
CONCLUSIONS: Financial expenditures for antineoplastic agents are rising due to use of new and expensive medications, which are supposed to stop the wild in coming years and are expected to decrease cancer mortality. Senescent population with higher incidence of cancer disease is expected to slightly increase DID and medicine packages consumption.

PCN74

UTILISATION OF DRUGS INVOLVED IN TREATMENT OF STAGE I AND STAGE II BREAST CANCER IN SLOVAK REPUBLIC

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OBJECTIVES: Breast cancer forms in tissues of the breast, usually in ducts and lobules. It is the most frequent type of the female's cancer in Slovakia (age-standardized rate - 48 incidence rate - 2016 new cases every year, mortality rate 773 deaths annually ). The aim of this study was to provide comparable and reliable data of utilisation of stage I (invasive, up to 2 centimeters, no lymph nodes involved) and stage II (invasive, 2-5 centimeters, lymph nodes might be involved, over 5 centimeters - no lymph nodes involvement) breast cancer drugs within the period 2004-2009. METHODS: Analysed data were abstracted from Slovak Institute for Drug Control, which collects them from wholesalers. Data were studied in accordance with Daily Defined Dose (DDD, with exclusion of trastuzumab) and in financial units (€). RESULTS: The consumption of drugs used in stage I and II breast cancer had increasing trend in terms of financial burdens between 2004 and 2009 with anastrozole (from 1 378 317 € to 1 888 478 €), doxorubicin (from 776 400 € to 1 354 072 €), methotrexate (from 188 954 € to 650 993 €) and tamoxifen (from 797 € to 11 703 935 €). For PF (n = 261 from 261 417 € to 159 064 €) nad alternating trend with cyclofosfamide (206 156 € (2004), 233 867 € (2006), 207 042 € (2009), epirubicin (238 125 € (2004), 908 690 € (2007), 729 757 € (2009) and fluorouracil (444 627 € (2004), 455 578 € (2006), 339 232 € (2009)). Highest consumption in terms of DDD showed fluorouracil (3,34 DDD/1000 inhabitants/day in 2007), 2,99 in 2008 and 0,75 in 2009. The highest increase of DID (2004, 0,46 DDD (2009)). CONCLUSIONS: Optimal treatment of breast cancer requires different therapies. Trastuzumab is well established on Slovak market due to good results in early stage treatment with few recurrences. Consumption of tamoxifen and anastrozole could be influenced by exemestane.