



Department
of Health

PPRS 2014 – analysis of growth in spend of branded medicines

March 2015

DH – Leading the nation's health and care

Executive Summary

- IMS Health data shows growth in spend in 2014 (compared to 2013) of 8.2% on branded medicines. This is higher than the increase observed in the PPRS of 5.2%. The increase is largely driven by the hospital sector (an increase of 16.5%). Community sector spend increased by 1.9% of the same period.
- Based on key therapeutic groups, the areas of largest growth are in anti-cancer and rheumatology medicines, wet aged macular degeneration (wet AMD) and new oral anticoagulant (NOAC) drugs.
- Within these therapeutic areas (and across others) a large proportion of the increase in spend is driven by products covered by the Innovation Scorecard. Around half of the increase in spend can be attributed to these medicines, where the overall rate of growth is 18.4% compared to 5.1% on those medicines not covered by the Innovation Scorecard.
- Increasing spend and growth rates of Innovation Scorecard products are particular drivers behind growth in the therapeutic areas above, with 90% of the spend increase in the ATC category Sensory Organs on Innovation Scorecard products.
- A single drug: Eylea (Aflibercept), used for wet AMD increased in spend by over £102m, over £50m more than the next highest growth medicine in cash terms: Lyrica (Pregabalin), used predominantly in the community sector.
- A number of medicines with high decreases in spend (nine out of the highest 40), including 3 of the highest 5) were subject to patent expiries in 2013 or early 2014.

The increase in spend is largely driven by hospital medicines – with a growth rate of over 16%

	2013 spend (£m)	2014 spend (£m)	Increase in spend (£m)	Growth rate
Community branded spend	5,441	5,546	105	1.9%
Hospital branded spend	4,089	4,766	676	16.5%
Overall branded spend	9,531	10,312	781	8.2%
PPRS measured spend	7,870	8,278	408	5.19%

Note on the data sources:

- PPRS company returns are at net prices.
- IMS Health spend data is the manufacturer factory gate price of branded medicines (based on the list price less 12.5% notional discount), so will not represent the price paid by the NHS.
- Spend figures will also differ from PPRS data as IMS Health data includes all spending on branded medicines including those which may be exempt from PPRS payments and PPRS measured spend (e.g. Parallel imports and brand equalisation deals).
- In primary care there is significant brand equalisation (where branded medicines are dispensed and priced at their generic equivalent). In secondary care mechanisms such as patient access schemes and therapeutic contracting (such as Cancer Drugs Fund), and local arrangements, mean that many secondary care medicines are supplied at less than list price.
- This analysis includes spend on vaccines which are also exempt from PPRS payments.

Key therapeutic areas – increase in spend [slides 5-8]

- The therapeutic areas with the largest growth in 2014 (compared to 2013) are focused on three areas :
 - **Anticancer drugs for breast and advanced prostate cancer such as Xtandi and Herceptin and drugs for rheumatoid arthritis and Crohn's disease such as Humira** [also classified as ATC Category L: Antineoplastic and immunomodulating agents]
 - **Wet aged macular degeneration (wet AMD) and macular oedema drugs such as Eylea and Lucentis** [ATC S: Sensory organs]
 - **New oral anticoagulants (NOACs) such as Xarelto and Eliquis** [ATC B: Blood and blood forming organs]
- Category L as a whole increased in spend by £378m with 17% growth, driven entirely by an increase in hospital spending with community spend declining slightly in this category.
- Category S increased by £128m with 26% growth, mainly in hospital spending (£120m, 38%) with community spend increasing slightly (£8m, 6%).
- Category B increases in spend occur in roughly equal measure in the hospital and community sector (£43m, 12% and £46m, 38% respectively. However, category B represents the highest growth category in the community sector.
- Category J (Anti-infectives) also increases (£36m, 5%) from a high base of over £1bn spend in the hospital sector.

Anatomical Therapeutic Chemical (ATC) classification: Summary of the categories

ATC category	Example of sub-category	Example of medicine
A Alimentary tract and metabolism	Drugs used in diabetes	Januvia (Sitagliptin)
B Blood and blood forming organs	Antithrombotic agents	Xarelto (Rivaroxaban)
C Cardiovascular system	Lipid modifying agents	Lipitor (Atorvastatin)
D Dermatologicals	Antifungals for dermatological use	Stelara (Ustekinumab)
G Genito urinary system and sex hormones	Drugs used in erectile dysfunction	Viagra (Sildenafil)
H Systemic hormonal preparations, excl. sex hormones and insulins	Pituitary and hypothalamic hormones	Norditropin (Somatropin)
J Antiinfectives for systemic use	Antivirals for systemic use	Sovaldi (Sofosbuvir)
L Antineoplastic and immunomodulating agents	Immunosuppressive agents	Humira (Adalimumab)
M Musculo-skeletal system	Antiinflammatory and antirheumatic products	Profenid (Ketoprofen)
N Nervous system	Antiepileptics	Lyrica (Pregabalin)
P Antiparasitic products, insecticides and repellents	Antiprotozoals	Wellvone (Atovaquone)
R Respiratory system	Anti-asthmatics	Flutiform (Fluticasone)
S Sensory organs	Ophthalmologicals	Eylea (Aflibercept)
V Various	Drugs for treatment of hyperkalemia and hyperphosphatemia	Renvela (Sevelamer)

ATC of medicines (total): increase in spend between 2013 and 2014

ATC	Spend: 2013 (£m)	Spend: 2014 (£m)	Growth 13 to 14 (£m)	Growth rate (%)
1 L Antineoplastic and immunomodulating agents	2,218	2,596	378	17%
2 S Sensory organs	445	572	128	26%
3 B Blood and blood forming organs	473	562	89	18%
4 A Alimentary tract and metabolism	852	909	57	6%
5 N Nervous system	1,800	1,854	54	3%
6 R Respiratory system	1,273	1,301	29	2%
7 J Antiinfectives for systemic use	803	823	19	3%
8 D Dermatologicals	244	257	13	3%
9 H Systemic hormonal preparations, excl. sex hormones and insulins	213	223	10	7%
10 M Musculo-skeletal system	564	573	9	4%
11 V Various	124	132	8	11%
12 C Cardiovascular system	24	27	3	0%
13 P Antiparasitic products, insecticides and repellents	12	10	-2	-24%
14 G Genito urinary system and sex hormones	486	472	-14	-3%

ATC of medicines (hospital): increase in spend between 2013 and 2014

	ATC	Spend: 2013 (£m)	Spend: 2014 (£m)	Growth 13 to 14 (£m)	Growth rate (%)
1	L Antineoplastic and immunomodulating agents	2004	2384	380	19%
2	S Sensory organs	312	432	120	38%
3	B Blood and blood forming organs	351	393	43	12%
4	J Antiinfectives for systemic use	728	764	36	5%
5	R Respiratory system	107	131	24	22%
6	M Musculo-skeletal system	96	116	20	21%
7	A Alimentary tract and metabolism	103	119	16	15%
8	N Nervous system	187	198	11	6%
9	D Dermatologicals	52	61	9	17%
10	H Systemic hormonal preparations, excl. sex hormones and insulins	52	61	8	16%
11	C Cardiovascular system	32	39	6	20%
12	G Genito urinary system and sex hormones	48	50	2	3%
13	V Various	15	16	1	8%
14	P Antiparasitic products, insecticides and repellents	1	2	1	38%

ATC of medicines (community): increase in spend between 2013 and 2014

ATC	Spend: 2013 (£m)	Spend: 2014 (£m)	Growth 13 to 14 (£m)	Growth rate (%)
1 B Blood and blood forming organs	122	169	46	38%
2 N Nervous system	1613	1656	43	3%
3 A Alimentary tract and metabolism	749	790	42	6%
4 S Sensory organs	132	140	8	6%
5 R Respiratory system	1166	1170	5	0%
6 D Dermatologicals	192	196	5	2%
7 C Cardiovascular system	532	534	2	0%
8 V Various	10	11	2	16%
H Systemic hormonal preparations, excl. sex hormones and insulins	71	71	0	0%
9				
10 L Antineoplastic and immunomodulating agents	214	212	-2	-1%
11 P Antiparasitic products, insecticides and repellents	11	8	-3	-26%
12 M Musculo-skeletal system	117	107	-10	-9%
13 G Genito urinary system and sex hormones	438	422	-16	-4%
14 J Antiinfectives for systemic use	75	59	-16	-21%

A high proportion of the increase in growth can be attributed to products covered by the Innovation Scorecard (IS) [slides 10-11]

- Of the overall growth in spending almost £800m in 2014 compared to 2013, over 50% is derived from those products covered by the Innovation Scorecard. The overall growth rate of IS products was 18.4% compared to Non-IS products where growth was 5.1%.
- As the IS largely looks at medicine used in hospitals it is not surprising that most of the growth in IS products is in this sector. IS products accounted for only 4% of the total number of products used in hospitals, but cover 50% of the 2014 spend and 52% of the growth in spend.
- Non-IS products covered a similar overall increase of growth in spend in hospitals as IS products, but at a slightly lower growth rate of 15.7% compared to 17.4% for IS products.
- Numbers of IS products and spending in the community sector are lower, however there was growth of 30% in spending on these products, albeit from a low base of under £180m in 2013. However, this does account for over half of the growth in spend within the community which is primarily driven by increases in spend on branded NOACs such as Xarelto, Eliquis and Pradaxa.

The Innovation Scorecard: background and inclusion criteria

The Innovation Scorecard aims to improve transparency within the NHS of what treatments recommended by NICE are available at a local level within Trusts and CCGs and at national and Area Team level. The Innovation Scorecard is intended as an indicative measure in order to stimulate the monitoring of NHS compliance with NICE TAs, and prompt conversations about variation and the reasons for variation in the system.

A process for selecting the medicines for inclusion was developed to allow for a systematic approach for inclusion of medicines within the scorecard. Inclusion criteria:

- The medicine has a TA published from 2008 onwards, which is positively appraised by NICE.
- TAs published prior to 2008, which are deemed to be innovative³ will be considered for inclusion.
- The medicine has a TA prior to 2008 but is of interest to the NHS. This may include those medicines where systematic uptake does not have widespread use across the whole service, for example, where there is unwarranted variation or where there is known significant therapeutic value.
- Following publication of the TA, an initial period of three months must elapse to allow for the funding directive to be in place and thus uptake of the guidance to commence. In addition a further six months must be allowed for data availability from IMS Health. For January 2015 publication, the cut-off date for inclusion of TA's is the end of March 2014.

³ Innovation is defined in the Innovation health and wealth (Dec 2011), as an idea, service or product, new to the NHS or applied in a way that is new to the NHS, which significantly improves the quality of health and care wherever it is applied.

Innovation Scorecard summary: high increase in spend for IS products, particularly in the hospital sector

		Number of products	2013 spend (£m)	2014 spend (£m)	Increase in spend (£m)	Growth rate
<i>Spend and growth</i>						
Community branded spend	Innovation Scorecard products	72	183	238	55	30.1%
	Non-innovation Scorecard products	2,190	5,259	5,308	50	0.9%
	All products	2,262	5,441	5,546	105	1.9%
Hospital branded spend	Innovation Scorecard products	91	2,012	2,361	349	17.4%
	Non-innovation Scorecard products	2,033	2,078	2,405	327	15.7%
	All products	2,124	4,090	4,766	676	16.5%
Overall branded spend	Innovation Scorecard products	91	2,194	2,598	404	18.4%
	Non-innovation Scorecard products	2,583	7,421	7,801	380	5.1%
	All products	2,674	9,615	10,400	785	8.2%
<i>% of spend</i>						
Community branded spend	Innovation Scorecard products	3%	3%	4%	52%	
	Non-innovation Scorecard products	97%	97%	96%	48%	
Hospital branded spend	Innovation Scorecard products	4%	49%	50%	52%	
	Non-innovation Scorecard products	96%	51%	50%	48%	
Overall branded spend	Innovation Scorecard products	3%	23%	25%	52%	
	Non-innovation Scorecard products	97%	77%	75%	48%	

Spend in highest growth therapeutic areas is driven by Innovation Scorecard products [slide 13]

- Products covered by the Innovation Scorecard had the highest increases in spend in 2014 compared to 2013, in ATC category L (Antineoplastic and immunomodulating agents), category S (Sensory organs) and category B (Blood and blood forming organs).
- Of the anticancer medicines, Herceptin is covered by the Innovation scorecard, along with the Humira and Remicade for rheumatoid arthritis (and other indications) in category L.
- Two drugs for wet AMD (Eylea and Lucentis) with large increases in spend are also covered by the Innovation Scorecard (category S), as well as the NOACs Xarelto and Eliquis (category B).
- In summary, IS products cover half of the growth in category L, almost 90% in category S and three quarters of the growth in category B.
- A large increase in growth of 73% was also seen in category R (Respiratory system) with an increase in spend to £35m in 2014.
- IS products had negative growth in two ATC categories; N (Nervous system) and J (Anti-infectives for systemic use).

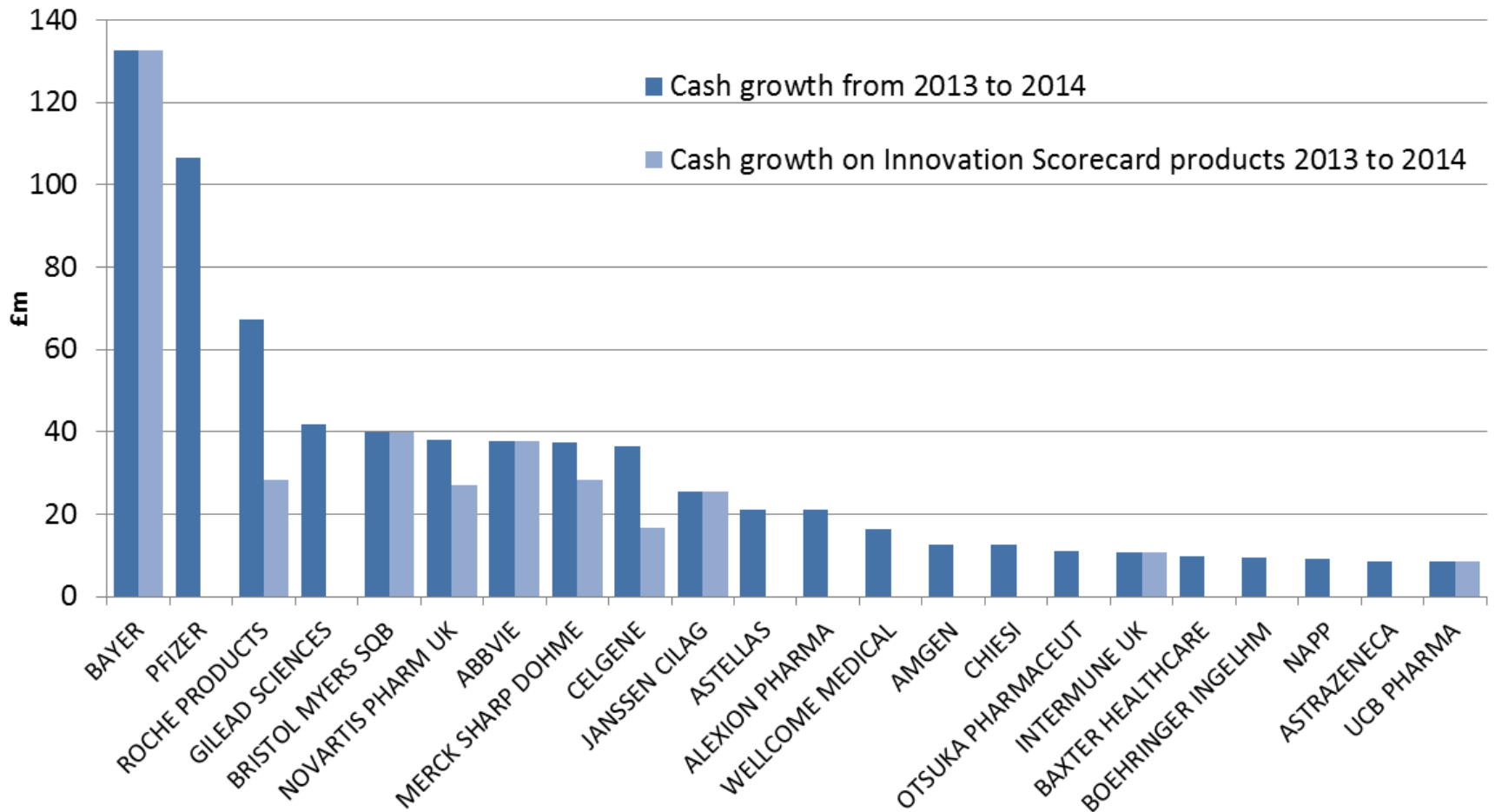
Innovation Scorecard summary: high increase in spend for IS products, particularly in the hospital sector

	ATC - for Innovation Scorecard products	Spend: 2013 (£m)	Spend: 2014 (£m)	Growth 13 to 14 (£m)	Growth rate (%)
1	L Antineoplastic and immunomodulating agents	33	1,467	1,653	187
2	S Sensory organs	3	262	378	115
3	B Blood and blood forming organs	15	170	237	68
4	R Respiratory system	2	20	35	15
5	M Musculo-skeletal system	6	44	56	12
6	D Dermatologicals	2	35	45	10
7	A Alimentary tract and metabolism	4	51	61	10
8	G Genito urinary system and sex hormones	1	2	9	7
9	H Systemic hormonal preparations, excl. sex hormones and insulins	8	42	45	3
10	C Cardiovascular system	1	11	14	2
11	P Antiparasitic products, insecticides and repellents	0	0	0	0
12	V Various	0	0	0	0
13	N Nervous system	11	21	11	-9
14	J Antiinfectives for systemic use	5	71	55	-15

For the top 20 individual medicines over half are under 10 years old [slide 15]

- The company with the highest spend increase in medicines in 2014 is Bayer who produced Eylea (Aflibercept) and Xarelto (Rivaroxaban). This accounts for almost 20 per cent of the overall increase in branded spend growth between 2013 and 2014 amongst the top 40 products.
- Other companies with products in the top 40 in terms of spend increase were Pfizer which produced Lyrica (Pregabalin) and Neurontin (Gabapentin); Roche with Herceptin and Kadcyra (Trastuzumab and Trastuzumab Emtansine, respectively) and Gilead with Sovaldi (Sofosbuvir).
- The companies with the most products in the top 40 were Pfizer and Roche both with five. Bristol Myers, Novartis and MSD each had three products in the top 40.
- All of the increases in spend on Bayer products were on medicines which feature in the Innovation Scorecard. A number of other companies including Roche and Bristol Myers also had significant increases in spend on products covered by the Innovation Scorecard.
- Lipitor (Atorvastatin) is included in the top 20 in terms of increases in spend despite loss of exclusivity in 2012. A large proportion of these sales will be through brand equalisation deals.
- Of the top 20 drugs, nine are under five years old, with 14 under ten years old (since marketing authorisation).
- In terms of specific indications, the top 20 drugs include five for anti-cancer, three for epilepsy and two for multiple myeloma.

Top 40 branded products by manufacturer: increase in spend between 2013 and 2014



Top 20 Manufacturers: increase in spend between 2013 and 2014

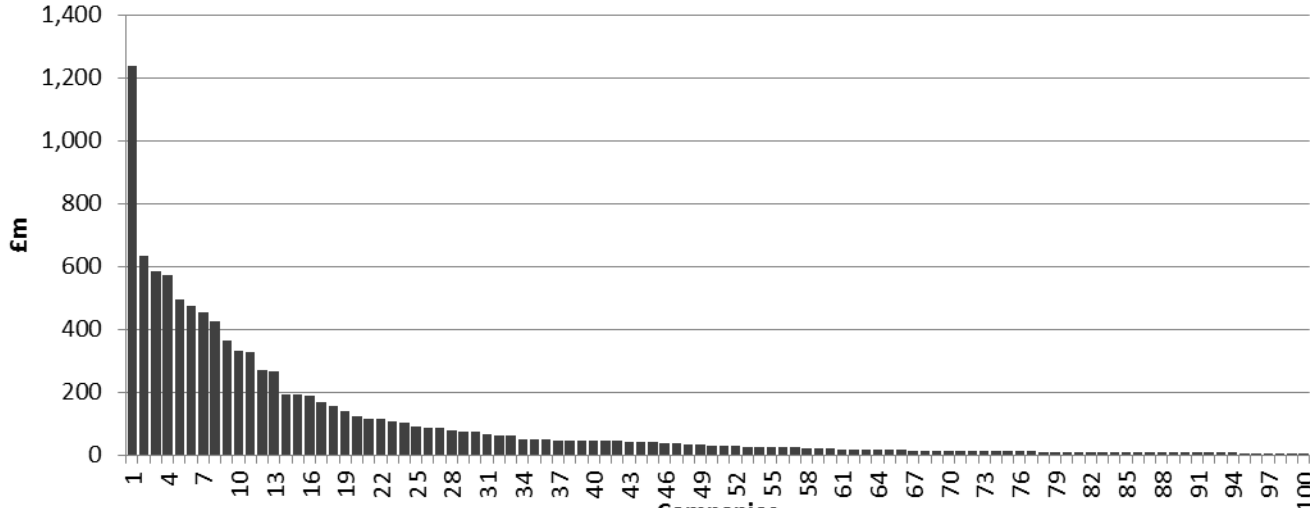
	Manufacturer	Spend: 2013 (£m)	Spend: 2014 (£m)	Growth 13 to 14 (£m)	Growth rate (%)	Share of growth increase (%)
1	BAYER	149	271	122	82%	12%
2	PFIZER	1165	1240	75	6%	8%
3	ROCHE PRODUCTS	523	583	60	12%	7%
4	NOVARTIS PHARM UK	576	634	58	10%	6%
5	GILEAD SCIENCES*	279	329	50	18%	6%
6	CELGENE	126	167	41	32%	4%
7	ASTELLAS	152	192	40	26%	4%
8	BRISTOL MYERS SQB	120	158	37	31%	4%
9	ABBVIE	325	363	37	11%	4%
10	JANSSEN CILAG	396	427	30	8%	3%
11	ALEXION PHARMA	40	61	21	52%	3%
12	AMGEN	124	141	18	14%	2%
13	WELLCOME MEDICAL	72	88	16	23%	2%
14	SANOFI	438	453	16	4%	2%
15	ASTRAZENECA	459	475	15	3%	2%
16	BIOGEN	58	73	15	26%	2%
17	UCB PHARMA	100	114	14	14%	2%
18	GLAXOSMITHKLINE	63	77	14	22%	2%
19	GENZYME THERAPEUT	32	46	13	41%	2%
20	CHIESI	109	122	13	12%	1%

Note:

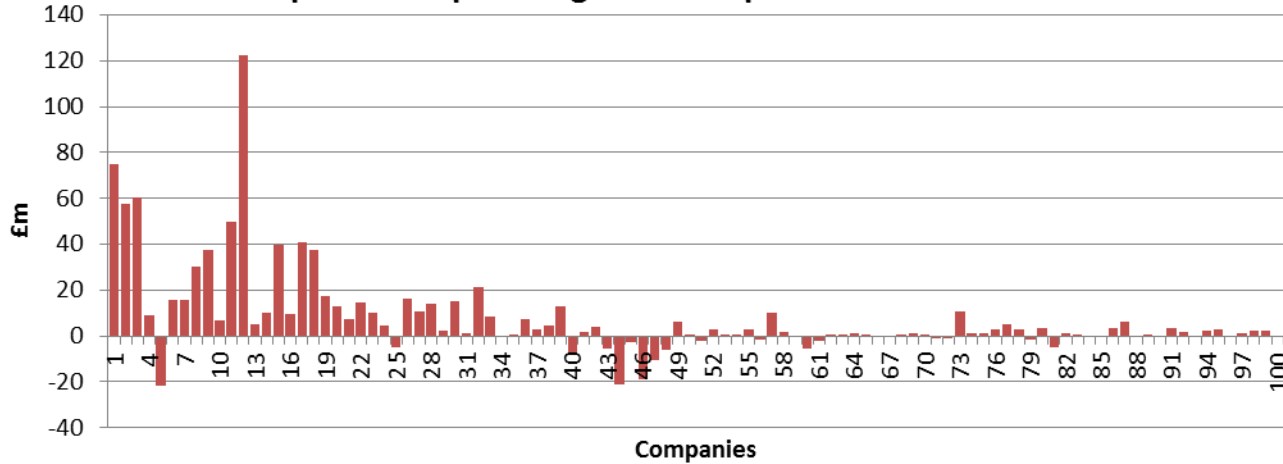
- * Denotes company is a member of the PPRS statutory scheme
- Data at for companies is presented at IMS Health manufacturer level which does not represent the majority holding corporation.

Manufacturer overall spend and growth in spend summary

Top 100 companies: spend on products 2014



Top 100 companies: growth in spend 2013 to 2014



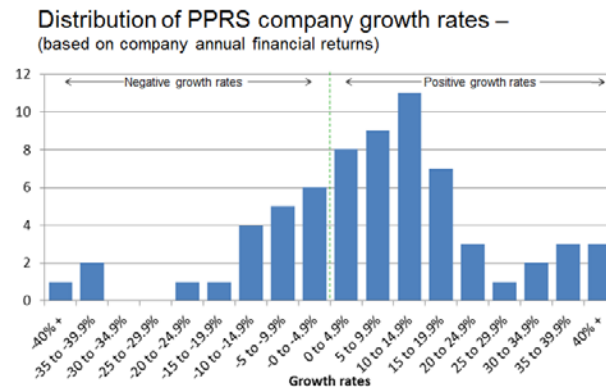
Manufacturer	
1	PFIZER
2	NOVARTIS PHARM UK
3	ROCHE PRODUCTS
4	MERCK SHARP DOHME
5	ALLEN & HANBURY'S
6	ASTRAZENECA
7	SANOFI
8	JANSSEN CILAG
9	ABBVIE
10	BOEHRINGER INGELHM
11	GILEAD SCIENCES
12	BAYER
13	NOVO NORDISK PHARM
14	LILLY
15	ASTELLAS
16	NAPP
17	CELGENE
18	BRISTOL MYERS SQB
19	AMGEN
20	CHIESI
21	TEVA UK
22	UCB PHARMA
23	MERCK SERONO UK
24	TAKEDA
25	LEO
26	WELLCOME MEDICAL
27	OTSUKA PHARMACEUT
28	GLAXOSMITHKLINE
29	SHIRE PHARM
30	BIOGEN
31	GLAXO LABS
32	ALEXION PHARMA
33	SANDOZ
34	LILLY ICOS
35	ACTAVIS UK
36	VERTEX PHARMS
37	ALLERGAN
38	FERRING
39	GENZYME THERAPEUT
40	ABBOTT HEALTHCARE
41	MEDA PHARMACEUTICL
42	ALCON
43	VIIV
44	LUNDBECK
45	AMCO
46	GRUNENTHAL
47	EISAI
48	MCNEIL PRODUCTS
49	IPSEN LTD
50	DB ASHBOURNE
51	RECKITT BENCKISER
52	MARTINDALE PHARMA
53	SMITHKLINE BEECH
54	ALMIRALL PHARM
55	SCHWARZ PHARMA
56	SERVIER
57	BAXTER HEALTHCARE
58	MEDAC
59	ORION PHARMA
60	GLAXOSMITHKLIN CON
61	GALDERMA UK
62	BAUSCH & LOMB
63	UNBRANDED
64	CSL BEHRING
65	ALLIANCE PHARM
66	STIEFEL
67	ZENTIVA
68	GALEN
69	FLYNN PHARMA
70	PROSTRAKAN
71	CHUGAI PHARMA
72	NYCOMED
73	INTERMUNE UK
74	FOREST LABS EUROPE
75	BRITANNIA PHARM
76	MENARINI PHARM
77	TYPHARM
78	ACTELION PHARM
79	SANKYO PHARMA UK
80	CONSILIENT HEALTH
81	GLAXO WELLCOME
82	ARCHIMEDES PHARMA
83	AMO UK
84	SANOFI BMS
85	NOVARTIS CONSUMER
86	PIERRE FABRE
87	QDEM PHARMS
88	BRAUN B MEDICAL
89	HOSPIRA
90	THORNTON & ROSS
91	VIROPHARMA
92	DR FALK PHARMA
93	BAYER CONSUMER
94	AUDEN MCKENZIE
95	NORGINE
96	CEPHALON UK
97	BRISTOL LABS
98	SCOPE OPHTHALMICS
99	TILLOTTS PHARMA
100	SMITH & NEPHEW H/C

- The largest companies in terms of 2014 spend on medicines also contribute most to the growth in spend between 2013 and 2014.

Company level growth – PPRS annual financial returns data

The PPRS Operations team receive company financial returns for the administration of the PPRS. The data provides information on the growth in net sales subject to Medicines Bill Growth (i.e. measured spend) between 2013 and 2014 and provides the following information:

- Over two thirds of PPRS companies experienced positive growth rates in measured spend, with almost one fifth of companies experiencing spend increases of over 20%.



- Six out of the ten smallest PPRS companies also had positive growth rates with three out the ten experiencing growth over 20%.
- Roche had the highest share of new product spend in 2014 with around 4% of £571m measured spend on new products. Bayer, GSK and Janssen also had new product spend around 1% of their respective measured spend totals.



Department
of Health

Annex tables

March 2015

DH – Leading the nation's health and care

Top 20 Manufacturers of **hospital** products: increase in spend between 2013 and 2014

	Manufacturer	Spend: 2013 (£m)	Spend: 2014 (£m)	Growth 13 to 14 (£m)	Growth rate (%)	Share of growth increase (%)
1	BAYER	61	164	102	167%	15%
2	ROCHE PRODUCTS	456	528	72	16%	10%
3	NOVARTIS PHARM UK	469	530	61	13%	9%
4	GILEAD SCIENCES *	275	323	48	17%	7%
5	CELGENE	126	167	41	32%	6%
6	ABBVIE	322	360	38	12%	5%
7	MERCK SHARP DOHME	279	311	33	12%	5%
8	JANSSEN CILAG	296	326	30	10%	4%
9	BRISTOL MYERS SQB	111	139	28	25%	4%
10	ASTELLAS	24	52	28	116%	4%
11	PFIZER	422	446	23	6%	3%
12	ALEXION PHARMA	40	61	21	52%	3%
13	AMGEN	107	122	15	14%	2%
14	BIOGEN	57	72	15	26%	2%
15	GLAXOSMITHKLINE	33	46	14	41%	2%
16	GENZYME THERAPEUT	32	46	13	41%	2%
17	INTERMUNE UK	2	12	11	599%	2%
18	BAXTER HEALTHCARE	14	24	10	72%	1%
19	SANOFI	147	157	9	6%	1%
20	MERCK SERONO UK	52	61	9	18%	1%

Note:

- * Denotes company is a member of the PPRS statutory scheme
- Data at for companies is presented at IMS Health manufacturer level which does not represent the majority holding corporation.

Top 20 products increase in spend between 2013 and 2014: Hospital brands – Summary

- The manufacturer Bayer has experienced the highest growth in spend in 2014. This is almost solely due to spend on Eylea.
- Gilead, Roche, Novartis and Celgene make up the remaining Top 5 companies in terms of increases in spend on pharmaceutical products.
- The Top 20 manufacturers (by growth) cover almost 90% of the growth in spend over this period.
- For ATC the top category in terms of growth in spend is L (Antineoplastic and immunomodulating agents) which includes anti-TNFs for treatment of rheumatoid arthritis such as Humira (Adalimumab) and Remicade (Infliximab) for psoriatic arthritis, as well as Immunosuppressive agents such as Soliris (Eculizumab).

Top 20 Manufacturers of **community** products: increase in spend between 2013 and 2014

	Manufacturer	Spend: 2013 (£m)	Spend: 2014 (£m)	Growth 13 to 14 (£m)	Growth rate (%)	Share of growth increase (%)
1	PFIZER	742	794	52	6%	16%
2	ASTRAZENECA	88	108	20	4%	8%
3	CHIESI	415	432	17	20%	8%
4	NAPP	66	82	16	10%	6%
5	WELLCOME MEDICAL	98	110	12	23%	5%
6	BAYER	128	140	12	12%	5%
7	ASTELLAS	9	19	10	9%	4%
8	LILLY	135	144	9	6%	3%
9	BRISTOL MYERS SQB	70	78	9	103%	3%
10	OTSUKA PHARMACEUT	163	171	8	13%	3%
11	TEVA UK	285	292	7	9%	2%
12	SANOFI	290	297	7	2%	2%
13	BOEHRINGER INGELHM	71	78	6	2%	2%
14	UCB PHARMA	77	83	6	9%	2%
15	ALLERGAN	3	9	6	13%	2%
16	QDEM PHARMS	6	11	5	211%	2%
17	CONSILIENT HEALTH *	36	40	4	65%	2%
18	TYPHARM *	34	38	4	81%	2%
19	FERRING	6	10	4	12%	1%
20	IPSEN LTD	18	21	4	20%	1%

Note:

- * Denotes company is a member of the PPRS statutory scheme
- Data at for companies is presented at IMS Health manufacturer level which does not represent the majority holding corporation.

Top 20 **community** branded products: increase in spend between 2013 and 2014: Summary

- The manufacturer Pfizer has experienced the highest growth in spend in 2014, primarily due to sales of Lyrica and Lipitor.
- AZ, Chiesi, Napp and Wellcome make up the Top 5 companies in terms of increases in spend on community sector pharmaceutical products.
- These Top 20 manufacturers cover almost 80% of the growth in spend over this period.
- For ATC the top category in terms of growth in spend is B (Blood and blood forming organs) which includes Xa inhibitors for prevention of stroke and systemic embolism in atrial fibrillation such as Xarelto (Rivaroxiban) and Eliquis (Apixaban).
- There were also large increases in spend in category N (Nervous System) particularly for Lyrica (Pregabalin) and Neurontin (Gabapentin) which are used for the treatment of focal seizures as well as a range of other indications including epilepsy and anxiety disorders (Pregabalin) and migraine (Gabapentin).