

C3 Information from general practice

Continuous Morbidity Recording (CMR) is a system that collects general medical practitioner (GP) morbidity data from general medical practices in Scotland. Data are collected in a number of practices covering six per cent of the Scottish population from every face-to-face doctor-patient consultation. This sample is broadly representative of the Scottish population in terms of age, sex, deprivation and urban/rural mix.

Key Points

Overview from general practice

- In 2003, of the 1 165 013 consultations (face-to-face contacts) between patient and GP, 11 471 (1%) related to drug misuse. (Table C3.1)
- Of the 2 469 patients with a diagnosis of drug misuse, 27 per cent (676 patients) had a 'first' diagnosis of drug misuse i.e. it was the first time they had seen the GP for that particular drug problem. (Table C3.1)
- The average number of GP consultations per year for all patients attending is 3.7. For those with a diagnosis of drug misuse, the average number of drug misuse GP consultations per year is 4.6. (Table C3.1)
- The average number of drug misuse GP consultations and non-drug misuse GP consultations are broadly similar for females (4.5 compared to 4.1) but wider differences can be seen for males (4.7 to 3.3). (Table C3.2)
- More males than females consult their GP for drug related problems (nearing 2:1). (Table C3.2)
- For both men and women, aged 15 – 44 years, with a drug misuse diagnosis, depression and anxiety disorders were the top two most common co-morbidities. It is also interesting to see the comparison with non-drug misuse patients concerning 'Mental & behavioural disorders due to use of alcohol'. Among males, drug misusers are almost six times more likely than non-drug misuse patients to have a diagnosis of alcohol misuse. (Table C3.3)
- The drug misuse GP consultation rate increases as deprivation increases. The GP consultation rate per 1 000 practice population in deprivation category five (most deprived) was almost six times greater than that of category one (least deprived), 59.6 GP consultations per 1 000 practice population compared to 10.2 per 1 000 practice population. (Table C3.4)

5 year trends - 1999 to 2003

- The rate of patients attending a GP in General Practice with a diagnosis of drug misuse has increased slightly from 6.2 per 1 000 patients attending in 1999 to 7.9 per 1 000 patients attending in 2003. (Table C3.1)
- The rate of drug misuse GP consultations per 1 000 GP consultations has remained relatively stable over the past five years 9.2 per 1 000 consultations in 1999 to 9.8 per 1 000 consultations in 2003. (Table C3.1)

Background information

The CMR data set includes:

Patient Identifier	Generated by GPASS ¹ and practice specific
Date of Birth	
Sex	
Postcode	
Diagnosis	Up to ten diagnoses can be recorded for each contact. Coded using the Read coding system
Modifier	Describes whether it is the first time the problem has occurred, a recurrence of a previous problem or a persistent problem. This is attached to each diagnosis.
Date of Consultation	

Type of Encounter	Face-to-face patient/GP consultations. Telephone consultations are not included in any analysis.
Clinician	Allows the identification of each GP. Contacts are recorded by every doctor (including locums)

1. General Practice Administration System for Scotland)

Each practice receives feedback on its data together with national comparisons via quarterly and annual reports. An ad hoc service is also provided by ISD Scotland to these practices and to the NHS Scotland in general.

Developments to Primary Care Information

Although the analysis in this publication is only based on work carried out by General Practitioners (GPs), CMR practices are now involved in the collection and analysis of information from other members of the primary care team, e.g. practice nurses, health visitors and district nurses. From April 2003 CMR became Practice Team Information (PTI), which will enable a much wider, more accurate, picture of the activity in general practice. Data from this extended data collection will be available from November 2004.

The collection of Practice Team Information is a very practical way of establishing an electronic patient record held within the general practice. The recording of contacts by different members of the practice team allows sharing of information for those providing care for an individual patient. It will also allow more complete and accurate estimates of the incidence and prevalence of conditions presenting in general practice, providing means for population based analysis of prevalence of illness.

Analysis & Definitions

The following analysis is based on data from the sample of practices in each individual year for which complete data were available, for the years 1999 to 2003.

It is important to note that the information presented in this section of the publication does not give a measure of how prevalent drugs misuse is in the community. It does, however, give an insight into some of the characteristics of those who misuse drugs and present to a GP.

For CMR, the diagnosis of drug misuse has been identified using the following set of Read codes:

E02	Drug Psychoses
E24	Drug Dependence (excluding Nicotine Withdrawal)
E25	Non-dependent Abuse of Drugs
Eu1	Mental and Behavioural Disorder Due to Psychoactive Substances (excluding Eu17 use of Tobacco)
SL96	Hallucinogen Poisoning
SL97	Psycho-stimulants Poisoning
SL9y	Other Psychotropic Poisoning
SL9z	Psychotropic Agent Poisoning not otherwise specified.

The above codes represent a range of problems defined as drug misuse. When a patient presents with one of those specific problems for the first time, this will be recorded as 'first'. 'First' diagnosis may include patients who have had a previous, but different, drug misuse problem recorded.

Interpretation of trend data

Caution must be exercised in interpreting data on trends. Although CMR is generally representative in terms of age, sex, deprivation and urban/rural mix, it may not be as representative in terms of numbers of patients with drug misuse. This is because there can be wide variation in numbers of drug misusing patients in different practices.

Table C3.1 : Number and rate of CMR GP patients with a drug misuse diagnosis ; number and rate of drug misuse CMR GP consultations¹ : 1999 - 2003²

	1999 ^r	2000 ^r	2001 ^r	2002 ^r	2003
Number of CMR GP patients attending in the period ³	234 114	272 774	309 819	322 849	312 149
Number of CMR GP consultations in the period ⁴	932 661	1 077 921	1 229 355	1 247 997	1 165 013
CMR GP patients with a first diagnosis of drugs misuse⁵					
Number	441	558	743	670	676
<i>Rate per 1 000 patients attending a GP</i>	1.9	2.0	2.4	2.1	2.2
CMR GP patients with a diagnosis of drugs misuse⁶					
Number	1 457	1 932	2 355	2 464	2 469
<i>Rate per 1 000 patients attending a GP</i>	6.2	7.1	7.6	7.6	7.9
Drug misuse CMR GP consultations					
Number	8 539	11 048	11 366	12 496	11 471
<i>Rate per 1 000 CMR GP consultations</i>	9.2	10.2	9.2	10.0	9.8

1 Face-to-face contact between GP and patient.

2 Based on a sample of 52 CMR practices which collected and submitted complete GP data for 1999, 57 CMR practices for 2000, 65 CMR practices for 2001, 70 CMR practices for 2002 and 63 CMR practices for 2003. Caution must be exercised in interpreting data on trends. Although CMR is generally representative in terms of age, sex, deprivation and urban/rural mix, it may not be as representative in terms of numbers of patients with drug misuse. This is because there can be wide variation in numbers of drug misusing patients in different practices.

3 Includes all CMR GP patients i.e. not only those with a diagnosis of drug misuse.

4 Includes all CMR GP consultations i.e. not only those with a diagnosis of drug misuse.

5 'First' diagnosis may include patients who have had a previous, but different, drug misuse problem recorded

6 Number of CMR GP patients with at least one diagnosis of drug misuse during the period.

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Source : ISD Scotland, Continuous Morbidity Recording (CMR).

Table C3.2 : Number and rate of CMR GP patients with a drug misuse diagnosis; number and rate of drug misuse CMR GP consultations¹ : 2003²

	Total	Males	Females	
Number of CMR GP patients attending in the period ³				
Total	312 149	137 416	174 733	
Under 15 years	52 216	26 569	25 647	
15-24	38 537	15 882	22 655	
25-44	87 889	36 668	51 221	
45-64	79 416	35 943	43 473	
65 years and over	54 091	22 354	31 737	
Number of CMR GP consultations in the period ⁴				
Total	1 165 013	455 760	709 253	
Under 15 years	140 930	72 049	68 881	
15-24	118 426	38 209	80 217	
25-44	315 082	107 757	207 325	
45-64	323 829	131 650	192 179	
65 years and over	266 746	106 095	160 651	
CMR GP patients with a first diagnosis of drugs misuse				
Number	Total	676	421	255
Under 15 years	12	8	4	
15-24	219	139	80	
25-44	379	257	122	
45-64	50	14	36	
65 years and over	16	3	13	
Rate⁵	Total	2.2	3.1	1.5
Under 15 years	0.2	0.3	0.2	
15-24	5.7	8.8	3.5	
25-44	4.3	7.0	2.4	
45-64	0.6	0.4	0.8	
65 years and over	0.3	0.1	0.4	
CMR GP patients with a diagnosis of drugs misuse ⁶				
Number	Total	2 469	1 599	870
Under 15 years	19	13	6	
15-24	685	416	269	
25-44	1 581	1 088	493	
45-64	151	69	82	
65 years and over	33	13	20	
Rate⁵	Total	7.9	11.6	5.0
Under 15 years	0.4	0.5	0.2	
15-24	17.8	26.2	11.9	
25-44	18.0	29.7	9.6	
45-64	1.9	1.9	1.9	
65 years and over	0.6	0.6	0.6	
Drug misuse CMR GP consultations				
Number	Total	11 471	7 565	3 906
Under 15 years	20	13	7	
15-24	3 000	1 800	1 200	
25-44	7 976	5 526	2 450	
45-64	391	182	209	
65 years and over	84	44	40	
Rate⁷	Total	9.8	16.6	5.5
Under 15 years	0.1	0.2	0.1	
15-24	25.3	47.1	15.0	
25-44	25.3	51.3	11.8	
45-64	1.2	1.4	1.1	
65 years and over	0.3	0.4	0.2	

1 Face-to-face contact between GP and patient.

2 Based on a sample of 63 CMR practices which collected and submitted complete GP data for 2003.

3 Includes all CMR GP patients i.e. not only those with a diagnosis of drug misuse.

4 Includes all CMR GP consultations i.e. not only those with a diagnosis of drug misuse.

5 Rate per 1 000 CMR patients attending a GP.

6 Number of CMR GP patients with at least one diagnosis of drug misuse during the period.

7 Rate per 1 000 CMR GP consultations.

Table C3.3 : Proportion of CMR GP patients seen with specified condition/illness^{1,2} : 2003³

patients aged 15 - 44 years

	Drug misuse CMR GP patients		Non-drug misuse CMR GP patients	
	Number	Percentage	Number	Percentage
Males	(n = 1 504)		(n = 52 550)	
Anxiety & other neurotic, stress-related, & somatoform disorders	250	16.6	3 614	6.9
Depression & other affective disorders	202	13.4	3 272	6.2
Miscellaneous ⁴	150	10.0	5 862	11.2
Diseases of the skin & subcutaneous tissue ⁵	136	9.0	8 436	16.1
Infections of the skin & subcutaneous tissue	123	8.2	3 876	7.4
Injuries of specified, unspecified & multiple body regions ⁶	109	7.2	3 506	6.7
Mental & behavioural disorders due to use of alcohol	91	6.1	599	1.1
Acute upper respiratory infections ⁷	76	5.1	4 515	8.6
Diseases of oesophagus, stomach & duodenum ⁸	70	4.7	1 960	3.7
Mental & behavioural disorders ⁹	68	4.5	1 016	1.9
Females	(n = 762)		(n = 73 876)	
Depression & other affective disorders	209	27.4	7 940	10.7
Anxiety & other neurotic, stress-related, & somatoform disorders	199	26.1	7 756	10.5
Miscellaneous ⁴	124	16.3	8 981	12.2
Diseases of the skin & subcutaneous tissue ⁵	119	15.6	13 009	17.6
Contraceptive management	114	15.0	20 698	28.0
Acute upper respiratory infections ⁷	70	9.2	9 214	12.5
Infections of the skin & subcutaneous tissue	64	8.4	4 130	5.6
Abdominal & pelvic pain	62	8.1	5 472	7.4
Asthma	53	7.0	2 469	3.3
Menstrual disorders	52	6.8	6 941	9.4

1 Ten most commonly seen conditions.

2 ISD's Standard Morbidity Groupings (SMG's) have been used for the analysis of most common conditions. SMG's are groupings of Read codes into clinically meaningful conditions.

It should be noted that due to the introduction of SMG's, the Read code groupings used to define specific conditions may have changed. Therefore the data presented in this table may not be comparable to the data presented in previous years. Further information regarding SMG's can be obtained from Primary Care Information Group (ISD).

3 Based on a sample of 63 CMR practices which collected and submitted complete GP data for 2003.

4 Symptoms, signs & abnormal clinical & laboratory findings, not elsewhere classified.

5 Excluding infections & malignancies

6 Excluding fractures, dislocations, sprains & strains, injury of eye & orbit, intracranial injury, injury of other internal organs, crushing injuries & traumatic amputations.

7 Excluding acute pharyngitis, acute tonsillitis, acute laryngitis & tracheitis

8 Excluding gastric & duodenal ulcer, gastritis, duodenitis & malignancies

9 Excluding dementia, alcohol or psychoactive substance use, schizophrenia, schizotypal, delusional disorders, depression, affective disorders, anxiety, stress-related & somatoform disorders, & learning disability

Note : Population source - ISD Scotland, General Medical Practitioner Database.

Source : ISD Scotland, Continuous Morbidity Recording (CMR).

Table C3.4 : Drug misusing CMR GP patient and consultation rates per 1 000 population by deprivation category : 2003¹

	Total	Deprivation Category ⁵				
		1	2	3	4	5
CMR practice population	398 756	77 598	64 777	93 268	87 262	75 851
Drug misuse						
Number of drug misusing CMR GP patients	2 469	213	221	552	648	896
Drug misusing CMR GP patients ² per 1 000 practice population	6.2	2.7	3.4	5.9	7.4	11.8
Number of drug misuse CMR GP consultations ³	11 471	790	1 052	2 305	3 040	4 517
Drug misuse CMR GP consultations ⁴ per 1 000 practice population	28.8	10.2	16.2	24.7	34.8	59.6
Non-drug misuse						
Number of non-drug misuse CMR GP consultations ³	1 153 542	204 098	191 336	277 725	255 483	233 232
Non drug misuse CMR GP consultations ⁴ per 1 000 practice population	2 892.9	2 630.2	2 953.8	2 977.7	2 927.8	3 074.9

1 Based on a sample of 63 CMR practices which collected and submitted complete GP data for 2003.

2 Drug misusing CMR GP patient rates are calculated by dividing the number of CMR GP patients with at least one diagnosis of the specified condition by the practice population.

3 The sum of the GP consultations within each deprivation category does not equal the total GP consultation figure due to a small number of duplicate records on the file. The file is currently undergoing a 'clean up' process to address this issue.

4 CMR GP consultation rates are calculated by dividing the number of CMR GP consultations recorded within the relevant time period by the practice population. CMR GP consultations include face to face contact between GP and patient.

5 Category 1 denotes most affluent and 5 least affluent.

Note : Population source - Community Health Index (CHI) record (as at September 2003).

Source : ISD Scotland, Continuous Morbidity Recording (CMR).