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The Year in Review

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Growth in Retail Prescriptions Slows in 2004

Insight and Outlook from IMS HEALTH

MS Health's annual review of prescribing and diagnoses trends reveals the number of retail prescriptions in Canada grew 5.6% in 2004, the lowest growth recorded since 1998 (dispensed in retail pharmacies; excludes hospitals). Last year, Canadians filled over 382 million prescriptions at their retail pharmacies worth \$17.3 billion Cdn*, up 8.9% from 2003, a dollar-growth well below the double-digit increases for each year from 1998 to 2003. (*Retail cost; includes mark-ups and professional dispensing fees. Does not include sales made to U.S. residents through Canadian Internet pharmacies.)

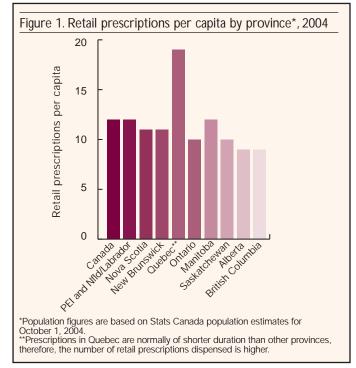
In 2004, Canadians filled an average of 12 prescriptions per person (Figure 1) at an average retail price of \$45.44 per prescription. Canadians aged 80 and over filled the greatest number of retail prescriptions, averaging 42 per person.

Prescriptions for generics grew three times faster than branded medications, 9.6% in 2004 compared to 2003, while prescriptions for brand-name drugs increased 2.6%. Generic medications now account for 43% of prescriptions filled by Canadians.

While generic medications make up a much smaller portion of the dollar volume of prescription medications, sales of generics into hospitals and pharmacies last year went up 18.2% compared to 2003. Sales of brand medications increased 8.0% over the same period.

Leading prescribed classes

As has been the case for the last 15 years, cardiovasculars remain Canada's most prescribed class, up about 7.7% in prescriptions dispensed (Figure 2). Psychotherapeutics, the second most prescribed class, increased 6.6%. Also posting solid growth rates are



Source: IMS Health, CompuScript.



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antispasmodics/antisecretory (e.g., proton pump inhibitors, such as Pantaloc® and Prevacid®) and diuretics.

Once again, cholesterollowering agents are the fastest growing of Canada's 10 leading therapeutic classes, increasing almost 16%. Lipitor®, a cholesterol reducer, was the country's leading prescribed medication in 2004 (Table 1).

Hormones, the third most prescribed class in Canada, experienced the largest drop among Canada's top prescribed classes. Following the results of the Women's Health Initiative study. released in 2002. prescriptions for the hormones estrogen and progestin fell considerably in 2003 and 2004. The study suggested long-term use of combined hormone replacement therapy increases a Top 10 dispensed* drugs in Canada, 2004 Rank Drug Use Total prescriptions, % change 2004 (in thousands) over 2003 9,753 14.1 Lipitor Cholesterol lowering 2 Synthroid Hypothyroidism 8,594 8.3 3 Altace Antihypertensive 7,381 15.1 Norvasc Antihypertensive 4,889 12.3 Tylenol with Analgesic 4,525 1.2 Codeine #3 Effexor XR Antidepressant 4,441 19.3 Novasen Analgesic/ 3,926 -10.7 anti-inflammatory Peptic ulcers Losec 3.682 -14.4 Ratio-Salbumatol Asthma 3,545 8.7 **HFA** 2.5 10 Apo-Furosemide Diuretic 3,438 *Estimated prescriptions dispensed in Canadian retail pharamacies. Includes new and refills.

Source: IMS Health, CompuScript.

Table 1

woman's risk for heart disease and breast cancer.

The voluntary withdrawal of Vioxx® by its manufacturer on September 30, 2004 caused a decrease in the prescriptions for all COX-2 inhibitors. As a result, patients switched to other antiarthritics, such as older non-steroidal anti-inflammatory drugs (NSAIDs). Last year, prescriptions for older NSAIDs went up for the first time since the COX-2s were introduced in 1999.

Depression in young less likely to be treated with a medication in 2004

Canadians 18 and younger made up about 3% of all visits to office-based physicians for depression in 2004. An antidepressant was recommended in approximately 66% of those visits, down from 80% in 2002. Depression continues to be Canada's fastest-rising diagnosis made by office-based physicians (excludes hospitals). Between 1994 and 2004, visits for depression have almost doubled.

Visits for high cholesterol are also growing significantly, increasing over 50% between 1994 and 2004.

Hypertension remains the most common reason for visiting a physician, followed by diabetes. Hypertension has been the main driver of patient visits in Canada for the last decade.

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Montreal, QC (514) 428-6000 Mississauga, ON (905) 816-5000

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