Utilization of generic versus brand name psychopharmaceuticals during a ten-year period in Croatia

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Background
Drug costs increasingly pose a burden upon the otherwise inadequate health care resources and rational drug utilization is an important segment of every national health policy. The aim of this study was to determine distribution and trends in the outpatient utilization of generic versus brand name psychopharmaceuticals and to evaluate the rationality of prescribing psychopharmaceuticals during a ten-year period.

Methods
Using the World Health Organization Anatomical-Therapeutic-Chemical classification/Defined Daily Doses (ATC/DDD) methodology, the number of DDD was calculated from data collected from all Zagreb pharmacies on the number and size of drug packages, during the 2001–2010 period. The ratio of generic and brand name drug costs served as an indicator on assessing the rationality of drug utilization.

Results
Total cost for psychopharmaceuticals increased by 20.1%, more for brand name than for generic agents (32.7% vs. 7.4%). The highest share of generic psychopharmaceuticals as compared with brand name drugs according to DDD per 1000 inhabitants per day (DDD/1000/day) was in the group of psycholeptics (83.6% in 2001 vs. 82.2% in 2010), most in hypnotics and sedatives, and least in antipsychotics. The share of generic psychopharmaceuticals in total drug utilization according to DDD/1000/day decreased by 12%. The greatest decrease was in antidepressants, i.e. by 46% according to DDD/1000/day; and in antipsychotics by 30.9%. In the therapeutic subgroup of mood stabilizers, the share of generic drugs in total drug utilization declined by 32% according to DDD/1000/day.

Conclusions
The lack of uniform national guidelines and the still strong impact of pharmaceutical industry marketing continue favoring the rise in prescribing brand name antidepressants and antipsychotics. Combining the initiatives to lower the price of generics with demand-side measures to enhance their prescribing is important to maximize prescribing efficiency.

Key messages
• There is a potential to achieve some savings with generic psychopharmaceuticals
• Multiple measures are needed to change the physician prescribing habits