11 Mental health-related prescriptions

11.1 Introduction

This chapter presents information on prescriptions for *mental health-related medications* that are subsidised by the Australian Government through the *Pharmaceutical Benefits Scheme* (PBS) and the *Repatriation Pharmaceutical Benefits Scheme* (RPBS). Under both schemes, Medicare Australia makes payments to pharmacists to subsidise pharmaceutical products that are regarded as necessary and/or life-saving and are listed in the *Schedule of Pharmaceutical Benefits* (DoHA 2008d).

Key concepts

Mental health-related medications are defined in this chapter as:

- five selected medication groups as classified in the Anatomical Therapeutic Chemical (ATC)
 Classification System (WHO 2009b)—namely antipsychotics (code N05A), anxiolytics (code
 N05B), hypnotics and sedatives (code N05C), antidepressants (code N06A) and
 psychostimulants and nootropics (code N06B)—prescribed by all medical practitioners (that
 is, GPs, non-psychiatrist specialists and psychiatrists)
- · all other medications prescribed by psychiatrists.

Mental health-related prescriptions are defined as prescriptions for mental health-related medications subsidised under the PBS/RPBS, which were dispensed by an approved pharmacist and for which the claim was processed by Medicare Australia in the reporting period.

Note that the intent of the definition of mental health-related medications used in this chapter is to capture, as far as possible, medications that were dispensed for mental health-related reasons. However, it is likely that some medications are included that were prescribed for non-mental health-related reasons (for example, some medications prescribed by psychiatrists may not relate directly to the patient's mental health problems including use of hypnotics and sedatives during post-operative care), while other medications that were related to mental health problems may have been excluded (for example, some medications prescribed by GPs or non-psychiatrist specialists that fall outside of the five selected medication groups may have been prescribed for mental health-related problems).

It should also be noted that over-the-counter medications (including orthodox and alternative medications) and non-subsidised medications, such as private prescriptions and below co-payment prescriptions (where the patient co-payment covers the total cost of the prescribed medication), are not included in the PBS and RPBS data. Based on the Drug Utilisation Sub-Committee database, 75% of *mental health-related prescriptions* were dispensed under the PBS or RPBS in 2007–08 (DoHA 2009a). The remainder were privately funded due either to the ineligibility of the patient or the price being below the maximum patient contribution.

This chapter first presents information on mental health-related prescriptions for 2007–08, according to the type of medication prescribed and the prescribing medical practitioner, followed by data that cover the period from 2003–04 to 2007–08. Secondly, tables present the number of patients receiving mental health-related prescriptions for 2007–08, disaggregated

by demographic characteristics and area of residence, as well as by prescribing medical practitioner and type of medication prescribed. The latter is also presented in time series format for the period from 2003–04 to 2007–08.

The number of prescriptions issued through community pharmacies that are not covered by the PBS and RPBS is estimated through the Pharmacy Guild Survey (AIHW 2007b). These survey data are combined with PBS and RPBS data from Medicare Australia in the Drug Utilisation Sub-Committee (DUSC) database. This database estimates that the total number of community dispensed prescriptions for mental health-related ATC groups in 2007–08 was about 27 million (see Appendix Table A1.5). For further information on the PBS and RPBS, the DUSC database, and about data on medications covered by these schemes, refer to Appendix 1.

Related data on expenditure on medications under the PBS and RPBS are presented in Chapter 14 of this publication.

In interpreting the information provided in this chapter, note that individual prescriptions will vary in the number of doses, the strength of each individual dose and the type of preparation (such as tablets or injections).

Each of the pharmaceutical products subsidised through the PBS or RPBS is listed in the *Schedule of Pharmaceutical Benefits* (DoHA 2008d). The coding of the pharmaceutical products in this schedule is based on the Anatomical Therapeutic Chemical (ATC) Classification System, defined by the World Health Organization (WHO 2009b). This classification assigns therapeutic drugs to different groups according to the organ or system on which they act, as well as their therapeutic and chemical characteristics. In Table 11.1, the five selected medication groups that have been defined as mental health-related are briefly described.

Table 11.1: Drug groups defined for this report as mental health-related medications in the PBS/RPBS data

ATC code	Drug groups	Brief description of effects and indications					
N05	Psycholeptics	A group of drugs that tranquilises (central nervous system depressants)					
N05A	Antipsychotics	Drugs used to treat symptoms of psychosis (a severe mental disorder characterised by loss of contact with reality, delusions and hallucinations), common in conditions such as schizophrenia, mania and delusional disorder.					
N05B	Anxiolytics	Drugs prescribed to treat symptoms of anxiety.					
N05C	Hypnotics and sedatives	Hypnotic drugs are used to induce sleep and treat severe insomnia.					
		Sedative drugs are prescribed to reduce excitability or anxiety.					
N06	Psychoanaleptics	A group of drugs that stimulates the mood (central nervous system stimulants)					
N06A	Antidepressants	Drugs used to treat the symptoms of clinical depression.					
N06B	Psychostimulants and nootropics	Agents used for attention-deficit hyperactivity disorder (ADHD) and to improve impaired cognitive abilities (nootropics).					

11.2 Prescriptions

This section presents information on the number and type of mental health-related prescriptions that were subsidised under the PBS and RPBS. In interpreting this information, note that a person may have obtained several subsidised mental health-related prescriptions during the period covered. Information on the number of people receiving mental health-related prescriptions is presented in the following section.

In 2007–08, there were 184.7 million PBS/RPBS-subsidised prescriptions for medications, of which 20.4 million (11.0%) were for mental health-related medications (Table 11.2). This is equivalent to 962 mental health-related prescriptions per 1,000 population (Table 11.3).

Of the 20.4 million mental health-related prescriptions, the great majority (85.6%) were provided by GPs, with another 9.4% being prescribed by psychiatrists and 4.9% by non-psychiatrist specialists.

Most of the 20.4 million prescriptions were for antidepressant medication (57.2%, or 11.7 million), followed by anxiolytics (15.6%), hypnotics and sedatives (13.0%) and antipsychotics (10.9%).

Table 11.2: Mental health-related prescriptions, by type of medication prescribed^(a) and prescribing medical practitioner, 2007–08

ATC group (code)	General practitioners	Non-psychiatrist specialists	Psychiatrists	Total ^(b)	Total (per cent)
Antipsychotics (N05A) ^(c)	1,603,542	183,694	421,898	2,211,209	10.9
Anxiolytics (N05B)	2,950,696	88,003	137,423	3,179,289	15.6
Hypnotics and sedatives (N05C)	2,505,034	84,038	52,088	2,643,327	13.0
Antidepressants (N06A)	10,309,722	391,091	944,228	11,657,069	57.2
Psychostimulants and nootropics (N06B)	57,134	259,170	76,058	392,502	1.9
Other ATC groups ^(d)			285,830	285,830	1.4
Total	17,426,128	1,005,996	1,917,525	20,369,226	
Total (per cent)	85.6	4.9	9.4		100.0

⁽a) Classified according to the ATC Classification System (WHO 2009b). Does not include public hospital prescriptions dispensed through Section 100 arrangements, in particular for Clozapine.

Source: Pharmaceutical Benefits Scheme and Repatriation Pharmaceutical Benefits Scheme data (DoHA).

There was some variation in the number and type of mental health-related medications prescribed across states and territories in 2007–08 (Table 11.3). The rate of prescriptions per 1,000 population was relatively low in the Australian Capital Territory (684 per 1,000 population) and New South Wales and Western Australia were also below the national average of 962 prescriptions per 1,000 population. In contrast, Tasmania and South Australia had considerably higher rates of prescriptions than the national average (1,314 and 1,155 prescriptions per 1,000 population, respectively) while Victoria and Queensland were also above average.

⁽b) Includes prescriptions where the prescriber's specialty was unknown.

⁽c) Includes Clozapine dispensed through Section 100 arrangements by private hospitals but not by public hospitals.

⁽d) Includes other N codes as well as other ATC medication groups as presented in Table 11.4. Note that data for other ATC groups prescribed by GPs and non-psychiatrist specialists are not presented because they are not included in the definition of mental health-related medications.

Regarding the distribution of mental health-related prescriptions across the ATC groups, Tasmanian providers prescribed a higher proportion of anxiolytics than the national average (21.0% compared with 15.6% for Australia) and a lower proportion of antipsychotics (7.3% compared with 10.9% for Australia) while providers in the Australian Capital Territory and the Northern Territory prescribed higher proportions of antidepressants (62.5% and 61.2%, respectively compared with 57.2% for Australia) and Western Australian providers prescribed a higher proportion of psychostimulants and nootropics (3.6% compared with 1.9% for Australia).

Most jurisdictions showed the same relationships between the type of mental health-related medication and the medical practitioner who provided the prescription. Exceptions include the Northern Territory, which had a higher proportion of antipsychotic prescriptions provided by non-psychiatrist specialists than the national average (24.6% compared with 8.3% for Australia), and the Australian Capital Territory, which had a higher proportion of antipsychotic prescriptions provided by psychiatrists (28.0% compared with 19.1% for Australia). Queensland and the Northern Territory also had higher proportions of psychostimulant and nootropic prescriptions provided by GPs than the national average (33.6% and 26.5%, respectively, compared with 14.6% for Australia) while the Northern Territory and Tasmania had a lower proportion provided by psychiatrists (3.3% and 9.6%, respectively, compared with 19.4% for Australia). Victoria, New South Wales, Tasmania and the Northern Territory had a higher proportion of psychostimulant and nootropic prescriptions provided by non-psychiatrist specialists than the national average (70% and over compared with 66.0% for Australia).

Table 11.4 shows the trends in the prescription of mental health-related medications over the five years from 2003–04 to 2007–08.

Overall, mental health-related prescriptions decreased from 20.7 million in 2003–04 to 20.4 million in 2007–08, at an annual average rate of 0.4%. The rate of prescriptions (per 1,000 population) declined from 1,035 in 2003–04 to 962 in 2007–08 at an average annual rate of 1.8%. There were increases in the number of psychostimulants and nootropics, and antipsychotics prescribed (on average by 12.0% and 8.7% per year, respectively). However, prescriptions for hypnotics and sedatives decreased on average by 3.5% per year, while prescriptions for anxiolytics, antidepressants and other medications prescribed by psychiatrists decreased on average by around 1% per year.

The biggest increase in prescription of a particular ATC group by a provider type was for the prescription of psychostimulants and nootropics by non-psychiatrist specialists, which rose by an average annual rate of change of 17.9%. GPs also increased their prescribing of this group, which covers attention-deficit hyperactivity disorder (ADHD) medications, by 11.1% per year. The prescription of antipsychotics by non-psychiatrist specialists also saw a substantial increase of 16.3% per year.

Table 11.3: Mental health-related prescriptions, by type of medication prescribed^(a) and prescribing medical practitioner, states and territories^(b), 2007–08

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Australia		
	Antipsychotics including Clozapine (N05A)										
General											
practitioners	541,060	438,135	282,250	125,167	156,617	37,143	17,765	5,334	1,603,542		
Non-psychiatrist specialists	38,332	74,048	35,711	20,602	8,255	2,581	2,023	2,142	183,694		
Psychiatrists	142,444	127,582	72,418	24,499	38,356	7,513	7,862	1,222	421,898		
Subtotal ^(c)	722,762	640.020	390,595	170.376	203,346	47,272	28,065	8,700	2,211,209		
Gabiolai	722,702	040,020	330,030	•	,		20,000	0,700	2,211,203		
				Anxio	lytics (N05B)						
General practitioners	812,735	845,941	605,353	233,337	289,888	129,830	26,439	7,137	2,950,696		
Non-psychiatrist	0.12,7.00	010,011	000,000	200,007	200,000	120,000	20,100	7,107	2,000,000		
specialists	20,563	29,149	18,947	7,713	8,850	1,987	519	275	88,003		
Psychiatrists	33,821	47,427	29,858	7,347	12,706	4,857	1,087	316	137,423		
Subtotal ^(c)	869,250	922,668	654,585	248,554	311,548	136,735	28,164	7,745	3,179,289		
		Hypnotics and sedatives (N05C)									
General											
practitioners	783,279	649,894	481,240	241,091	237,684	85,674	20,238	5,872	2,505,034		
Non-psychiatrist specialists	22,314	26,186	17,584	9,250	6,448	1,431	580	244	84,038		
Psychiatrists	12,458	15,563	12,374	4,080	5,593	1,256	671	89	52,088		
Subtotal ^(c)	819,619	691,731	511,393	254,554	249.781	88.393	21.575	6.214	2,643,327		
	Antidepressants (N06A)										
General				, and a opi	occanio (no	,					
practitioners	3,143,411	2,531,368	2,194,993	1,024,186	917,418	331,540	130,045	36,602	10,309,722		
Non-psychiatrist											
specialists	99,998	120,231	85,150	46,706	25,039	8,137	3,589	2,240	391,091		
Psychiatrists	276,121	265,216	201,198	82,216	86,403	20,096	11,162	1,786	944,228		
Subtotal ^(c)	3,527,702	2,917,452	2,482,685	1,153,725	1,029,130	359,873	145,598	40,714	11,657,069		
	Psychostimulants and nootropics (N06B)										
General											
practitioners	9,568	4,276	23,989	11,433	4,990	1,665	642	571	57,134		
Non-psychiatrist	109,969	53,632	37,057	31,562	11,241	10,387	3,824	1,498	259,170		
specialists Psychiatrists	20,847	9,835	10,406	26,503	5,149	1,282	3,624 1,965	71	76,058		
Subtotal ^(c)	140.454	67.758	71,473	69,507	21,385	13.338	6.436	2,151	392,502		
Sublolai	170,734	07,730	•	,	•	*	,	2,131	392,302		
Dovabiatriata	02.005	92.052		nedications p				1 000	205 020		
Psychiatrists Total ^(c)	82,895	83,053	64,150	21,629	24,232	5,588	3,264	1,008	285,830		
	6,162,682	5,322,682	4,174,881	1,918,345	1,839,422	651,199	233,102	66,532	20,369,226		
Rate (per 1,000 population) ^(e)	890	1,015	987	900	1,155	1,314	684	306 ^(f)	962		

⁽a) Classified according to the ATC Classification System (WHO 2009b). Does not include public hospital prescriptions dispensed through Section 100 arrangements, in particular for Clozapine.

⁽b) State/territory is based on the patient's residential address. If the patient's address is unknown, the state or territory of the supplying pharmacy is used. A small number of records for which state/territory is unknown appear only in the Australia column.

⁽c) Includes prescriptions where the prescriber's specialty was unknown.

⁽d) Includes other N codes as well as other ATC medication groups. Note that data for other ATC groups prescribed by GPs and non-psychiatrist specialists are not presented because they are not included in the definition of mental health-related medications.

⁽e) Crude rate based on the preliminary Australian estimated resident population as at 31 December 2007.

⁽f) A substantial proportion of the Australian Government subsidy of pharmaceuticals in the Northern Territory is funded through the Aboriginal Health Services program, which is supplied through the Aboriginal Health Services and not through the usual PBS payment systems (DoHA 2008a).

Table 11.4: Mental health-related prescriptions, by type of medication prescribed^(a) and prescribing medical practitioner, 2003–04 to 2007–08

Medication prescribed/	2002 24	2024 25	2005 00	2000 07	2027.00	Average annual change
prescriber	2003–04	2004–05	2005–06	2006–07	2007–08	(per cent)
Antipsychotics including Cloza	. , ,	*4 007 740	*4 040 445	*4 450 077	4 000 540	0.0
General practitioners	*1,166,841	*1,227,712	*1,340,445	*1,450,377	1,603,542	8.3
Non-psychiatrist specialists	*100,476	*110,866	*134,925	*152,808	183,694	16.3
Psychiatrists	*309,143	*334,539	*368,469	*389,997	421,898	8.1
Subtotal ^(b)	*1,582,039	*1,677,579	*1,848,871	*1,996,375	2,211,209	8.7
Anxiolytics (N05B)						
General practitioners	3,110,660	3,117,091	3,060,719	3,037,662	2,950,696	-1.3
Non-psychiatrist specialists	75,753	80,868	84,636	85,216	88,003	3.8
Psychiatrists	149,124	147,707	142,263	141,540	137,423	-2.0
Subtotal ^(b)	3,341,964	3,349,889	3,292,480	3,268,587	3,179,289	-1.2
Hypnotics and sedatives (N050	;)					
General practitioners	2,888,136	2,848,365	2,726,783	2,632,598	2,505,034	-3.5
Non-psychiatrist specialists	88,786	88,245	87,303	85,360	84,038	-1.4
Psychiatrists	64,380	61,629	57,594	54,435	52,088	-5.2
Subtotal ^(b)	3,045,796	3,001,438	2,875,194	2,775,440	2,643,327	-3.5
Antidepressants (N06A)						
General practitioners	10,666,972	11,249,261	10,869,136	10,642,397	10,309,722	-0.8
Non-psychiatrist specialists	403,139	408,700	401,446	391,199	391,091	-0.8
Psychiatrists	1,070,005	1,082,196	1,029,864	1,004,580	944,228	-3.1
Subtotal ^(b)	12,184,282	12,774,177	12,327,048	12,056,443	11,657,069	-1.1
Psychostimulants and nootrop	ics (N06B)					
General practitioners	37,453	38,688	44,293	48,906	57,134	11.1
Non-psychiatrist specialists	134,319	122,732	144,145	155,341	259,170	17.9
Psychiatrists	76,809	71,623	66,180	69,984	76,058	-0.2
Subtotal ^(b)	249,402	233,603	254,966	274,413	392,502	12.0
Other medications prescribed I	by psychiatrists ⁽	c)				
Psychiatrists	*299,126	*301,204	*291,879	*290,679	285,830	-1.1
Total ^(b)	*20,702,609	*21,337,890	*20,889,938	*20,661,937	20,369,226	-0.4
Rate (per 1,000 population) ^(d)	1,035	1,054	1,017	991	962	-1.8

⁽a) Classified according to the ATC Classification System (WHO 2009b). Does not include public hospital prescriptions dispensed through Section 100 arrangements, in particular for Clozapine.

⁽b) Includes prescriptions where the prescriber's specialty was unknown.

⁽c) Includes other N codes as well as other ATC medication groups as presented in Table 11.5. Note that data for other ATC groups prescribed by GPs and non-psychiatrist specialists are not presented because they are not included in the definition of mental health-related medications.

⁽d) Crude rate based on the preliminary Australian estimated resident population as at 31 December of the reference year.

^{*} Differences in figures reported in previous years caused by item 1330 *Tetrabenazine* which was classified previously to N05A and is now classified to N07X *Other nervous system drugs*.

11.3 Patients

In 2007–08, 20.4 million PBS/RPBS-subsidised prescriptions for mental health-related medications were provided to 2.2 million patients (Table 11.5). This represents an average of 9.2 prescriptions per patient.

There was some variation in the number of prescriptions per patient across sex, age and area of residence groups, with lower average rates for young people and those in *Very remote* areas. There was more marked variation in the number of people obtaining mental health-related prescriptions per 1,000 population (rather than prescriptions per patient). Females, people aged 55 and over, and people living in *Inner regional* and *Outer regional* areas had higher rates of receipt of mental health-related prescriptions than the national average of 105 patients per 1,000 population.

Table 11.5: Patients dispensed with mental health-related prescriptions^(a): patient demographic characteristics and services received, 2007–08

Patient demographics	Number of patients ^(b)	Per cent of patients ^(c)	Rate (per 1,000 population) ^(d)	Number of scripts	Per cent of scripts	Rate (per 1,000 population) ^(c)	Scripts per patient
Age (years)							
Less than 15	52,037	2.3	13	323,777	1.6	79	6.2
15–24	121,312	5.5	41	749,700	3.7	254	6.2
25–34	199,114	9.0	68	1,714,090	8.5	584	8.6
35–44	283,735	12.8	92	2,743,918	13.6	887	9.7
45–54	308,693	13.9	105	3,120,428	15.5	1,064	10.1
55–64	361,545	16.3	152	3,457,224	17.1	1,457	9.6
65+	892,013	40.2	319	8,059,868	40.0	2,880	9.0
Sex							
Male	859,498	38.7	82	7,674,377	38.1	729	8.9
Female	1,358,951	61.3	128	12,494,628	61.9	1,173	9.2
Area of residence							
Major cities	1,389,301	63.4	96	12,617,705	63.5	870	9.1
Inner regional	544,830	24.9	130	4974,316	25.0	1,191	9.1
Outer regional	228,480	10.4	114	2037,765	10.3	1,015	8.9
Remote	23,729	1.1	73	201,732	1.0	619	8.5
Very remote	6,044	0.3	35	46,037	0.2	264	7.6
Total	2,219,234	100.0	105	20,369,226 ^(e)	100.0	962	9.2

⁽a) Does not include public hospital prescriptions dispensed through Section 100 arrangements.

⁽b) The number of service users for each demographic variable may not sum to the total due to missing and/or not reported data.

⁽c) The percentages shown do not include service users for whom the demographic information was missing and/or not reported.

⁽d) Crude rate based on the preliminary Australian estimated resident population as at 31 December 2007, except for area of residence where 30 June 2006 preliminary estimates of resident population by Australian Standard Geographical Classification remoteness area were used and then pro-rated using the preliminary Australian estimated resident population as at 31 December 2007.

⁽e) Includes 197,930 prescriptions for which no patient identifying information exists.

Commensurate with the rates of mental health-related medications prescribed across states and territories, the rate of patients obtaining mental health-related prescriptions (per 1,000 population) in 2007–08 was very low in the Australian Capital Territory (80 per 1,000 population), while Tasmania and South Australia had very high patient rates (135 and 122 patients per 1,000 population, respectively) compared with the national average of 105 (Table 11.6).

Tasmania had a low rate of patients obtaining mental health-related prescriptions from psychiatrists (5.8% of patients compared with 11.1% in the Australian Capital Territory and 9.2% nationally). Tasmania also had a higher rate of patients obtaining mental health-related prescriptions from GPs than other jurisdictions (94.2% compared with 91.6% nationally), while a higher proportion of patients in Victoria obtained mental health-related prescriptions from non-psychiatric specialists (14.1% compared with 12.1% nationally).

A high proportion of patients of psychiatrists in Western Australia obtained prescriptions for psychostimulant and nootropic medications (22.5% compared with a national average of only 6.1%). The Australian Capital Territory also had a high proportion (12.5%) of patients of psychiatrists obtaining prescriptions for psychostimulant and nootropic medications. Similarly, a high proportion of patients of non-psychiatric specialists receiving mental health-related medications in Tasmania, New South Wales and the Australian Capital Territory obtained prescriptions for psychostimulants and nootropics (around 25% compared with a national average of 16.6%).

The number of patients obtaining mental health-related prescriptions declined over the 5 years to 2007–08 by an average annual rate of 3.6%, from 121 per 1,000 population in 2003–04 to 105 in 2007–08 (Table 11.7). The fall in the last 2 years of the period in particular was over 5% per year. The number of patients obtaining mental health-related prescriptions from GPs fell by 2.4% per year over the 5-year period, and by 4.4% per year over the last 2 years of the period. The number of patients obtaining mental health-related prescriptions from psychiatrists also fell over the 5 years while those obtaining mental health-related prescriptions from non-psychiatric specialists rose by 2.5% per year over the 5-year period and by 14.0% per year for psychostimulant and nootropic prescriptions in particular. Antipsychotics (including Clozapine) and psychostimulants and nootropics were the mental health-related medication groups with the greatest increase in patient numbers over the 5-year period across all prescriber types.

Table 11.6: Patients dispensed with mental health-related prescriptions, by prescribing medical practitioner and type of medication prescribed(a), states and territories(b)(c), 2007–08

	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Australia
	General practitioners								
N05A	79,190	61,398	42,061	18,508	22,350	5,614	2,713	887	232,730
N05B	154,467	145,606	112,309	40,540	50,848	20,756	4,437	1,435	530,406
N05C	165,888	139,591	102,478	51,060	50,294	16,427	4,857	1,399	532,006
N06A	430,538	337,561	291,272	135,523	121,697	42,775	18,187	5,447	1,383,028
N06B	2,037	900	5,115	1,798	827	282	125	118	11,202
Subtotal ^(d)	640,606	509,564	417,405	188,747	181,459	63,183	24,608	7,527	2,033,140
				Non-psy	chiatrist spe	cialists			
N05A	10,371	16,540	10,285	4,645	2,269	582	528	401	45,621
N05B	10,234	14,749	10,619	3,678	3,223	1,019	270	152	43,944
N05C	12,264	14,907	10,207	5,054	3,778	846	324	130	47,511
N06A	33,955	40,237	29,908	14,203	8,802	2,766	1,181	612	131,665
N06B	18,763	8,852	7,624	4,998	1,897	1,489	625	266	44,514
Subtotal ^(d)	75,998	79,289	57,638	27,691	17,303	5,778	2,588	1,376	267,663
				P	sychiatrists				
N05A	24,163	20,349	12,447	3,990	6,172	1,180	1,233	252	69,788
N05B	7,720	9,939	6,461	1,608	2,632	868	278	89	29,597
N05C	3,793	4,277	3,416	1,040	1,483	333	221	34	14,600
N06A	45,042	38,996	29,624	11,357	12,530	2,904	1,794	344	142,596
N06B	3,615	1,736	1,965	3,750	789	178	377	13	12,423
Other N codes	12,014	11,348	7,943	2,550	3,376	783	551	113	38,679
Other ATC codes	9,174	8,453	6,811	2,460	2,711	632	402	144	30,790
Subtotal ^(d)	65,653	55,614	40,736	16,695	17,512	3,919	3,011	589	203,734
				All	prescribers	(e)			
N05A	96,360	78,528	52,622	23,095	26,634	6,534	3,676	1,265	288,725
N05B	162,697	156,034	118,839	42,787	53,204	21,433	4,735	1,565	561,304
N05C	172,756	147,510	107,922	53,608	52,488	16,932	5,131	1,491	557,852
N06A	464,348	369,883	312,920	145,960	131,097	44,983	19,506	5,859	1,494,587
N06B	23,278	10,887	12,617	9,674	3,138	1,824	1,059	342	62,819
Total ^{(d)(f)}	702,552	560,438	450,879	207,781	194,778	67,077	27,214	8,741	2,219,234
Rate (per 1,000 population) ^(g)	101	107	107	98	122	135	80	39 ^(h)	105

⁽a) Classified according to the ATC Classification System (WHO 2009b). Does not include public hospital prescriptions dispensed through Section 100 arrangements, in particular for Clozapine. See Table 11.1 for a key to the ATC codes.

⁽b) State/territory is based on the patient's residential address. If the patient's address is unknown, the state or territory of the supplying pharmacy is used. A small number of records for which state/territory is unknown appear only in the Australia column.

⁽c) Excludes prescriptions where the patient identity is unknown.

⁽d) As a patient may obtain prescriptions for medications in more than one group, the total may be less than the sum of each ATC group.

⁽e) Includes counts for 12,695 patients where the prescriber's specialty was unknown.

⁽f) Includes other N codes and other ATC medication groups prescribed by a psychiatrist. Note that data for other ATC groups prescribed by GPs and non-psychiatrist specialists are not presented because they are not included in the definition of mental health-related medications.

⁽g) Crude rate based on the preliminary Australian estimated resident population as at 31 December 2007.

⁽h) A substantial proportion of the Australian Government subsidy of pharmaceuticals in the Northern Territory is funded through the Aboriginal Health Services program, which is processed on the basis of boxes supplied to Aboriginal Health Services and not through the usual PBS systems (DoHA 2008a).

Table 11.7: Patients dispensed with mental health-related prescriptions, by prescribing medical practitioner and type of medication prescribed^{(a)(b)}, 2003–04 to 2007–08

Prescriber/ medication prescribed	2003–04	2004–05	2005–06	2006–07	2007–08	Average annual change (per cent)
General practitioners	2003-04	2004-03	2003-00	2000-07	2007-00	
N05A	*187,863	*195,346	*208,551	*217,411	232,730	5.5
N05B	565,574	561,061	549,147	540,725	530,406	-1.6
N05C	590,619	581,576	558,701	542,087	532,006	-2.6
N06A	1,539,759	1,587,354	1,546,274	1,489,824	1,383,028	-2.6
N06B	7,570	7,738	8,951	9,692	11,202	10.3
Subtotal ^(c)	*2,242,935	*2,283,279	*2,225,755	*2,149,177	2,033,140	-2.4
Non-psychiatrist specialists						
N05A	*29,914	*32,980	*37,065	*40,301	45,621	11.1
N05B	38,413	39,478	42,270	42,930	43,944	3.4
N05C	49,595	48,829	48,606	47,818	47,511	-1.1
N06A	135,443	135,902	135,909	132,033	131,665	-0.7
N06B	26,334	24,601	31,437	34,579	44,514	14.0
Subtotal ^(c)	*242,526	*244,319	*254,840	*255,659	267,663	2.5
Psychiatrists						
N05A	*57,124	*59,846	*63,589	*65,090	69,788	5.1
N05B	31,915	31,635	30,452	29,883	29,597	-1.9
N05C	17,798	17,230	15,737	14,997	14,600	-4.8
N06A	169,248	168,666	160,068	152,247	142,596	-4.2
N06B	11,305	11,101	10,413	10,993	12,423	2.4
Other N codes	39,306	40,266	39,395	38,964	38,679	-0.4
Other ATC codes	36,176	34,708	31,713	30,887	30,790	-4.0
Subtotal ^(c)	*233,246	*233,656	*224,642	*217,462	203,734	-3.3
All prescribers ^(d)						
N05A	*233,518	*242,727	*258,815	*269,526	288,725	5.4
N05B	596,296	592,075	580,449	571,843	561,304	-1.5
N05C	618,929	609,269	585,358	568,284	557,852	-2.6
N06A	1,668,225	1,713,919	1,669,815	1,607,757	1,494,587	-2.7
N06B	41,854	40,194	47,169	50,957	62,819	10.7
Total ^{(c)(e)}	*2,425,621	*2,463,533	*2,408,467	*2,330,327	2,219,234	-2.2
Rate (per 1,000 population) ^(f)	121	122	117	112	105	-3.6

⁽a) Classified according to the ATC Classification System (WHO 2009b). Does not include public hospital prescriptions dispensed through Section 100 arrangements, in particular for Clozapine. See Table 11.1 for a key to the ATC codes.

⁽b) Excludes prescriptions where the patient identity is unknown.

⁽c) As a patient may obtain prescriptions for medications in more than one group, the total may be less than the sum of each ATC group.

⁽d) Includes counts for patients where the prescriber's specialty was unknown.

⁽e) Includes other N codes and other ATC medication groups prescribed by a psychiatrist. Note that data for other ATC groups prescribed by GPs and non-psychiatrist specialists are not presented because they are not included in the definition of mental health-related medications.

⁽f) Crude rate based on the preliminary Australian estimated resident population as at 31 December of the reference year.

^{*} Differences in figures reported in previous years caused by item 1330 *Tetrabenazine* which classified previously to N05A and now classifies to N07X *Other nervous system drugs*.