Australian Commission on **Safety and Quality** in Health Care

NATIONAL MEDICINES SYMPOSIUM 2026

MedicineInsight, Medicines Stewardship and COPD

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Key dates

- 2011 – MedicineInsight established under NPS MedicineWise via QUDTP grant
- 2022 – NPS MedicineWise ceased operations - MedicineInsight lives on
- 2023 onwards – MedicineInsight program transferred to the Commission – stronger governance, same mission.

Same data. Same practices.
Now with National Safety and Quality infrastructure behind it.

MedicineInsight at a glance

Australia's largest national primary care data

2.07M Active patients

162M Clinical encounters

- Longitudinal, non-identifiable, whole-of-practice data
- RACGP ethics approval & robust data governance framework
- Data extracted directly from practices' clinical information system.

Contribution to Medicines Stewardship

3 key pillars



Quality Improvement

See how your practice compares to national data. Monthly updated dashboards show where you shine and where to focus.



Insights

Your practice data presented alongside the aggregate of all participating practice data, and with actionable recommendations – not just numbers.

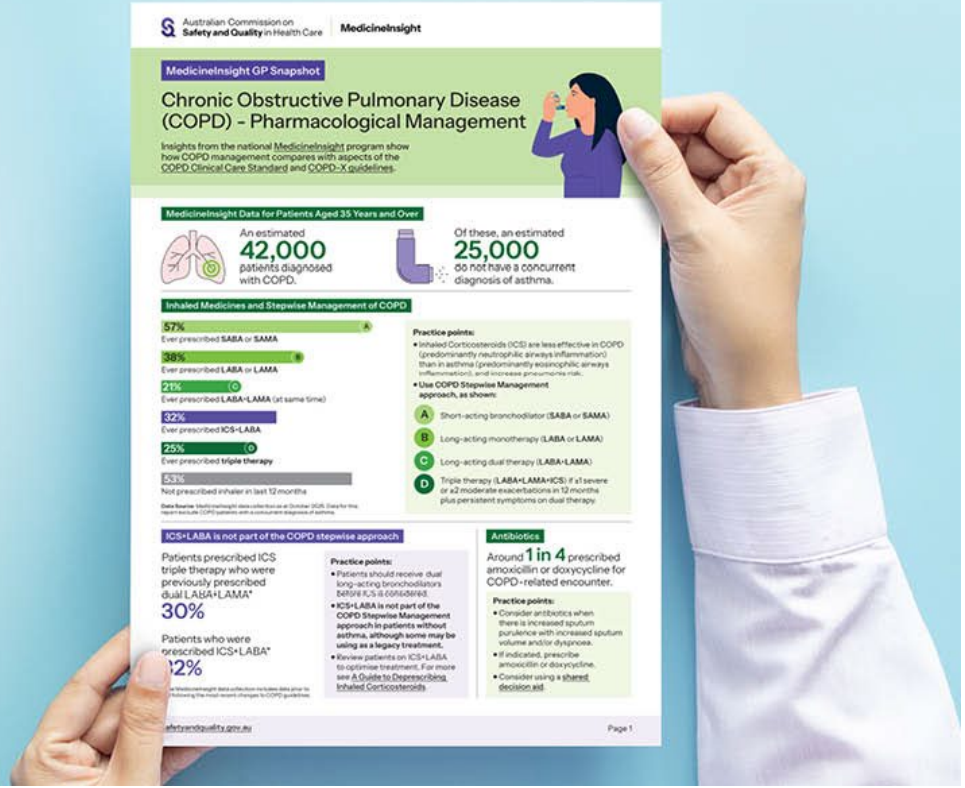


CPD Hours

Each topic comes with a QI Guide that maps directly to CPD activities accredited by the RACGP and ACRRM. Your GPs can earn hours while genuinely improving care.

GP Snapshot: COPD

Actionable data to enhance patient care



MedicineInsight within the ACSQHC Ecosystem

"Overarching purpose: To provide data and commentary on the current management of COPD to improve patient outcomes"

COPD Clinical Care Standard

MedicineInsight

- MedicineInsight GP Snapshot: COPD
- MedicineInsight Practice Report: COPD

Australian Atlas of Healthcare Variation

- Atlas Focus Report: COPD

Practice Reflections

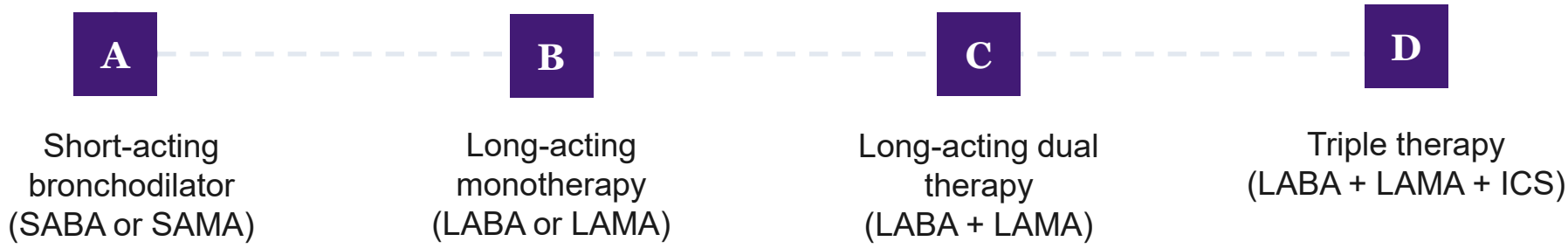
- Practice Reflections: COPD

These reports complement the COPD Clinical Care Standard indicators which can be used to **support local data collection and quality improvement** in both acute and primary care services

COPD prescribing: the “practice points”

Aligning with the COPD Clinical Care Standard and COPD-X guidelines

COPD Stepwise Management



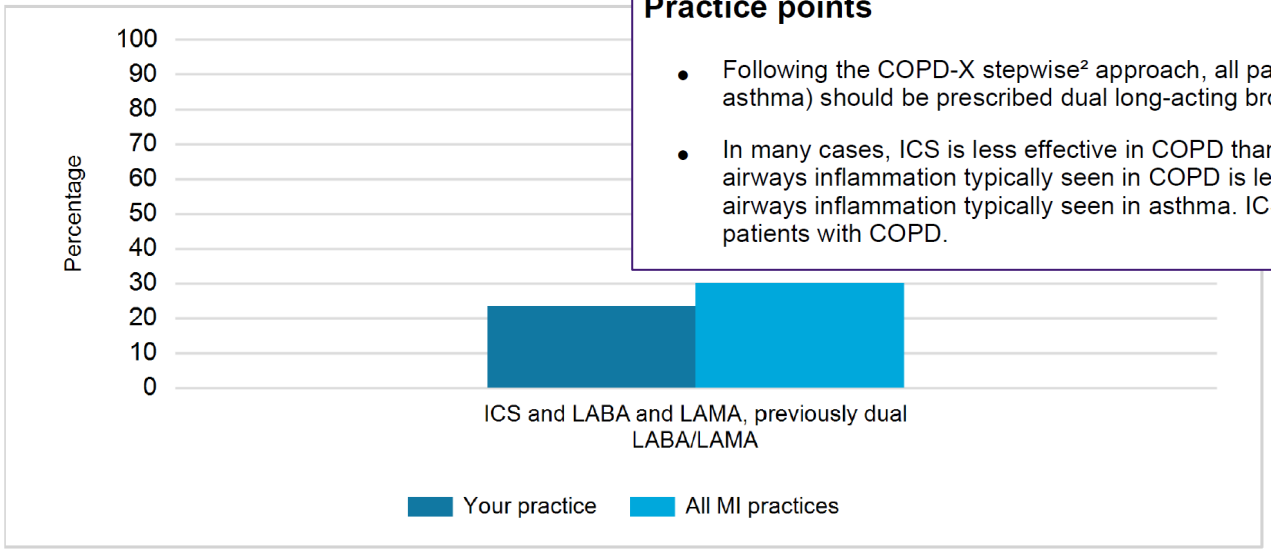
Key Practice Points

- ICS is less effective in COPD than in asthma – use COPD Stepwise Management approach
- 30% of patients on triple therapy were previously prescribed dual LABA+LAMA
- 12% of patients prescribed ICS+LABA alone – consider if LABA+LAMA would be more appropriate.

COPD prescribing: the practice points

Aligning with the COPD Clinical Care Standard and COPD-X guidelines

Figure 3b: Of patients with COPD prescribed triple therapy, those previously prescribed dual long-acting bronchodilators



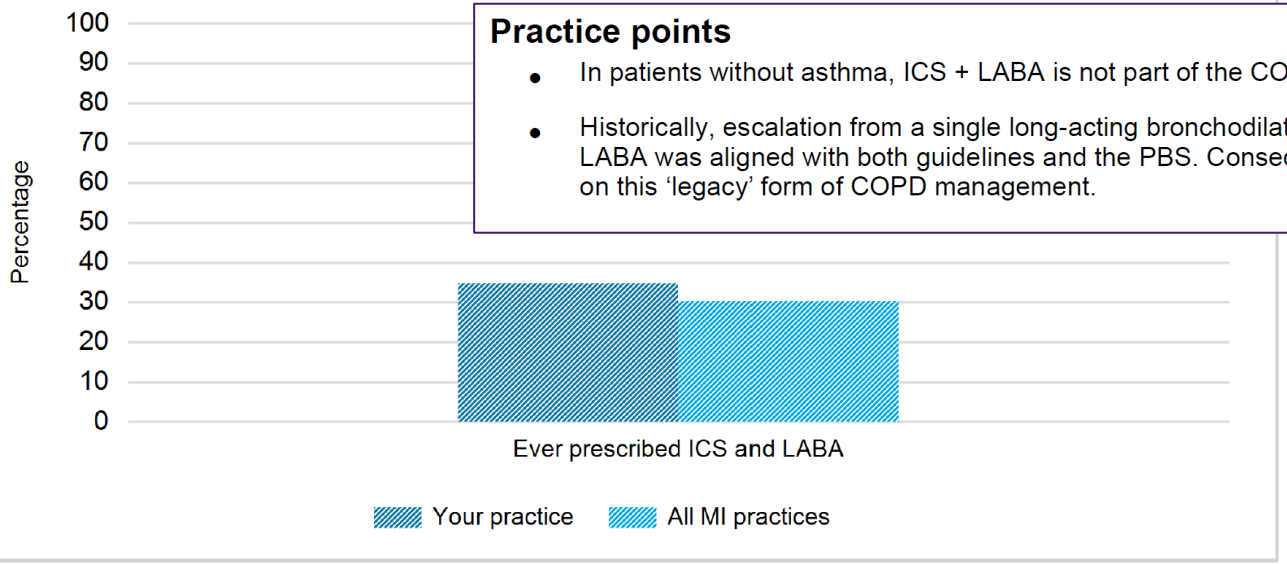
Practice points

- Following the COPD-X stepwise[2] approach, all patients with COPD (and without concurrent asthma) should be prescribed dual long-acting bronchodilators prior to the addition of an ICS.
- In many cases, ICS is less effective in COPD than in asthma. This is because the neutrophilic airways inflammation typically seen in COPD is less responsive to ICS than the eosinophilic airways inflammation typically seen in asthma. ICS can also increase the risk of pneumonia in patients with COPD.

COPD prescribing: the practice points

Aligning with the COPD Clinical Care Standard and COPD-X guidelines

Figure 4a: Patients with COPD prescribed an ICS and LABA



Practice points

- In patients without asthma, ICS + LABA is not part of the COPD-X stepwise approach.[2]
- Historically, escalation from a single long-acting bronchodilator (LABA or LAMA) to ICS + LABA was aligned with both guidelines and the PBS. Consequently, there may be patients on this 'legacy' form of COPD management.

MedicineInsight data powers research & policy

MedicineInsight informs TGA, PBAC/DUSC, and primary care research nationally

Policy & Regulation

- Therapeutic Goods Administration (TGA) post-market surveillance
- PBAC Drug Utilisation Sub-Committee (DUSC)
- AURA antimicrobial surveillance

Research data use

- University of Sydney, Newcastle, Melbourne, Adelaide, Tasmania, UNSW, ANU, Curtin
- George Institute for Global Health
- Murdoch Children's Research Institute
- AIHW & Victorian Dept of Health
- Topics: CVD, CKD, dementia, mental health, women's health, cancer...

All third-party access must be approved by the Commission's Data Governance Committee

For more information

Visit **safetyandquality.gov.au/medicineinsight**

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Thank you

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