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MEETING ABSTRACT

A5.1
Prescription of antibiotics for systemic use in Austria, 2006–2014
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Background: Antibiotics for systemic use represent one of the most widely prescribed groups of pharmaceuticals in outpatient care (rank 14 in Austria). This study analyses data (expenses, packages, daily defined doses) from all prescriptions of antibiotics for systemic use filled at the expense of the Austrian national health system at substance (ATC-5) level.

Methods: Data from all prescriptions filled in Austrian pharmacies on public expense by outpatients (2006–2014) were obtained from the Main Association of Austrian Social Security Organisations (Hauptverband der Sozialversicherungs träger). Prescriptions and costs of antibiotics for systemic use were analysed in detail using WHO drug statistic methodologies.

Results: Public expenses on antibiotics for systemic use totalled €66.07m in 2014, (−0.85% compared to 2013, −12.86% compared to 2006). Defined daily dose figures rose from €41m (2006) to €47m in 2009 and dropped to €43.5m in 2014 (this equals to 2009). Prescription and defined daily dose figures are displayed in detail in tables at substance level, a relevant savings potential can be calculated.

Discussion: In contrast to prescription numbers of most pharmaceutical groups, dose equivalents of antibiotics for systemic use prescribed on public expense have stabilized and even declined over the last years. However, these figures still impose as higher than expected if prevalence numbers of bacterial infectious diseases and population data are taken into account, bearing in mind that careless prescription of antibiotics accounts not only for a waste of public funding but also for rising numbers of bacterial resistance. A close look entertains suspicion of antibiotics being prescribed without adequate indication nor precaution.

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