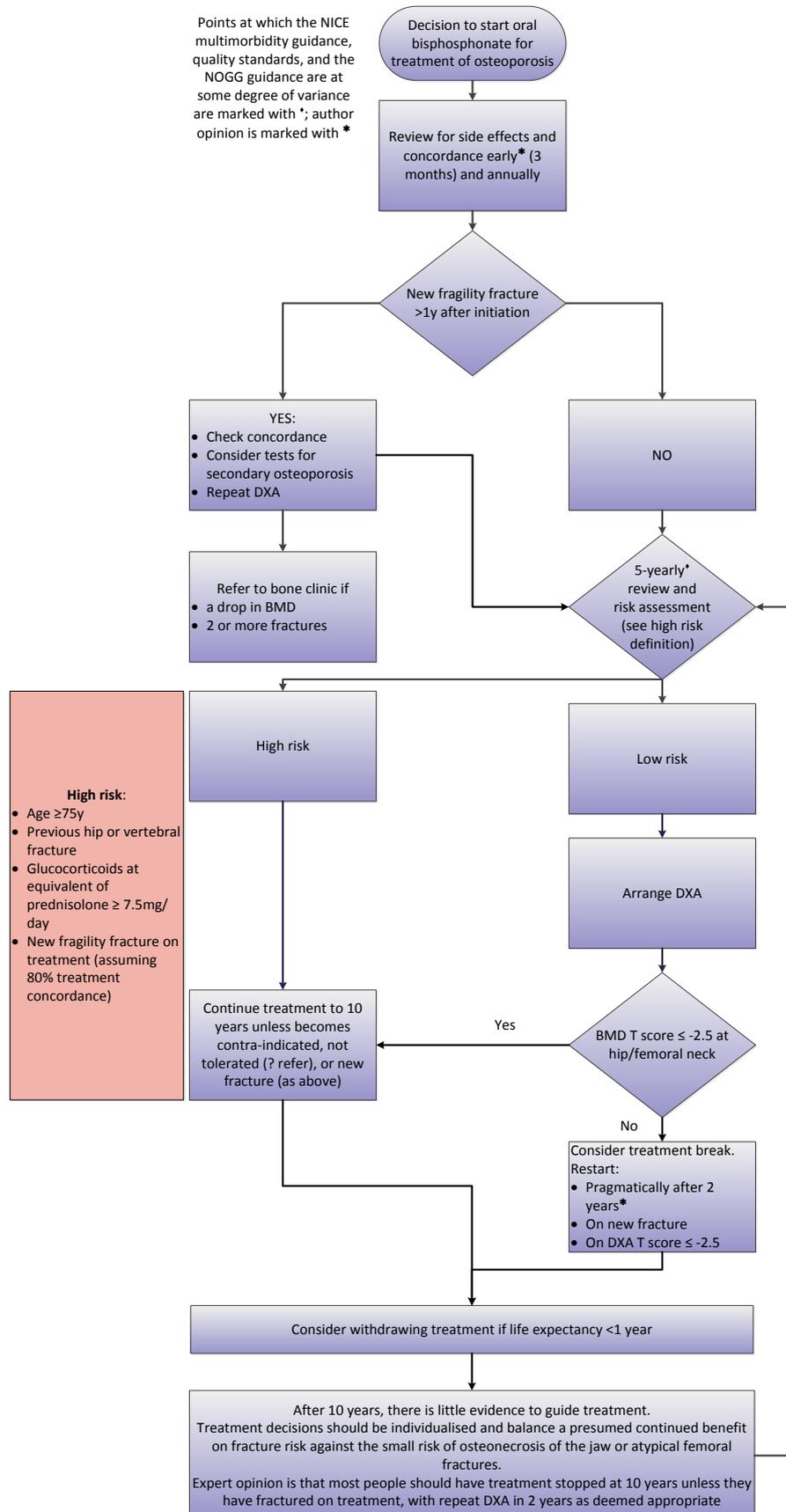


# General practice prescription of oral bisphosphonates: review flowchart and operationalisable audit criteria for drug holidays: Version 2, October 2017

John J Edwards<sup>1,2</sup>, Elizabeth Cottrell<sup>1,2</sup>, Zoe Paskins<sup>1,3</sup>

<sup>1</sup>Research Institute for Primary Care & Health Sciences, Keele University, Keele, Staffordshire, ST5 5BG, UK;

<sup>2</sup>Wolstanton Medical Centre, Newcastle-under-Lyme, ST5 8BN, UK; <sup>3</sup>Haywood Academic Rheumatology Centre, The Haywood Hospital, Stoke-on-Trent Staffordshire, ST6 7AG, UK



### Proposed audit criteria

1. % patients initiated on an oral bisphosphonate with a review at 1 month to assess concordance and side effects
2. % patients prescribed oral bisphosphonates with a medication review in the previous 12 months specifically addressing concordance and side effects
3. % patients prescribed oral bisphosphonates for at least 12 months who have sustained a fracture referred for DXA or to the bone clinic
4. % patients prescribed oral bisphosphonates for 5 years who have a review of treatment continuation and risk assessment
5. % patients at low risk who are offered a bisphosphonate 'holiday'
6. % patients at low risk taking a bisphosphonate holiday who are reassessed at 2 years to consider restarting for a further 5 years
7. % patients at low risk taking a bisphosphonate holiday whose repeat DXA T score is  $\leq -2.5$  at the hip/femoral neck who restart treatment
8. % patients at high risk who continue oral bisphosphonates to 10 years
9. % patients prescribed oral bisphosphonates for more than 10 years who have a documented review with fracture risk assessment and discussion about potential continuation
10. % patients on the palliative care register who are assessed for oral bisphosphonate deprescribing

### References

Diez-Perez A, Adachi JD, Agnusdei D, Bilezikian JP, Compston JE, Cummings SR, et al. Treatment failure in osteoporosis. *Osteoporos Int* 2012; 23: 2769-2774 doi:10.1007/s00198-012-2093-8.

National Institute for Health & Care Excellence. NG56 Multimorbidity: clinical assessment and management. London: National Institute for Health & Care Excellence 2016.

National Institute for Health and Care Excellence. Quality standard QS149: Osteoporosis. London: National Institute for Health and Care Excellence 2017.

National Osteoporosis Guideline Group. Clinical guideline for the prevention and treatment of osteoporosis. Sheffield: University of Sheffield 2017.