## 6 Expenditure on cardiovascular medicines

In 2005 the Australian Government spent \$1.8 billion on 'cardiovascular system' medicines, accounting for 31% of the total spent on all pharmaceuticals for which benefits were paid. In addition, government expenditure on 'blood and blood-forming organs' medicines was \$214 million in that year, representing 4% of the total (Table A5).

Serum-lipid-reducing agents (mainly statins) accounted for 55% of the total government expenditure on cardiovascular system medicines in 2005, while agents acting on the reninangiotensin system represented 25%. Platelet aggregation inhibitors excluding heparin (such as aspirin) accounted for 86% of the total spent on blood and blood-forming organs medicines in that year.

Four medicines indicated for cardiovascular disease were among the top ten by cost to the Australian Government in 2005 (Table 15). The cholesterol-lowering medicines atorvastatin and simvastatin were ranked first and second, costing \$481 million and \$352 million, respectively.

Table 15: Top ten prescription medicines by cost to the Australian Government, 2005

Rank	Medicine	Action	Number of PBS/RPBS prescriptions ('000)	Cost to Australian Government (\$million)
1	atorvastatin*	Lowers blood cholesterol	8,439	481
2	simvastatin*	Lowers blood cholesterol	6,318	352
3	omeprazole	Lowers gastric acid	4,334	169
4	salmeterol and fluticasone	Opens airways	2,817	166
5	clopidogrel*	Antiplatelet agent	2,038	159
6	esomeprazole	Lowers gastric acid	3,296	157
7	olanzapine	Antipsychotic agent	725	151
8	alendronic acid	Lowers bone breakdown	2,211	112
9	pravastatin*	Lowers blood cholesterol	2,062	112
10	pantoprazole	Lowers gastric acid	2,655	105

Note: \* Denotes medicine indicated for cardiovascular disease.

Source: Pharmaceutical Benefits Data System, DoHA (unpublished).

Over the period 2001–05, government expenditure on 'cardiovascular system' medicines increased by 26%, while expenditure on 'blood and blood-forming organs' medicines rose by 56% (Figure 17 and Table A5). By comparison, government expenditure on all pharmaceuticals increased by 23% (DoHA unpublished).

Among cardiovascular system medicines, there were increases in expenditure for cardiac-stimulants excluding cardiac glycosides (95%), beta-blocking agents (40%), antihypertensives (37%), serum-lipid-reducing agents (33%) and agents acting on the renin-angiotensin system (23%); while expenditure fell for cardiac glycosides (-33%), vasodilators used in cardiac diseases (-19%), diuretics (-16%), antiarrhythmics (-14%) and peripheral vasodilators (-9%) (Figure 18 and Table A5).

Expenditure on all types of blood and blood-forming organs medicines rose between 2001 and 2005: heparin group (59%), platelet aggregation inhibitors excluding heparin (58%), enzymes (42%), and vitamin K antagonists (20%) (Figure 19 and Table A5).

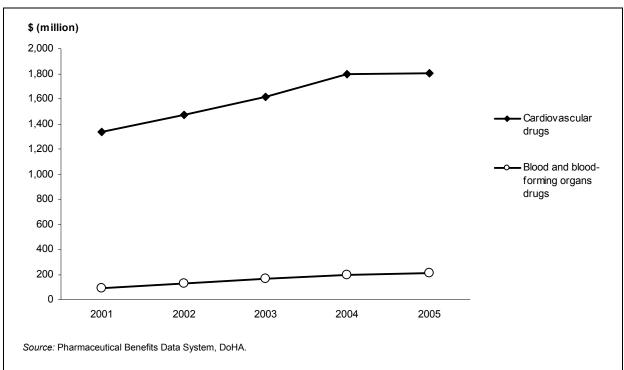


Figure 17: Government expenditure on medicines to prevent and treat cardiovascular disease, 2001-05

