PRESS RELEASE

Croatian Medical Journal

Zagreb University School of Medicine

Šalata 3b

10000 Zagreb

Croatia

Phone: ++385-1-4590-286

Fax: ++385-1-4590-222

Mail: dario.sambunjak@mef.hr

All articles published in the Croatian Medical Journal

are freely available at www.cmj.hr

More than 50% of the budget for prescription drugs in GP offices spent on antihypertensives

ZAGREB – For the treatment of only three diseases – hypertension, hypercholesterolemia, and diabetes mellitus – general practitioners in Zagreb spend more than 80% of the total amount of money approved for medications by the Croatian Institute for Health Insurance (CIHI), shows a new study published in the *Croatian Medical Journal*.

The study was conducted in three general practitioner (GP) offices in the Zagreb area in January 2005. Out of 4,916 registered patients, 1,112 (23%) had increased blood pressure, 324 (6.5%) had high level of blood cholesterol, and 359 (7%) had diabetes mellitus. Treatment of these diseases is crucial because they are main risk factors for coronary heart disease and myocardial infarction, leading causes of death in Croatia.

The CIHI approved the GPs included in this study a monthly amount of HRK218,772 (€29.620) for prescription drugs. The monthly amount that the three GPs spent on the antihypertensives, lipid-lowering drugs and antidiabetic drugs was HRK 177,610 (€24.050), or 81.2% of the total amount approved by the CIHI. Most of it – HRK111,678 (€15.122), or 51% - was spent on antihypertensives, which made them the biggest item in the GP offices' budget for prescription drugs.

These percentages were even higher in the group of patients older than 65. The monthly amount spent on antihypertensives, lipid-lowering drugs and antidiabetic drugs for these patients was HRK98,937 (€13.392), or 93.6% of the amount approved for prescription drugs in this age group. This means that only 6.4% of the amount is left for the treatment of other health conditions.

It is obvious that the implementation of guidelines for prevention of cardiovascular diseases means an increase in drug prescription rate for patients at higher risk, as well as expenditures. The authors of the study, however, point out that these costs are still cheaper than the treatment of the consequences of cardiovascular diseases (hospitalization, rehabilitation, and disability).

Correspondence to:

Biserka Bergman Marković General Practice Office Albaharijeva 4 10000 Zagreb, Croatia bbmarkovic@yahoo.co.uk