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# Prescribing by GP age

## Keywords

general practice; prescribing



The Australian medical workforce is growing as we seek to meet the clinical demand of an ageing population.<sup>1</sup> It is expected that younger general practitioners will gradually replace older retiring GPs. Using BEACH data (April 2009 to March 2012) we compared 439 GPs aged less than 40 years (younger GPs) and 697 GPs aged 60+ years (older GPs) to determine whether there were differences between the two groups – particularly in terms of prescribing (Table 1).

Younger GPs were more likely to be female, hold FRACGP, be an Australian graduate and work in a group practice. Older GPs were more likely to manage patients who: were male, were aged 45+ years, held a Commonwealth healthcare card (HCC) or Veterans' Affairs card; were from a non-English speaking background (NESB); were visited at home or at a residential aged care facility; had been previously to the practice. There was no difference in the number of problems managed at encounters, however, younger GPs managed more new problems while older GPs managed more chronic problems.

Older GPs recorded more medications overall, particularly those prescribed, while younger GPs recorded more supplied and advised for over-the-counter purchase medications. Older GPs recorded opioids at a higher rate, but the systemic antibiotic rate did not differ. Younger GPs provided more non-pharmacological treatments, such as clinical and procedural treatments and referrals, and ordered more imaging and pathology tests.

There are clear differences between the two groups of GPs, especially in their prescribing. While some of these differences may be explained by a higher proportion of young GPs being female,<sup>2</sup> or older GPs seeing more older patients with more chronic problems, other behaviours may be unique to the older cohort and may not be replaced by the younger GPs. Further research measuring the impact of these differences on future general practice is required.

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**Table 1. BEACH GPs: April 2009 to March 2012**

Characteristic	GPs aged <40 years (95% CI)	GPs aged 60+ years (95% CI)
<b>GP</b>		
	<b>Proportion</b>	
Female	58.1% (53.5–62.7)	18.7% (15.8–21.5)
FRACGP	83.1% (79.5–86.6)	22.7% (19.5–25.8)
Australian graduate	76.3% (72.3–80.3)	62.9% (59.3–66.5)
Solo practitioner	2.1% (0.7–3.4)	22.2% (19.1–25.3)
<b>Patient</b>		
	<b>Proportion</b>	
Female	62.5% (61.3–63.8)	54.4% (53.5–55.3)
45+ years	44.0% (42.5–45.5)	63.8% (62.4–65.2)
HCC	35.2% (33.4–37.0)	50.7% (49.1–52.3)
Veterans' Affairs card	1.9% (1.7–2.1)	3.2% (2.9–3.5)
NESB	5.5% (4.2–6.7)	10.5% (8.9–12.2)
New to practice	9.9% (8.8–10.9)	7.6% (6.9–8.3)
Aged care facility	2.4% (1.8–3.1)	0.8% (0.5–1.1)
Home or institutional visit	1.5% (1.0–1.9)	0.4% (0.3–0.6)
<b>Management</b>		
	<b>Rate per 100 encounters</b>	
Problems managed	154.5 (151.8–157.1)	153.0 (150.4–155.7)
– new problems	64.8 (62.9–66.7)	53.5 (52.0–55.0)
– chronic problems	41.8 (39.8–43.7)	61.7 (59.4–64.1)
Medications	98.6 (96.2–101.0)	112.4 (108.9–115.8)
– prescribed	71.9 (69.7–74.2)	94.5 (91.2–97.8)
– advised OTC	13.2 (12.2–14.1)	8.0 (7.0–9.0)
– GP supplied	13.5 (12.3–14.7)	9.9 (8.7–11.0)
Other treatments	66.4 (62.7–70.0)	48.0 (45.5–50.4)
– clinical	43.8 (40.7–47.0)	29.2 (27.2–31.2)
– procedural	22.5 (21.3–23.7)	18.7 (17.6–19.9)
Referrals	16.2 (15.4–16.9)	12.6 (12.0–13.2)
– allied health	5.5 (5.1–5.9)	3.2 (3.0–3.5)
– specialist	9.5 (9.0–9.9)	8.0 (7.6–8.4)
– pathology	56.6 (54.0–59.1)	38.2 (36.3–40.1)
– imaging	10.6 (10.1–11.1)	9.3 (8.9–9.8)

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