In Northern Ireland, on 31st March 2024, there were four dispensing practices (with nine dispensing doctors), accounting for 0.2% of all items dispensed in 2023/24. In the rest of the UK, according to the latest available figures, there are 1,107 dispensing practices, representing around 7% of all medicines dispensed annually⁷.

2.3 Distance to Nearest Pharmacy⁸

It is estimated that over 99% of the Northern Ireland population lived within five miles of their nearest pharmacy in 2023/24. In many cases, the distance between home and pharmacy was far shorter – 72.5% of all people lived within one mile of their nearest pharmacy, with an average distance from home to pharmacy of 0.9 miles. A full overview is provided in Table 2.4 below.

Table 2.4: Population proximity to pharmacies at LGD level, 2023/24

Local Government District	Average Distance Miles	Population within 1 mile (%)	Population within 3 miles (%)	Population within 5 miles (%)
Antrim & Newtownabbey	0.8	76.3	96.8	100.0
Ards & North Down	0.6	84.1	99.1	100.0
Armagh City, Banbridge & Craigavon	1.2	60.2	90.4	99.0
Belfast	0.3	98.9	100.0	100.0
Causeway Coast & Glens	1.3	57.2	86.5	98.9
Derry City & Strabane	0.8	81.6	94.8	99.2
Fermanagh & Omagh	1.6	47.8	81.9	97.9
Lisburn & Castlereagh	0.8	80.4	96.4	100.0
Mid & East Antrim	1.0	70.9	89.8	98.7
Mid Ulster	1.5	48.9	83.4	98.8
Newry, Mourne & Down	1.2	58.3	92.1	100.0
Northern Ireland	0.9	72.5	92.9	99.4

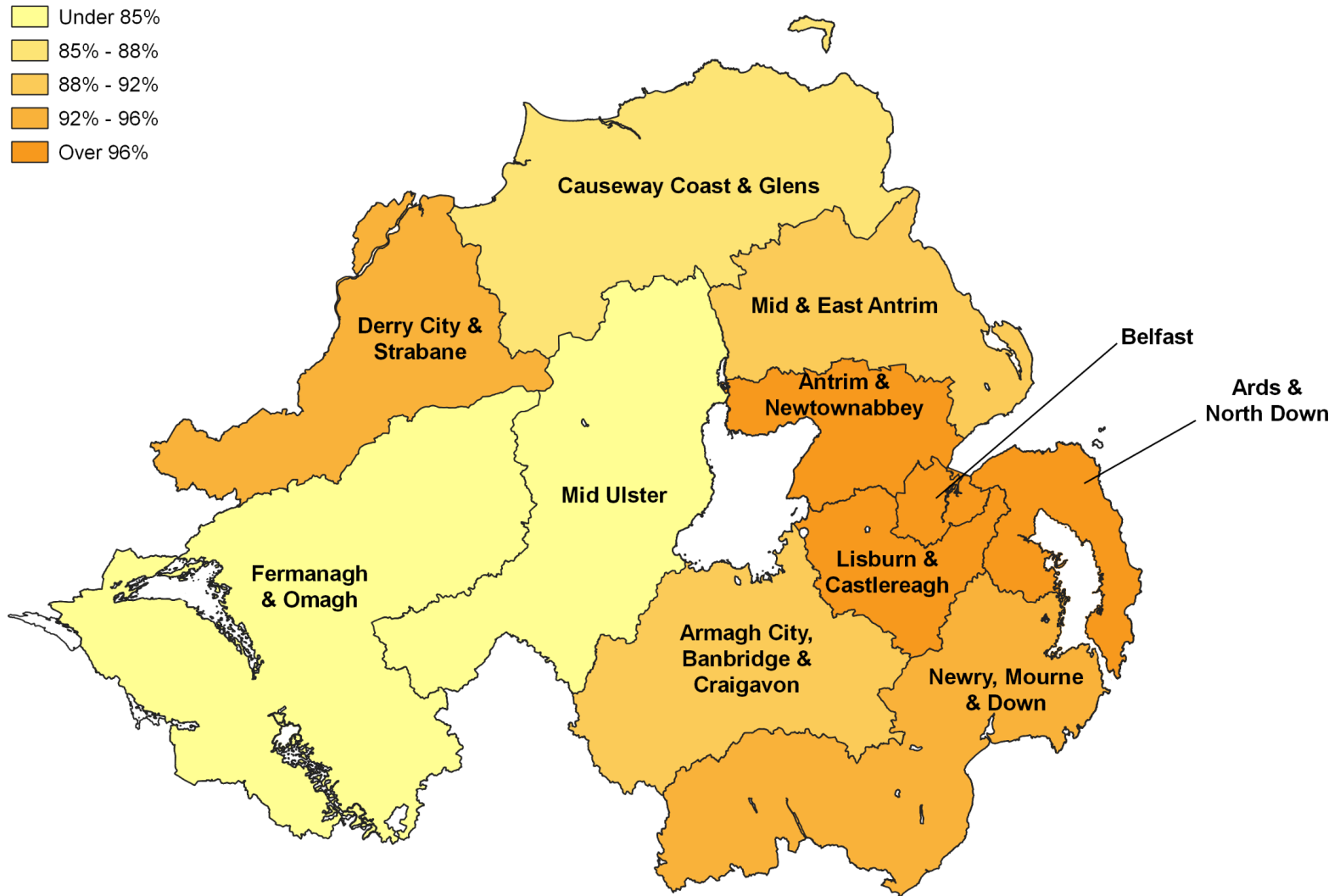
⁶ Based on proximity of patient residence to GP practice and community pharmacy. Full details are available in the technical notes at the back of this publication.

⁷ Figures taken from [Dispensing Doctors' Association](#).

⁸ Population is defined as active GP registration person counts at postcode level at October 2023. 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 2023/24.

Map 2.1: Percentage of population living within three miles of a pharmacy by LGD, 2023/24



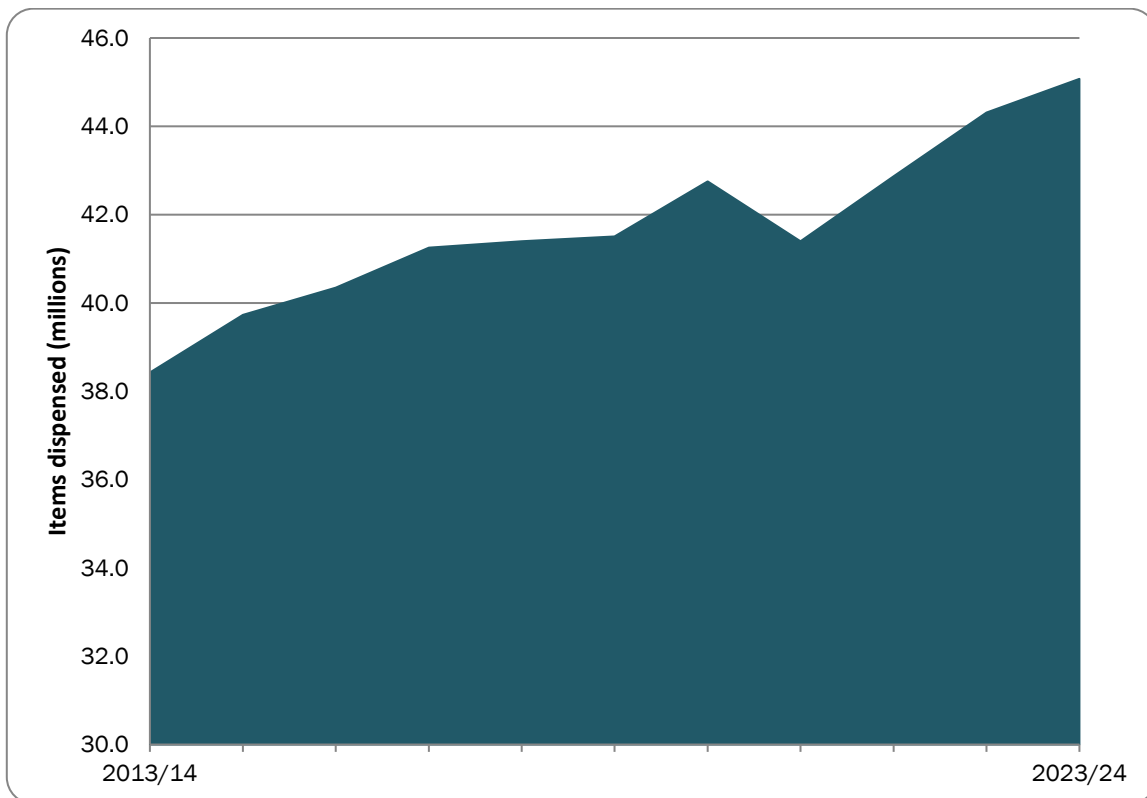
3. Pharmacy Dispensing Volumes

This section contains information on items dispensed solely within community pharmacies throughout Northern Ireland in 2023/24⁹.

3.1 Total Dispensing

The total number of prescription items dispensed by community pharmacies was 45.1 million in 2023/24. This was an increase of 1.7% on the previous year and continues the general upward trend in the number of items dispensed over the past decade. The total number of items dispensed has risen by 17.3% since 2013/14, when the figure stood at 38.4 million items.

Chart 3.1: Trend in number of items dispensed, 2013/14 to 2023/24



Within Local Government Districts, the greatest number of items dispensed per head of population in 2023/24 was observed in Derry City & Strabane (30.0). The lowest figure was recorded in Lisburn & Castlereagh where 17.9 items were dispensed per person.

⁹ All geographic breakdowns in this chapter are based on pharmacy location.

Table 3.1: Total number of items dispensed by LGD, 2023/24

Local Government District	Items dispensed (millions)	Items per person ¹⁰
Derry City & Strabane	4.5	30.0
Belfast	9.3	27.0
Fermanagh & Omagh	3.0	25.3
Causeway Coast & Glens	3.5	24.4
Newry, Mourne & Down	4.4	24.1
Mid & East Antrim	3.2	23.1
Ards & North Down	3.8	23.0
Mid Ulster	3.3	21.7
Armagh City, Banbridge & Craigavon	4.5	20.7
Antrim & Newtownabbey	3.0	20.3
Lisburn & Castlereagh	2.7	17.9
Northern Ireland	45.1	23.7

3.2 Dispensing by pharmacy¹¹

The average number of items dispensed per pharmacy was 87,315 in 2023/24, an increase of 3.5% on the previous year. There was considerable variation across LGDs, with the highest average dispensing volumes observed in Mid & East Antrim, where pharmacies dispensed an average of 106,788 items per annum. Fermanagh & Omagh had the lowest average figure at 64,316 items per pharmacy.

While lower dispensing volumes are often associated with rural areas, the figure for Belfast shows that this is not always the case. It had the second-lowest average in Northern Ireland at 74,077 items per pharmacy. This appears to be driven by the high concentration of smaller pharmacies in this council area. A full breakdown is provided in Table 3.2 on the following page.

¹⁰ The LGD and Northern Ireland figures have been calculated using 2021 mid-year estimates due to the unavailability of 2022 (at LCG level) or 2023 mid-year estimates at the time of production. Note that patient prescriptions may be dispensed in a different LGD to their residence.

¹¹ These figures do not include items dispensed from pharmacies which closed permanently prior to 31st March 2024.

Table 3.2: Average annual dispensing per pharmacy by LGD, 2023/24

Local Government District	Average Items Dispensed
Mid and East Antrim	106,788
Derry City and Strabane	104,427
Lisburn and Castlereagh	102,055
Ards and North Down	98,198
Armagh City, Banbridge and Craigavon	96,002
Antrim and Newtownabbey	93,036
Causeway Coast and Glens	90,528
Mid Ulster	86,542
Newry, Mourne and Down	85,854
Belfast	74,077
Fermanagh and Omagh	64,316
Northern Ireland	87,315

The number of pharmacies dispensing more than 10,000 items per month on average has risen significantly over the past decade. There are now 94 pharmacies in that dispensing bracket compared with 51 in 2013/14. They now account for 18.4% of all pharmacies in Northern Ireland, almost double their proportion of 9.6% in 2013/14. This reflects the rise in items dispensed since 2013/14 and the reduction in the number of pharmacies during that period.

At the other end of the scale, the number of pharmacies dispensing an average of 2,000 or fewer items per month has more than halved since 2013/14. In 2023/24, there were just 12 pharmacies in that bracket, seven of which were located in Belfast.

Despite these trends, Northern Ireland continues to have the lowest average dispensing volumes per pharmacy in the UK. In 2022/23, the most recent year for which comparable statistics are available, the UK average was 7,848 items per pharmacy per month.

Northern Ireland's figure was 7,033 items, which was 10.4% lower than the UK average. These figures can be seen in Table 3.3.

Table 3.3: Average monthly dispensing per pharmacy at UK level, 2022/23

Region	Average items dispensed ¹²
Northern Ireland	7,033
England	7,878
Scotland	7,115
Wales	9,275
United Kingdom	7,848

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 in Northern Ireland, including historical trend data, is available in [Annex tables](#) 1.4 and 1.5.

¹² Due to differences in methodologies, figures comparing UK nations may differ from those published elsewhere.

4. Pharmacy Dispensing Costs

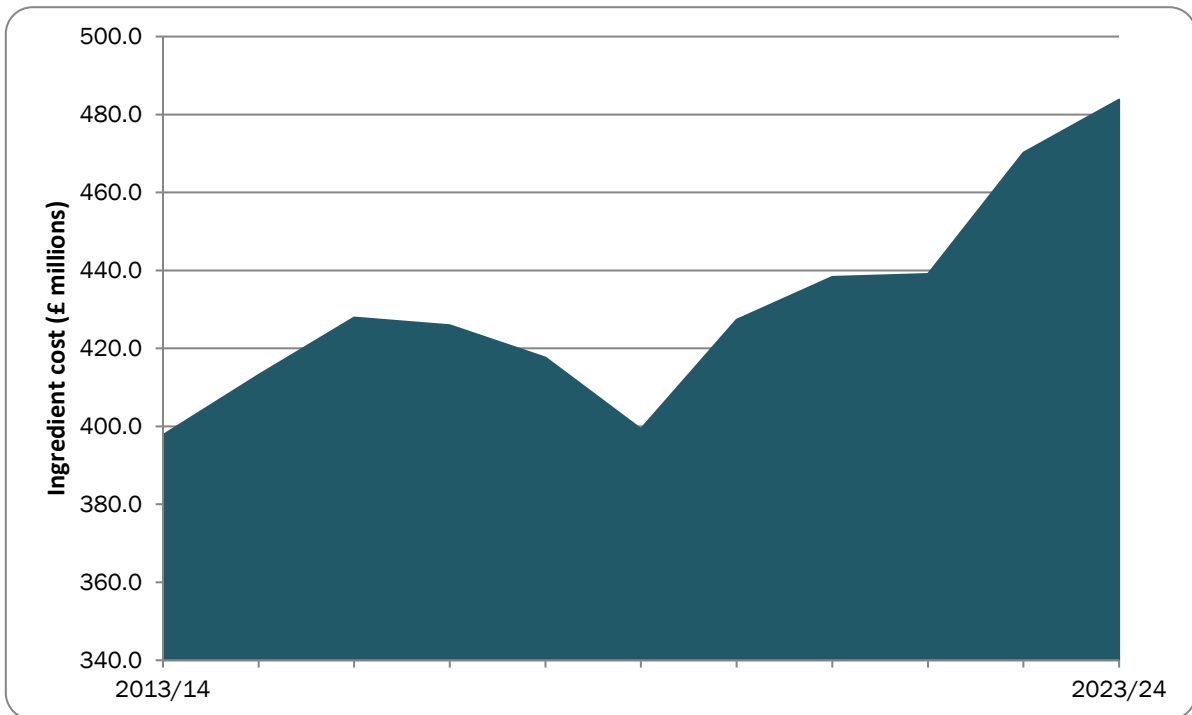
This section contains information on ingredient cost¹³ of items dispensed solely within community pharmacies throughout Northern Ireland in 2023/24¹⁴.

4.1 Total ingredient cost

The total ingredient cost for prescription items dispensed by community pharmacies in 2023/24 was £484 million. This was an increase of 2.9% on the previous year and 21.6% higher than 2013/14 when the figure was £398 million.

The annual total is influenced by drug prices as well as dispensing volumes. As a result, total ingredient cost fluctuated between 2013/14 and 2018/19, despite generally increasing dispensing levels, but has been on an upward trend since then.

Chart 4.1: Trend in total ingredient cost, 2013/14 to 2023/24



¹³ 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.

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

The average cost per item dispensed by community pharmacies across Northern Ireland was £10.73 in 2023/24. There was considerable variation at LGD level – the figure ranged from £9.78 per item in Derry City & Strabane to £12.14 per item in Ards & North Down.

Table 4.1: Total ingredient cost and cost per item by LGD, 2023/24

Local Government District	Ingredient Cost (£millions)	Cost per item
Ards and North Down	45.8	£12.14
Lisburn and Castlereagh	31.0	£11.58
Antrim and Newtownabbey	33.1	£11.17
Mid and East Antrim	35.1	£10.90
Belfast	100.3	£10.78
Causeway Coast and Glens	37.3	£10.77
Fermanagh and Omagh	31.2	£10.55
Armagh City, Banbridge and Craigavon	47.4	£10.45
Newry, Mourne and Down	45.6	£10.37
Mid Ulster	32.9	£10.04
Derry City and Strabane	44.2	£9.78
Northern Ireland	483.8	£10.73

Belfast had the highest total ingredient cost at £100.3 million. This accounted for 20.7% of the total ingredient cost for Northern Ireland. Lisburn & Castlereagh had the lowest cost at £31.0 million.

4.2 Ingredient cost per pharmacy¹⁵

The average ingredient cost of items dispensed per pharmacy was £937,348 in 2023/24, which was an increase of 4.7% on the previous year. As with dispensing volumes, there were noticeable variations at LGD level.

There were three LGDs - Ards & North Down, Lisburn & Castlereagh, and Mid & East Antrim – where the average ingredient cost per pharmacy was over £1.1 million. By

¹⁵ These figures do not include items dispensed from pharmacies which closed permanently prior to 31st March 2024.

contrast, pharmacies in Fermanagh & Omagh had an average ingredient cost of £678,221 in 2023/24. A full breakdown of average ingredient costs per pharmacy at LGD level is provided below.

Table 4.2: Average annual ingredient cost per pharmacy by LGD, 2023/24

Local Government District	Average Total Ingredient Cost (£)
Ards and North Down	1,192,654
Lisburn and Castlereagh	1,180,848
Mid and East Antrim	1,164,783
Antrim and Newtownabbey	1,039,796
Derry City and Strabane	1,021,324
Armagh City, Banbridge and Craigavon	1,005,417
Causeway Coast and Glens	974,680
Newry, Mourne and Down	890,377
Mid Ulster	866,643
Belfast	799,261
Fermanagh and Omagh	678,221
Northern Ireland	937,348

Part Two

**Dispensing in
Northern Ireland 2023/24**

5. Dispensing Analysis

This section provides a detailed analysis of total dispensing activity in Northern Ireland in 2023/24. Unlike previous sections, it includes dispensing information from all dispensing contractors i.e. community pharmacies, dispensing doctors and appliance contractors¹⁶.

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 2023/24, patient attributable information was retrieved for 90.1% 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 56.6% of all prescription items which could be attributed to a gender in 2023/24. This proportion varied little at LGD level – the highest figure was 57.8%

¹⁶ All geographic breakdowns in this chapter are based on patient location.

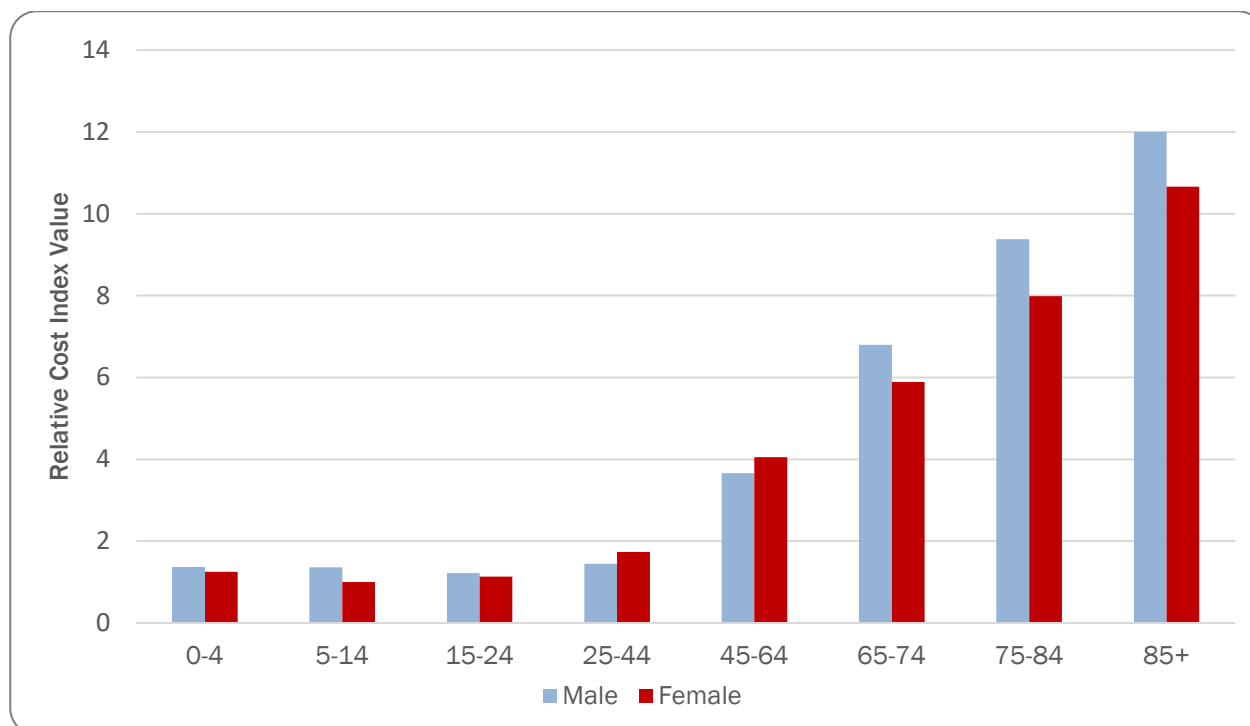
for Mid and East Antrim and Causeway Coast & Glens, while the lowest was 54.4% for Fermanagh and Omagh.

Overall 45.6% of items which could be attributed to an age were dispensed to patients aged 65 or over, with a further 34.4% to patients in the 45-64 age group. These age groups also accounted for the highest total ingredient costs of £191.0 million and £144.1 million respectively, representing nearly three quarters of the ingredient cost which could be assigned to patient age. 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 estimates¹⁷. These are then divided by the age/gender group with the lowest relative cost, meaning the weighting for this group is 1.

Chart 5.1: Relative Cost Index values by age and gender, 2023/24



¹⁷ At the time of creation, 2022 (at LCG level) and 2023 mid-year estimates were not available therefore 2021 mid-year estimates were used for 2023/24 calculations.

The chart above shows that prescribing costs for both genders generally increase with age. For example, a male in the 85+ group will typically have a cost index value which is 12.0 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, which may reflect the poorer health status and/or differences in the costs of treating conditions from which they typically suffer.

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. Table 5.1 below contains an overview of dispensing and associated ingredient cost by BNF chapter in Northern Ireland in 2023/24.

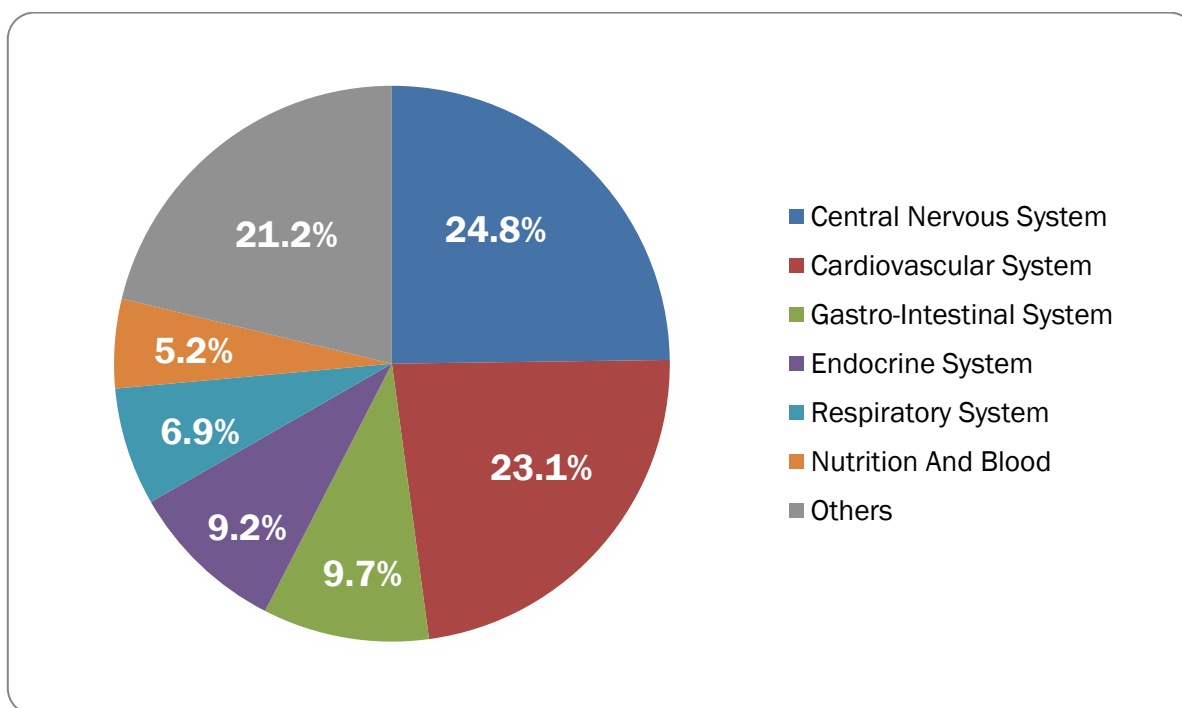
Table 5.1: Items dispensed and total ingredient cost by BNF chapter, 2023/24

BNF Chapter	No of items (millions)	Ingredient Cost (£millions)
1. Gastro-Intestinal System	4.4	36.0
2. Cardiovascular System	10.5	67.5
3. Respiratory System	3.1	49.1
4. Central Nervous System	11.2	101.0
5. Infections	2.1	12.8
6. Endocrine System	4.2	69.8
7. Obstetrics, Gynaecology And Urinary Tract Disorders	1.1	10.6
8. Malignant Disease And For Immunosuppression	0.2	13.5
9. Nutrition And Blood	2.4	39.9
10. Musculoskeletal And Joint Diseases	1.5	8.1
11. Eye	0.4	4.5
12. Ear, Nose And Oropharynx	0.6	4.6
13. Skin	1.7	16.0
14. Immunological Products And Vaccines	0.0	0.4
15. Anaesthesia	0.1	2.9

19. Other Drugs And Preparations	0.0	0.4
20. Dressings	0.3	11.9
21. Appliances	1.2	26.1
22. Incontinence Appliances	0.1	1.9
23. Stoma Appliances	0.2	13.8
99. Unclassified	0.1	10.4
Overall Total	45.4	501.3

As shown in the overview, 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 almost 80% of all items dispensed in Northern Ireland in 2023/24.

Chart 5.2: Items dispensed by BNF chapter, 2023/24



There were significant variations in average cost per item across BNF chapters, which is reflected in the limited correlation between dispensing volumes and total ingredient cost. The BNF chapter for malignant disease and for immunosuppression (Chapter 8) had the highest average cost per item in 2023/24 at £71.68. Meanwhile, items related to the

treatment of musculoskeletal and joint diseases (BNF chapter 10) had the lowest average cost per item at £5.50.

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 infections appear among the most-dispensed treatments for patients aged below 15 but do not feature within the top six BNF chapters discussed above.

Table 5.2: The three most commonly dispensed chapters by age group, 2023/24

Age Group	Most dispensed chapters	% of Items
0-4	5. Infections	23.4
	13. Skin	16.7
	9. Nutrition and Blood	15.1
5-14	3. Respiratory System	25.9
	5. Infections	15.6
	4. Central Nervous System	14.3
15-24	4. Central Nervous System	26.5
	3. Respiratory System	13.6
	13. Skin	11.0
25-44	4. Central Nervous System	37.6
	1. Gastro-Intestinal System	9.7
	3. Respiratory System	8.2
45-64	4. Central Nervous System	29.2
	2. Cardiovascular System	21.2
	6. Endocrine System	10.5
65-74	2. Cardiovascular System	31.8
	4. Central Nervous System	20.4
	6. Endocrine System	10.1
75-84	2. Cardiovascular System	34.0
	4. Central Nervous System	17.6
	6. Endocrine System	10.0
85+	2. Cardiovascular System	30.6
	4. Central Nervous System	18.1
	1. Gastro-Intestinal System	10.8

While items within BNF chapter 5 (infections), which contains antibiotics, continues to feature as one of the top most dispensed chapters for 0-4 and 5-14 age groups, there has been a 16.6% and 6.8% decrease in each group respectively on figures seen in 2022/23. This demonstrates the year-on-year variation that can be observed in dispensing these products.

Trends in older age groups continue to follow similar patterns to previous years, with items in BNF chapter 4 (Central Nervous System) most frequently dispensed for age groups 15-24, 25-44 and 45-64. Items in BNF chapter 2 (Cardiovascular System) continue to be dispensed most often for age groups 65-74, 75-84 and 85+.

5.6 Dispensing by Deprivation

The availability of postcode information¹⁸ allows dispensing activity to be mapped to the Northern Ireland Multiple Deprivation Measure (MDM) produced by NISRA¹⁹, 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.

In 2023/24, the number of items dispensed and the total ingredient cost was higher for areas with higher levels of deprivation. 9.3 million items were dispensed to patients living in the most deprived areas whereas 6.4 million were dispensed to those residing in the least deprived areas. A breakdown is provided on the following page.

¹⁸ Patient postcode information was available for 90.0% of all items dispensed in 2023/24. Data is unavailable for the remaining prescriptions due to the limitations of the prescription scanning process used by FPS.

¹⁹ [Northern Ireland Multiple Deprivation Measure 2017 \(NIMDM2017\) | Northern Ireland Statistics and Research Agency \(nisra.gov.uk\)](https://www.nisra.gov.uk/nimdm2017)

Table 5.3: Items dispensed and ingredient cost by deprivation quintile, 2023/24

Deprivation Quintile	Total items (million)	% Items	Total Ingredient cost (£millions)	% Cost
1 (most)	9.3	20.6	94.8	18.9
2	9.0	19.8	95.3	19.0
3	8.4	18.6	91.9	18.3
4	7.7	16.9	87.2	17.4
5 (least)	6.4	14.1	78.1	15.6
Unassignable	4.6	10.0	54.0	10.8

While the more deprived quintiles have higher total ingredient costs, this may arise due to the volume of prescriptions dispensed. For many BNF chapters, the average ingredient cost per item is actually higher for patients residing in less deprived areas. This can be illustrated using the figures in Table 5.4 related to the six most dispensed BNF chapters in 2023/24.

Table 5.4: Cost per item by deprivation quintile for most dispensed BNF chapters, 2023/24

BNF Chapter	Quintile 1 (most)	Quintile 2	Quintile 3	Quintile 4	Quintile 5 (least)
1. Gastro-Intestinal System	£7.33	£7.85	£8.37	£8.74	£9.47
2. Cardiovascular System	£5.55	£6.17	£6.45	£6.90	£7.44
3. Respiratory System	£15.30	£15.54	£15.66	£16.03	£17.26
4. Central Nervous System	£8.35	£8.72	£8.94	£9.09	£9.70
6. Endocrine System	£16.44	£16.26	£16.61	£17.19	£18.19
9. Nutrition and Blood	£15.68	£16.37	£16.92	£17.70	£18.86

The differences in cost per item between the most and least deprived quintiles are most pronounced in BNF chapter 2 (Cardiovascular System). In that case, the ingredient cost per item for the least deprived quintile is 34.1% greater than that for the most deprived quintile.

5.7 UK comparisons²⁰

In 2023/24, Northern Ireland had the second-highest level of dispensing in the UK at 23.8 items per person, 3.4 less than Wales (27.2). Both had a notably higher level of dispensing per head of the population 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 2023/24, a 3.0% increase on the previous year. Ingredient costs per person increased on the previous year in all four nations, with the lowest cost per person of £191.33 observed in England in 2023/24. A summary of the comparative figures for 2023/24 is provided in the table below.

Table 5.5: Prescription items and ingredient cost per person across the UK, 2023/24

Region	Prescription items per person	Ingredient cost per person
Northern Ireland	23.8	£263.20
England	21.2	£191.33
Scotland [†]	20.3	£226.80
Wales	27.2	£221.98

[†] Figures for 2022/23 financial year

²⁰. At the time of publication, Scotland had not yet released their 2023/24 dispensing data. Figures for Scotland are taken from 2022/23, the most recent year available.

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, diabetes medication & products, anticoagulants and antibiotics in Northern Ireland during 2023/24.

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. The exception to this is with antibiotics, which would typically be prescribed for a one-off course for the duration of treatment.

It should be noted that it is not possible 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. However, in the absence of a proper diagnosis, medications can often serve as a useful proxy.

6.2 Anti-depressants

Anti-depressants were dispensed to 390,192 people in Northern Ireland during 2023/24, roughly one fifth of the total population and an increase of 2.1% compared with 2022/23.

There was significant variation in the proportion of individuals receiving anti-depressants among different groups within the population. Over one quarter of females (25.5%) in Northern Ireland received anti-depressants during the year compared with 15.3% of males.

Table 6.1: Individuals receiving anti-depressants by sex, 2023/24

Sex	Number of individuals	%
Male	143,373	36.7
Female	246,819	63.3
Northern Ireland	390,192	100.0

Table 6.1 above shows that females account for the majority of individuals who received anti-depressants in Northern Ireland during 2023/24.

The variation in the proportion of individuals receiving anti-depressants extends into different age/gender segments of the population. The lowest proportion (0.4%) was observed among males aged under 18. The highest (39.1%) 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, 2023/24

Age Group	% Male	% Female	% Overall
Under 18	0.4%	0.8%	0.6%
18 – 24	8.6%	16.9%	12.6%
25 – 34	15.1%	23.9%	19.6%
35 – 44	19.5%	30.5%	25.2%
45 – 64	24.2%	39.1%	31.8%
65 – 74	23.6%	37.5%	30.7%
75 – 84	22.4%	36.8%	30.3%
85+	23.1%	34.0%	30.1%
All Ages	15.3%	25.5%	20.5%

At Local Government District (LGD) level, Derry City & Strabane had the highest proportion of the population receiving anti-depressants in 2023/24 at 24.2%. It was closely followed by Belfast at 22.9%.

The lowest levels were seen in Mid Ulster, where 16.8% of the population received anti-depressants in 2023/24 and Fermanagh & Omagh, where they were dispensed to 18.5% of the population.

Despite this variation, the proportion of the population who had been dispensed anti-depressants rose in all LGDs in 2023/24. 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, 2023/24

Local Government District	Number of Individuals	% of total Population
Antrim & Newtownabbey	29,897	20.5%
Ards & North Down	33,842	20.7%
Armagh City, Banbridge & Craigavon	42,126	19.2%
Belfast	78,980	22.9%
Causeway Coast & Glens	29,009	20.5%
Derry City & Strabane	36,525	24.2%
Fermanagh & Omagh	21,617	18.5%
Lisburn & Castlereagh	27,779	18.6%
Mid & East Antrim	29,697	21.3%
Mid Ulster	25,278	16.8%
Newry, Mourne & Down	34,800	19.1%
Unknown ²¹	642	N/A
Northern Ireland	390,192	20.5%

An analysis of anti-depressant dispensing by deprivation quintile showed that the proportion of the population receiving such medications was greatest in areas with higher levels of deprivation. In the most deprived quintile, anti-depressants were dispensed to

²¹ 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.

26.7% of the population, which was around 56% higher than in the least deprived areas (17.1%). The full figures are shown in Table 6.4 below.

Table 6.4: Number of individuals receiving anti-depressants by deprivation quintile, 2023/24

Deprivation Quintile	Number of Individuals	% of total Population
1 (most)	94,696	26.7%
2	84,179	21.8%
3	76,277	19.1%
4	72,670	18.4%
5 (least)	61,728	17.1%
Unassignable	642	N/A
Northern Ireland	390,192	20.5%

6.3 Diabetes medication and products

Diabetes medication and products were dispensed to 116,806 people in 2023/24, which was an increase of 6.4% on the previous year. Overall, 6.1% of Northern Ireland's population received diabetes medication and products during the year.

As shown in Table 6.5, males represented 56.6% of individuals who received such items. This meant that these medications were dispensed to 7.1% of the male population in 2023/24. The equivalent figure for females was 5.2%.

Table 6.5: Individuals receiving diabetes medication & products by sex, 2023/24

Sex	Number of individuals	%
Male	66,132	56.6
Female	50,674	43.4
Northern Ireland	116,806	100.0

The proportion of the population receiving diabetes medication and products generally increases with age, with the notable exception of the 85+ age cohort. At one extreme, just 0.4% of individuals aged under 18 received such items. At the other, these items were

dispensed to 25.4% of males aged between 75 and 84. As shown in Table 6.6 below, after the age of 44 a higher proportion of males than of females received diabetes medication.

Table 6.6: Percentage of population receiving diabetes medication & products by age and sex, 2023/24

Age Group	% Male	% Female	% Overall
Under 18	0.4%	0.4%	0.4%
18 – 24	1.0%	1.3%	1.2%
25 – 34	1.4%	3.0%	2.2%
35 – 44	3.2%	3.3%	3.3%
45 – 64	10.3%	6.6%	8.4%
65 – 74	20.3%	12.2%	16.2%
75 – 84	25.4%	15.9%	20.2%
85+	23.8%	13.6%	17.2%
All Ages	7.1%	5.2%	6.1%

The proportion of the population who were dispensed diabetes medication and products rose in all LGDs in 2023/24. There remained, however, some geographic variation. Mid & East Antrim had the highest rate of dispensing at 6.8% of the population in 2023/24. At the other end of the scale, the equivalent rate for Mid Ulster was 5.5%. A breakdown of dispensing by LGD is provided in Table 6.7 below.

Table 6.7: Number of individuals receiving diabetes medication & products by LGD, 2023/24

Local Government District	Number of Individuals	% of total Population
Antrim & Newtownabbey	9,116	6.3%
Ards & North Down	10,940	6.7%
Armagh City, Banbridge & Craigavon	13,367	6.1%
Belfast	20,574	6.0%
Causeway Coast & Glens	8,975	6.3%
Derry City & Strabane	9,484	6.3%
Fermanagh & Omagh	7,132	6.1%
Lisburn & Castlereagh	8,496	5.7%
Mid & East Antrim	9,471	6.8%
Mid Ulster	8,233	5.5%

Newry, Mourne & Down	10,823	5.9%
Unknown	195	N/A
Northern Ireland	116,806	6.1%

An analysis of dispensing by deprivation quintile showed that the proportion of the population receiving diabetes medication and products was greatest in areas with higher levels of deprivation. In the most deprived quintile, these items were dispensed to 7.0% of the population, while in the least deprived areas, the equivalent figure was 5.4%. A breakdown of dispensing by deprivation quintile is provided below.

Table 6.8: Number of individuals receiving diabetes medication & products by deprivation quintile, 2023/24

Deprivation Quintile	Number of Individuals	% of total Population
1 (most)	24,707	7.0%
2	25,141	6.5%
3	24,259	6.1%
4	22,988	5.8%
5 (least)	19,516	5.4%
Unassignable	195	N/A
Northern Ireland	116,806	6.1%

6.4 Opioid Analgesics

Opioid analgesics were dispensed to 98,888 people in 2023/24, which was a decrease of 2.2% on the previous year, and a 5.3% decrease since 2019/20. Overall, the proportion of the population receiving opioid analgesics fell slightly to 5.2%.

As shown in Table 6.9 on the following page, females accounted for 60.8% of individuals who received opioid analgesics, equating to 6.2% of the female population during 2023/24. The equivalent figure for males was 4.1%.

Table 6.9: Individuals receiving opioid analgesics by sex, 2023/24

Sex	Number of individuals	%
Male	38,798	39.2
Female	60,090	60.8
Northern Ireland	98,888	100.0

The use of opioid analgesics increases with age, as can be seen in Table 6.10 below. While the overall rate of all age groups aged below 45 remains under 5%, this more than doubles for both males and females in the 45-64 age group. This rate continues to increase sharply, with over one quarter of females aged 85 and over dispensed opioid analgesics in 2023/24.

Table 6.10: Percentage of population receiving opioid analgesics by age and sex, 2023/24

Age Group	% Male	% Female	% Overall
Under 18	0.1%	0.1%	0.1%
18 – 24	0.4%	0.6%	0.5%
25 – 34	1.3%	1.9%	1.6%
35 – 44	2.9%	4.2%	3.6%
45 – 64	6.6%	9.0%	7.9%
65 – 74	9.9%	12.9%	11.4%
75 – 84	11.9%	17.4%	14.9%
85+	17.9%	25.7%	22.9%
All Ages	4.1%	6.2%	5.2%

There was some local variation in the dispensing of opioid analgesics at LGD level. Due to the link between opioid analgesic dispensing and age, it is probable that these differences are, in part, influenced by local variations in population structure.

The proportion of the population in receipt of opioid analgesics fell or remained static in all LGDs except for Fermanagh & Omagh, where the proportion increased slightly compared to the previous financial year. In 2023/24, Ards & North Down had the highest proportion observed with 6.2% 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 is provided in Table 6.11 below.

Table 6.11: Number of individuals receiving opioid analgesics by LGD, 2023/24

Local Government District	Number of Individuals	% of total Population
Antrim & Newtownabbey	7,507	5.1
Ards & North Down	10,125	6.2
Armagh City, Banbridge & Craigavon	11,074	5.1
Belfast	19,163	5.6
Causeway Coast & Glens	7,180	5.1
Derry City & Strabane	8,343	5.5
Fermanagh & Omagh	5,806	5.0
Lisburn & Castlereagh	7,262	4.9
Mid & East Antrim	7,449	5.4
Mid Ulster	6,038	4.0
Newry, Mourne & Down	8,795	4.8
Unknown	146	N/A
Northern Ireland	98,888	5.2

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 6.6% of the population, while in the least deprived areas, the equivalent figure was 4.2%. A breakdown of dispensing by deprivation quintile is provided below.

Table 6.12: Number of individuals receiving opioid analgesics by deprivation quintile, 2023/24

Deprivation Quintile	Number of Individuals	% of total Population
1 (most)	23,220	6.6
2	22,279	5.8
3	20,188	5.1
4	18,050	4.6
5 (least)	15,005	4.2

Unassignable	146	N/A
Northern Ireland	98,888	5.2

6.5 Anticoagulants

Anticoagulants were dispensed to 61,293 people in 2023/24, which was an increase of 4.2% on the previous year. Overall, the proportion of the population receiving anticoagulants was 3.2% in 2023/24.

As shown in Table 6.13 below, males accounted for 56.3% of individuals who received anticoagulants. This meant that those medications were dispensed to 3.7% of the male population during 2023/24. The equivalent figure for females was 2.8%.

Table 6.13: Individuals receiving anticoagulants by sex, 2023/24

Sex	Number of individuals	%
Male	34,496	56.3
Female	26,797	43.7
Northern Ireland	61,293	100.0

There is a strong correlation between increasing age and dispensing anticoagulants, as can be seen in Table 6.14 below. The proportion of individuals receiving such medications was less than 1% in all age groups under the age of 45. The level of dispensing rose sharply from the age of 65 with the highest level of 36.1% observed among males aged 85 and over.

Table 6.14: Percentage of population receiving anticoagulants by age and sex, 2023/24

Age Group	% Male	% Female	% Overall
Under 18	0.0%	0.0%	0.0%
18 – 24	0.1%	0.1%	0.1%
25 – 34	0.2%	0.2%	0.2%
35 – 44	0.6%	0.5%	0.6%
45 – 64	3.0%	1.5%	2.2%

65 – 74	10.9%	6.0%	8.4%
75 – 84	22.7%	15.6%	18.8%
85+	36.1%	26.8%	30.1%
All Ages	3.7%	2.8%	3.2%

There was some local variation in the dispensing of anticoagulants at LGD level. Due to the link between anticoagulant dispensing and age, it is probable that these differences are, in part, influenced by local variations in population structure.

The proportion of the population in receipt of anticoagulants rose or remained static in all LGDs in 2023/24. Ards & North Down had the highest proportion observed with 3.9% of its population receiving an anticoagulant. By contrast, the equivalent figure for Belfast was 2.8%. A full breakdown of the figures for anticoagulant dispensing at LGD level is provided below.

Table 6.15: Number of individuals receiving anticoagulants by LGD, 2023/24

Local Government District	Number of Individuals	% of total Population
Antrim & Newtownabbey	4,580	3.1
Ards & North Down	6,378	3.9
Armagh City, Banbridge & Craigavon	6,601	3.0
Belfast	9,747	2.8
Causeway Coast & Glens	5,033	3.6
Derry City & Strabane	4,845	3.2
Fermanagh & Omagh	4,158	3.6
Lisburn & Castlereagh	4,714	3.2
Mid & East Antrim	4,947	3.6
Mid Ulster	4,458	3.0
Newry, Mourne & Down	5,717	3.1
Unknown	115	N/A
Northern Ireland	61,293	3.2

An analysis of dispensing by deprivation quintile showed no consistent trend associated with deprivation in the proportion of the population receiving anticoagulants. There was

little variation between the five quintiles, as can be seen in Table 6.16. The highest proportion was, however, observed in the least deprived areas (3.4%), while the lowest proportion (2.9%) was observed in the most deprived quintile. Again, this could be associated with age structure differences between the quintiles.

Table 6.16: Number of individuals receiving anticoagulants by deprivation quintile, 2023/24

Deprivation Quintile	Number of Individuals	% of total Population
1 (most)	10,355	2.9
2	12,609	3.3
3	13,072	3.3
4	12,713	3.2
5 (least)	12,429	3.4
Unassignable	115	N/A
Northern Ireland	61,293	3.2

6.6 Antibiotics

Antibiotics were dispensed to 710,877 people in 2023/24, which was a decrease of 4.4% on the previous year. Overall, 37.3% of Northern Ireland’s population received antibiotics during the year.

As shown in Table 6.17 below, females accounted for 59.9% of individuals who received antibiotics. This meant that those medications were dispensed to 44.0% of the female population during 2023/24. The equivalent figure for males was 30.4%.

Table 6.17: Individuals receiving antibiotics by sex, 2023/24

Sex	Number of individuals	%
Male	284,825	40.1
Female	426,052	59.9
Northern Ireland	710,877	100.0

There was also considerable variation in the proportion of individuals receiving antibiotics across age/sex groups. Over two thirds (67.2%) of females aged 85 and over were dispensed antibiotics in 2023/24. The lowest proportion (23.4%) was seen in males aged between 15 and 24. A detailed breakdown is provided in Table 6.18 below.

Table 6.18: Percentage of population receiving antibiotics by age and sex, 2023/24

Age Group	% Male	% Female	% Overall
Under 5	46.6%	48.7%	47.6%
5 – 14	29.5%	33.8%	31.6%
15 – 24	23.4%	37.2%	30.1%
25 – 44	23.9%	42.8%	33.6%
45 – 64	27.9%	43.5%	35.8%
65 – 74	38.9%	51.3%	45.2%
75 – 84	49.1%	59.2%	54.7%
85+	63.9%	67.2%	66.0%
All Ages	30.4%	44.0%	37.3%

There was some variation in the dispensing of antibiotics at LGD level which will, to some extent, be associated with the differing LGD age profiles. The proportion of the population in receipt of antibiotics fell in all LGDs in 2023/24, Derry City & Strabane had the highest proportion with 41.3% of its population receiving an antibiotic. By contrast, the lowest proportion of 33.1% was observed in Ards & North Down. A full breakdown of the figures for antibiotic dispensing at LGD level is provided in Table 6.19 below.

Table 6.19: Number of individuals receiving antibiotics by LGD, 2023/24

Local Government District	Number of Individuals	% of total Population
Antrim & Newtownabbey	56,051	38.4
Ards & North Down	54,246	33.1
Armagh City, Banbridge & Craigavon	76,662	35.0
Belfast	122,331	35.5
Causeway Coast & Glens	58,292	41.1
Derry City & Strabane	62,234	41.3
Fermanagh & Omagh	46,287	39.6

Lisburn & Castlereagh	50,598	33.9
Mid & East Antrim	55,972	40.2
Mid Ulster	57,637	38.3
Newry, Mourne & Down	69,487	38.1
Unknown	1,080	N/A
Northern Ireland	710,877	37.3

An analysis of dispensing by deprivation quintile showed that the proportion of the population receiving antibiotics was highest in more deprived areas. In the most deprived quintile, these items were dispensed to 40.3% of the population. In the least deprived areas, the equivalent figure was 34.0%. A breakdown of dispensing by deprivation quintile is provided below.

Table 6.20: Number of individuals receiving antibiotics by deprivation quintile, 2023/24

Deprivation Quintile	Number of Individuals	% of total Population
1 (most)	142,773	40.3
2	150,617	39.0
3	149,618	37.5
4	143,976	36.5
5 (least)	122,813	34.0
Unassignable	1,080	N/A
Northern Ireland	710,877	37.3

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 Pharmacy First service.

Dispensing Doctor –

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 appliance devices (those listed under part III of the [NI Drug Tariff](#)) such as stoma appliances or lymphoedema garments.

2. Prescriptions

Prescription forms for prescriptions are submitted on a monthly basis to the Business Services Organisation (BSO) for payment by community pharmacies, appliance contractors and dispensing doctors. In

2023/24, 25.7 million pharmacy forms 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 there is no information about that prescription in our source 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 consider 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 2023/24, 90.1% of prescription items had attributed patient information. This has meant that a similar 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 on the [BSO website](#).

7. Population

NISRA population figures are used in this release.

At the time of creation, mid-year estimates were not available for 2022 (at LCG level) and 2023 for Northern Ireland. In March 2024, NISRA published rebased 2021 mid-year estimates for Northern Ireland and sub-Northern Ireland level geographies. Population based figures for 2021/22 have been revised to reflect this. For consistency within the 2022/23 and 2023/24 Northern Ireland-level and sub-Northern Ireland level calculations, the rebased 2021 mid-year

estimates were used for these years, as this is a more accurate reflection of the current population, than using the 2018-based population projections which were developed prior to the 2021 Census.

(e.g. by General Practitioner, Nurse Practitioner, Dentist, Podiatrist) as well as through the Pharmacy First scheme available in a number of pharmacies.

Further information on this process can be found [here](#) on the FPS 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 accredited official 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 services 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

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 2024.

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 - 2022/23 | NHSBSA](#)

Prescription Cost Analysis:

[Prescription Cost Analysis – England 2023/24 | NHSBSA](#)

Wales

Statistics on General Pharmaceutical Services:

[Community pharmacy services: April 2022 to March 2023 | GOV.WALES](#)

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 \(nhs.scot\)](#)

Prescription Cost Analysis:

[Dispenser payments and prescription cost analysis - Financial year 2022 to 2023 - Dispenser payments and prescription cost analysis - Publications - Public Health Scotland](#)

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 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 2025. 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](#)