INDICATION SPECTRUM OF SNRI APPLIED FOR THE TREATMENT OF DEPRESSION—A PHARMACOEPIDEMIOLOGICAL ANALYSIS OF CLAIMS DATA OF A GERMAN SICKNESS FUND

Gothe H1, Häussler B1, Hagenmeyer EG1, Höer A1, Runge C2, Volmer T2, Häusler B1
1IGES Institut GmbH, Berlin, Germany, 2Wyeth Pharma GmbH, Münster, Germany

OBJECTIVES: In the treatment of depression several antidepressants are applied, mainly TZA, SSRI and SNRI. These substances have a different spectrum of activity and side effects, particularly newer substances are often approved for specific indications. Taking SNRI as an example, it is of interest in how far the indication spectrum is therapeutically utilized by physicians in everyday practice. METHODS: A retrospective cohort study using claims data of a sickness fund, analysed beneficiaries who received at least one SNRI prescription during the observation period from January 1, 2004 until December 31, 2004. ICD-10 Codes from the field of depression, anxiety and panic patients, as well as affective disorders were clustered into diagnosis groups which represented potential fields of indication for SNRI therapy. The distribution of diagnoses groups over the indication spectrum was broken down into health care sectors and represented and analyzed with the help of Venn diagrams.

RESULTS: From 1,478,978 beneficiaries n = 2,481 (0.17%) had at least one prescription of Venlafaxin as the only available SNRI in 2004. A total of 75.7% of them had a depression diagnoses, 39.9% received SSRI for relapse prevention. From n = 2,252 beneficiaries with a depression diagnosis and SNRI prescriptions, A total of 22.8% have been treated due to indications (depression in combination with anxiety) for which only Venlafaxin has been approved. 39.7% have been treated due to an indication spectrum was broken down into health care sectors and represented and analyzed with the help of Venn diagrams.

CONCLUSIONS: Increasing the dose of escitalopram from 10 to 20mg was associated with fewer further changes in treatment and with lower costs than switching or adding another antidepressant. For patients who do not respond well to their initial dose, dose increase should be considered before any other strategy.

PATTERNS OF FIRST VISITS TO PSYCHIATRIC CLINICS IN TAIWAN: A NATIONWIDE STUDY, 2006

Chou LF1, Chen TJ2
1National Chengchi University, Taipei, Taiwan, 2National Yang-Ming University, Taipei, Taiwan

OBJECTIVES: The study of new patients in a specific specialty offered another insight into the epidemiology of diseases and the mode of health care delivery. The aim of the study was to investigate the spectrum of diagnoses and medications among the patients who visited the psychiatric clinics for the first time in Taiwan.

METHODS: The data sources came from the historical claims datasets of 1,000,000-person cohort from 1996 to 2006, offered by the National Health Insurance Research Database in Taiwan. The focus was on the patients who had never visited any psychiatric clinic from 1996 to 2005 and had visited one in 2006. The analyses of these patients' first visits included the distributions of the age, sex, primary diagnosis in codes of ICD-9-CM (the International Classification of Diseases, 9th Revision, Clinical Modification) and prescribed drugs classified into ATC (Anatomical Therapeutic Chemical) codes.

RESULTS: Among the 1,000,000-person cohort, 8,226 patients (4,393 females and 3,833 males; mean age 39.4 ± 22.5 [SD] years) had their first visits to one of 330 psychiatric clinics in 2006. Among these new patients, 1460 were under age 18 and 1352 over age 65. Neurotic disorders (ICD-9-CM: 300) were most frequently seen diagnoses in 3117 visits, followed by affective psychoses (296) in 918 visits and adjustment reaction (309) in 629 visits. The top 10 diagnostic groups accounted for 83.5% of all new visits. Medications had been prescribed in 6610 (80.3%) visits with an average of 2.4 ± 1.2 drug items. The most frequently prescribed drug groups were antidepressants (ATC: N06A) in 3651 visits, anxiolytics (N05B) in 3212 visits, hypnotics and sedatives (N05C) in 3123 visits and antipsychotics (N05A) in 979 visits.

CONCLUSIONS: The people in Taiwan seemed unafraid of