Veterans’ MATES 2019 Report
Supporting veterans to manage pain and mental health

Veterans’ Medicines Advice and Therapeutics Education Services program
An initiative of the Australian Government Department of Veterans’ Affairs
The Veterans’ Medicines Advice and Therapeutics Education Services (MATES) program is a multidisciplinary, collaborative venture developed by the University of South Australia’s Quality Use of Medicines and Pharmacy Research Centre with our core partners for the Australian Government Department of Veterans’ Affairs. We acknowledge our core partners:

- University of Adelaide
- Australian Medicines Handbook
- Drug and Therapeutics Information Service (DATIS)
- NPS MedicineWise
- HealthLink
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Veterans’ MATES has been supporting members of the veteran community to improve their lives through better use of medicines and health services over the last 15 years. It has reached more than 300,000 veterans and 33,000 GPs, as well as all pharmacies and aged-care facilities in Australia since inception.

The University of South Australia with support from the University of Adelaide’s Discipline of General Practice and School of Public Health, the Australian Medicines Handbook Ltd, the Drug and Therapeutics Information Service, NPS MedicineWise and HealthLink Ltd, delivers the current program on behalf of the Australian Government Department of Veterans’ Affairs.

The provision of targeted and timely evidence-based education for health professionals and veterans has achieved many positive health outcomes for veterans across a range of health issues affecting the veteran community. This report highlights the program’s success in tackling the health issues most commonly experienced by younger veterans.
What is Veterans’ MATES?

Veterans’ MATES is a precision public health initiative for the veteran community. It is designed to optimise the use of medicines and health care services through targeted education to veterans and their health professionals.

The program uses a whole of health care administrative claims data set, now constituting more than 1 billion records. Doctors receive data on their prescribing and tailored recommendations for each individual veteran they treat. Collectively, since the program commenced, doctors have received 1.5 million targeted messages tailored for each individual veteran.

This data driven approach has improved health outcomes; reducing hospitalisations for heart failure, bleeds, confusion, hip fracture, and pneumonia, as well as preventing premature death.

Each year we provide four health care interventions.
Precision public health: supercharging the health care message

Precision public health is a relatively new term in the literature, but it is a technique Veterans’ MATES has been perfecting for 15 years.

Since its inception, Veterans’ MATES has been underpinned by the use of big data to detect health issues for the veteran community and to tailor interventions for those health issues to veterans most in need. Veterans’ MATES uses administrative data to identify specific medication-related problems and information to precisely target veterans and the general practitioner primarily responsible for their care.

However, it takes more than just big data for a precision public health program to succeed. It also needs to be underpinned by processes and practices informed by theoretical frameworks that support behaviour change and requires commitment to ongoing community consultation and engagement.

These are the three key elements of every Veterans’ MATES intervention.
Precision public health is... an emerging practice to more granularly predict and understand public health risks and customize treatments for more specific and homogenous sub-populations, often using new data, technologies and methods.¹

Or to put it simply, It is about using the best available data to target more effectively and efficiently interventions of all kinds to those most in need.²


A Big Data Source
We use the Australian Government Department of Veterans’ Affairs routinely collected health claims data to identify health care issues and trends, pinpoint those who would benefit from an intervention and provide individually tailored recommendations, and then measure the impact of the intervention.

Ongoing community consultation and engagement
Our reference groups provide input into every stage of the program and meet throughout the year. Veteran and practitioner reference groups provide advice and feedback, a multidisciplinary clinical reference group provides clinical expertise and refines the evidence-based message, and a national representative editorial committee provides guidance and endorsement.

Underpinned by frameworks that promote learning and behaviour change
The program is grounded in three behavioural theories and models: Social Cognitive Theory and the Transtheoretical Model of health behaviour change explain how individuals are likely to acquire and maintain new behavioural patterns over time, and the PRECEDE-PROCEED health promotion model provides a framework that supports effective planning and implementation of the program within the wider environment.
Supporting younger veterans to manage pain and mental health
Improving chronic pain management

More than 3 million Australians live with chronic pain which can affect their physical, mental, emotional and financial wellbeing

A biopsychosocial approach to the management of chronic pain delivers the best outcomes

- 7 out of 10 Australians living with chronic pain are younger than 65 years
- Chronic pain is associated with higher rates of anxiety, depression, substance misuse, and post-traumatic stress
- Medicines for pain are prescribed in 7 out of 10 general practice consultations for chronic pain
- There is no evidence to suggest long-term use of opioid analgesics is effective in resolving chronic pain

A biopsychosocial model is the most effective way to change the impact of chronic pain on day-to-day functioning

The biopsychosocial approach includes a combination of medical, physical and psychological therapies, usually provided by a multidisciplinary team of health professionals

It helps patients develop their own active self-management strategies

And when it incorporates pain neuroscience education, it improves pain, movement and fear-avoidance
Understanding the problem in the veteran community

More than 40% of younger veterans who were continuous users of opioid medicines were also being treated for depression

More than 40% were also being treated for anxiety

Less than 1 in 5 had a psychologist consultation in the last year

Translating the evidence into practice

The Veterans’ MATES intervention aimed to improve the management of chronic pain. The initiative promoted a biopsychosocial approach that incorporated pain neuroscience education and active self-management strategies. It encouraged general practitioners to review the duration of use of opioid analgesics and to cease these where appropriate.

Materials were provided to general practitioners, pharmacists and psychologists. Resources included a guide to tapering and ceasing opioids and information about the benefits of a multidisciplinary team approach.

The veteran intervention included a series of educational materials. Part One explained the biology of pain and Part Two included a practical resource designed to help veterans identify strategies that they can use to manage the pain they experience.

Scan QR Code to view these documents
Veterans of all ages are seeing psychologists, particularly younger veterans.

Veterans on high doses of opioids are seeing psychologists, as well as those on lower doses.

Opioid analgesic use is now declining in veterans aged under 65 years.
After the intervention, 7 out of 10 veterans said they would make an appointment with their doctor to review their pain medicines.

After the intervention, 7 out of 10 general practitioners said they were very likely to incorporate pain neuroscience education in a plan for their patient.

There were 240 additional patient months of psychology treatment.
Achieving best outcomes for depression

Depression is the most common mental health condition managed in general practice

- Australia has the second highest rate of antidepressant use in the world
- Most people with depression have mild to moderate depression
- Antidepressants provide little benefit for most people with mild to moderate depression
- Antidepressant use is often inconsistent with Australian guidelines. The duration is often too short or too long

With appropriate care most people with mild to moderate depression will recover within a year

- Guidelines recommend non-pharmacological therapies as first-line treatments for mild to moderate depression
- For severe depression, antidepressants in conjunction with psychological services are recommended
- With appropriate treatment 54% of people with mild to moderate depression will recover in 6 months, 70% in 1 year, while 12-15% will develop a chronic illness
- DVA provides non-liability health care for depression to support best practice management
Veterans’ MATES 2019 Report

Understanding the problem in the veteran community

- More than 65,000 veterans received an antidepressant within a 2-year period
- 50% of veterans who commence antidepressant therapy discontinue within 6 months
- 12,000 veterans were continuously dispensed the same antidepressant over a 2-year period

Translating the evidence into practice

This Veterans’ MATES intervention aimed to support GPs to manage veterans with mild to moderate depression. The intervention promoted the appropriate duration of antidepressants and the importance of early referral for psychological support.

Materials for veterans highlighted the benefits of psychological treatments for depression and encouraged regular reviews when taking antidepressant medicines.
**What did we achieve?**

Increase in the number of psychologist visits in veterans who had recently started antidepressants

![Psychologist Visits Graph](image1)

Increase in the number of psychiatrist visits in veterans who had changed antidepressants at least twice

![Psychiatrist Visits Graph](image2)
Antidepressant prescriptions are beginning to decline in younger veterans.

Visits to psychologists are rising in younger veterans.
More than 7 out of 10 veterans said the brochure was useful in helping them understand the treatments that can aid in the recovery of depression.

86% of general practitioners reported that the materials helped them understand when it might be appropriate to review the duration of antidepressant therapy.

84% of general practitioners said they intended to refer their veteran patients who had not previously received psychological therapy to a psychologist.

After receiving the materials, 84% of general practitioners said they intended to refer their veteran patients who had not previously received psychological therapy to a psychologist.

After reading the brochure, almost 7 out of 10 veterans reported that they intended to talk to their doctor.
Our reach this year

77,700 veterans have participated in one or more Veterans' MATES interventions

19,400 general practitioners have received information about their patients

8,400 pharmacists have received one or more topics

8,600 dentists have participated in an intervention this year

2,500 aged-care facilities have participated in an intervention this year

20,900 veterans
4,500 GPs

23,600 veterans
5,800 GPs

15,600 veterans
4,400 GPs

2,300 veterans
585 GPs
Research & Innovation

Innovation at Veterans’ MATES is about doing what we do well and making it even better. We are a Continuous Quality Improvement program. It is part of everyone’s role and how we do things around here.

This year we have focused on.......

1. Exploring electronic delivery to general practitioners

- Can Veterans’ MATES be delivered directly to the doctor’s electronic medical record system?
- How does it affect behaviour change, decision making and knowledge?
- March 2019: Successful delivery to GPs involved in phase one pilot.

2. Exploring the use of our message

- Do veterans prefer receiving health information through multimedia and does the mode of access influence this preference?

Electronic version of Patient Specific Feedback incorporating access to supporting therapeutic educational material is encrypted

Encrypted message is forwarded to GP

Health claims data used to generate patient specific feedback

The message is downloaded into the GPs electronic medical record (EMR) system

Scan QR Code to link to the What is CBTi? whiteboard animation
Exploring the impact of implementation techniques on engagement

Is it possible to identify what components of the intervention have the biggest impact on the usefulness and outcomes of the program?

February 2019: Commenced extensive analysis of the 51 interventions Veterans’ MATES has delivered to date, evaluating how implementation features from the educational and feedback materials impact on the usefulness of the program.

Two behaviour change techniques significantly increased the interventions’ usefulness for general practitioners:

1. The inclusion of goal setting strategies
2. The use of prompts

June 2019: Delivered multimedia whiteboard animation as part of the ‘Sleep Well’ intervention.

### Doctor’s name

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<th>Veteran’s name</th>
<th>SUBURB: XXXX</th>
<th>ACCOMMODATION: Community</th>
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<tbody>
<tr>
<td>Medicine</td>
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<td>Other Prescriber</td>
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<tr>
<td>Oxycodone hydrochloride (OxyNorm) Cap 10mg</td>
<td>12/06/17</td>
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<tr>
<td>Tramadol hydrochloride (Tramal SR 50) modified release tab 50mg</td>
<td>30/05/17</td>
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<tr>
<td>Nitrazepam (Mogadon) Tab 5mg</td>
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Home Medicines Review claimed: none claimed in the last two years

### Daily average Oral Morphine Equivalent (OME) per month (mg)

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<th>Aug 16</th>
<th>Sept 16</th>
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</tbody>
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### PLEASE CONSIDER THE REVIEW POINTS BELOW:***

**Patient received opioid therapy for longer than three months**

**Suggested actions:**
- Review use of opioid, taper the dose and cease where appropriate
- Help patient understand how pain works and consider referral to an appropriate allied healthcare team to support this

**Rationale:** Current guidelines suggest that there is no evidence to support the long-term use of opioids as effective in resolving chronic pain or improving function. Opioid therapy for longer than 90 days is associated with continuing use, opioid use disorders, overdose and worse functional status.

**Patient co-prescribed a benzodiazepine**

**Suggested actions:**
- Review use of opioid
- Review use of benzodiazepine

**Rationale:** Current guidelines suggest that this combination can depress the central nervous system and increases the risk of death by 15 fold compared to taking neither medicine.

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*An electronic PDF version of each individual patient’s information is available at www.veteransmates.net.au.
**Based on dispensings of medicines in the 12 month period: July 2016 to June 2017 according to the DVA Health Claims Database. See therapeutic brief for references.

Download Zappar to get the augmented reality experience.
Our Research this year has generated

- 6 peer reviewed academic papers
- 8 presentations provided at national and international conferences
- 2 feature articles written for community based publications

Scan QR Code to view full list of Veterans’ MATES peer reviewed academic papers
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Provided by:
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