

Report on the trends in consumption of drugs for acid-related disorders

– from December 2009 to October 2011

The Danish Medicines Agency monitors the consumption of drugs for acid-related disorders (drugs for heartburn, sour eructation and ulcer) in connection with the removal of the reimbursement for a number of these drugs on 15 November 2010. You can read more about the [Changes in reimbursements for drugs for acid-related disorders](#).

The charts below show the development in consumption of drugs for acid-related disorders from December 2009 to October 2011. For purposes of comparison, you can see consumption in absolute figures for the individual months in the same period by clicking the links inserted below each of the charts. Here you can also access the corresponding data and charts for the five Danish regions. The charts are updated regularly as new data becomes available.

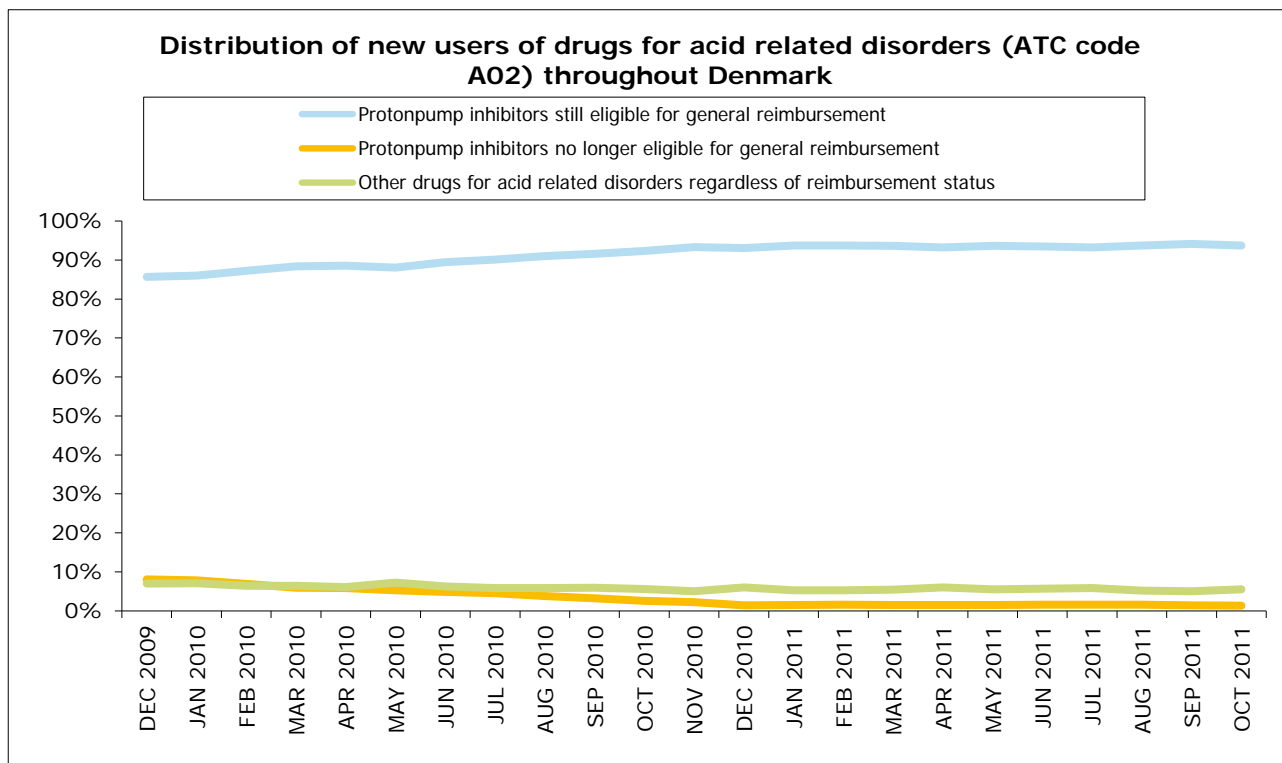
Many patients are now treated with less expensive drugs for acid-related disorders

A comparison between the turn of the year 2009/10 and fall 2011 shows that new patients are predominantly started on treatment with inexpensive drugs for acid-related disorders, which retain the general reimbursement after 15 November 2010. Moreover, many of the patients who were in treatment prior to the change of reimbursement have now switched to the less expensive medicines.

New patients treated with drugs for acid-related disorders

New patients are predominantly started on treatment with the inexpensive proton pump inhibitors omeprazole, lansoprazole and pantoprazole, cf. the chart below. In December 2009, 85.7 per cent of all users were started on treatment with an inexpensive proton pump inhibitor, and this share had increased to 93.7 per cent in October 2011. Correspondingly, the number of new users of expensive proton pump inhibitors has dropped from 8.1 to 1.3 percent. Decreases are also seen within the category 'other drugs', which comprises all other

drugs for acid-related disorders, i.e. H2 receptor antagonists, the group of antacids, sucralfate, alginic acid and misoprostol, where the proportion of new users has decreased, and from July 2010 to October 2011 it has been between 5.0 and 6.0 per cent – from 7.0 per cent in December 2009.

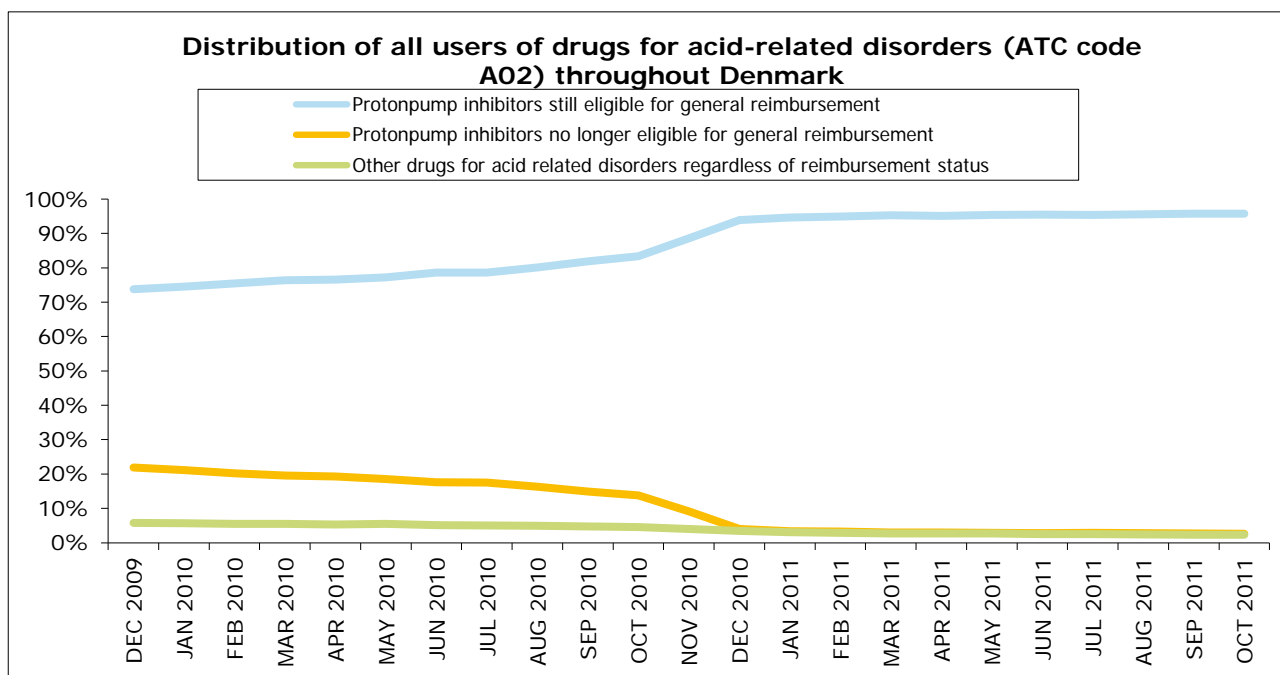


See the [regional distribution and absolute figures for new users of drugs for acid-related disorders](#) (the regional distribution is in Danish and opens in a new window)

All patients treated with drugs for acid-related disorders

The trend reported for new users is also seen within the total number of users, cf. the chart below. In December 2009, 73.8 per cent were treated with an inexpensive proton pump inhibitor. This share increased evenly to 83.3 in October 2010. In the following months, the share increased markedly to 93.9 per cent in December 2010 – around the time of the reimbursement changes. Since then, the share has increased a bit more, and in October 2011 it was at 95.8 per cent. This is counterbalanced by a drop in the number of patients treated with one of the expensive proton pump inhibitors, which fell from 21.9 per cent in December 2009 to 13.8 per cent in October 2010. Since then, it dropped even further to 3.4 per cent in December 2010. Subsequently, there has been a slight continued drop to 2.4 per cent in October 2011.

For medicines in the group 'other drugs', the share treated with one of these medicines fell from 5.8 per cent in December 2009 to 2.4 per cent in October 2011. The largest drop occurred in the months October to December 2010.

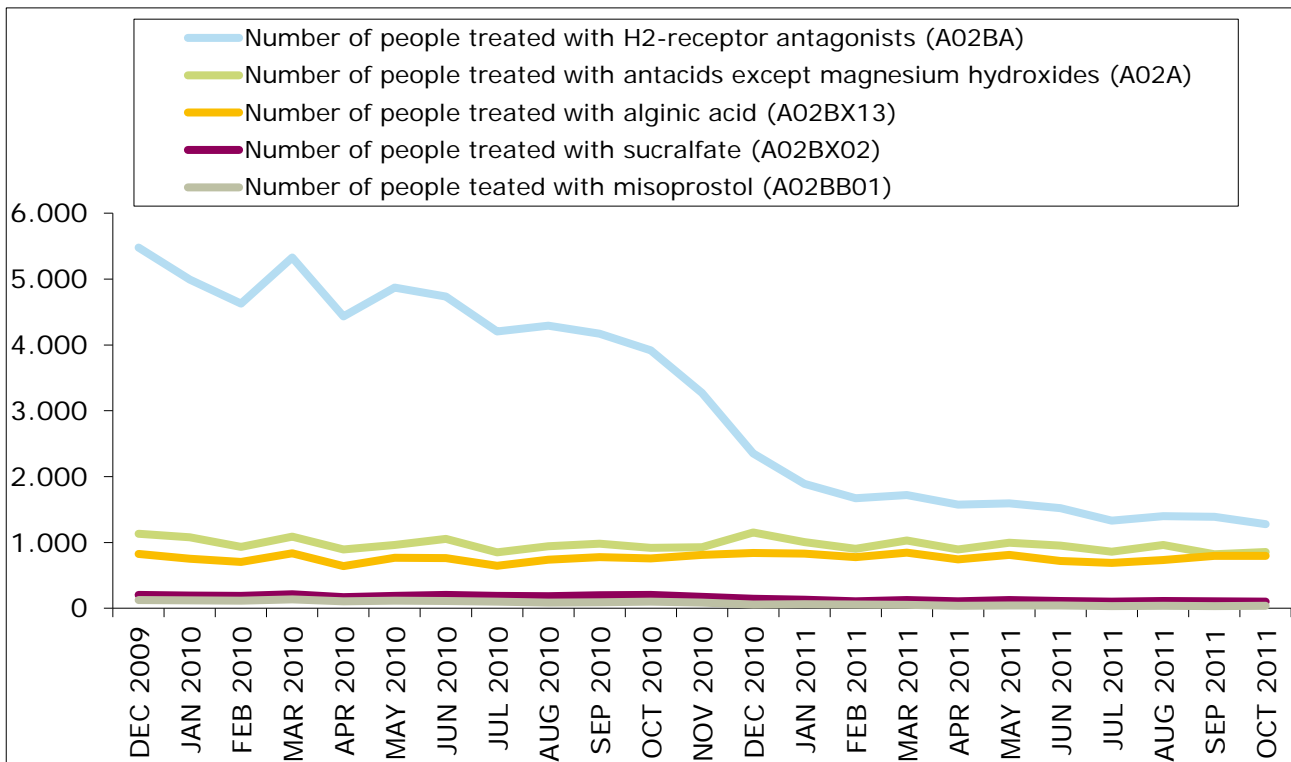


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Persons treated with H2 receptor antagonists, antacids, alginic acid, sucralfate or misoprostol

The group 'other drugs' in the charts above is a complex group of medicines with the common denominator that they are generally not recommended in clinical guidelines within the area. For the H2 receptor antagonists and the medicines misoprostol and sucralfate, the general reimbursement was removed with effect from 15 November 2010. Alginic acid and antacids were not eligible for general reimbursement prior to 15 November 2010.

The chart below shows the number of patients having redeemed a prescription for a drug or drug class under the category 'other drugs', in each month from December 2009 to October 2011.



See the [number of users treated with H2 receptor antagonists, antacids, alginic acid, sucralfate or misoprostol](#) (the regional distribution is in Danish and opens in a new window)

In December 2009, the vast majority of these patients were treated with an H2 receptor antagonist – approximately 5,500 in approximately 7,500 patients. Since then, the number has fallen to a fairly stable number of around 1400 persons in fall 2011. The largest drop occurred in the period October 2010 to January 2011. For sucralfate and misoprostol, which both lost the general reimbursement on 15 November 2010, the number of people treated has dropped evenly but from a very low starting point around the turn of the year 2009-2010 of approximately 200 and 120 persons, respectively.

In the entire period from December 2009 to October 2011, the number of persons treated with antacids or alginic acid has been fairly stable at around 1000 and 7-800 persons, respectively.

With the exception of misoprostol and the H2 receptor antagonist nizatidine, all medicines in this group are available over the counter. This report only includes sales on prescription and not OTC sales.

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