

Top 10 drugs

These tables show the top 10 subsidised drugs in 2007–08. The tables do not include private prescriptions.

Table 1

Top 10 drugs by DDD/1000 pop/day *†

Drug	PBS/RPBS ‡
1. atorvastatin	136.215
2. simvastatin	52.996
3. ramipril	29.266
4. perindopril	23.142
5. esomeprazole	19.445
6. aspirin	18.155
7. frusemide	17.877
8. irbesartan	17.272
9. omeprazole	16.678
10. salbutamol	16.624

Table 2

Top 10 drugs by prescription counts †

Drug	PBS/RPBS ‡
1. atorvastatin	10 542 015
2. simvastatin	5 773 055
3. esomeprazole	5 221 504
4. perindopril	3 836 043
5. omeprazole	3 702 832
6. paracetamol	3 666 627
7. atenolol	3 245 793
8. pantoprazole	3 150 985
9. irbesartan	3 085 338
10. metformin hydrochloride	2 961 175

Table 3

Top 10 drugs by cost to Government †

Drug	Cost to Government (\$A)	DDD/1000 pop/day * PBS/RPBS ‡	Prescriptions PBS/RPBS ‡
1. atorvastatin	585 491 600	136.215	10 542 015
2. simvastatin	237 274 763	52.996	5 773 055
3. clopidogrel	196 649 817	9.776	2 636 907
4. esomeprazole	184 420 078	19.445	5 221 504
5. salmeterol and fluticasone	160 894 401	– §	2 874 427
6. olanzapine	158 220 450	3.051	864 937
7. omeprazole	108 931 730	16.678	3 702 832
8. rosuvastatin	104 846 840	9.248	1 674 364
9. venlafaxine	104 082 531	13.196	2 644 753
10. tiotropium bromide	100 464 420	5.662	1 437 217

* The defined daily dose (DDD)/thousand population/day is a more useful measure of drug utilisation than prescription counts. It shows how many people, in every thousand Australians, are taking the standard dose of a drug every day.

† Based on date of supply

‡ PBS Pharmaceutical Benefits Scheme, RPBS Repatriation Pharmaceutical Benefits Scheme

§ Combination drugs do not have a DDD allocated

Source: Drug Utilisation Sub-Committee (DUSC) Drug Utilisation Database, as at 30 October 2008. © Commonwealth of Australia.

Book review

Therapeutic Guidelines: Toxicology & Wilderness. Version 1.

Melbourne: Therapeutic Guidelines Limited; 2008. 311 pages. Price \$39, students \$30, plus postage

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Most sections of this book are of an excellent standard while others are inadequate and disappointing. I think this may reflect some uncertainty about the purpose of the book, which to my mind has not had enough thought put into who will use it, why and how.

The bulk of the book covers important topics in toxicology and toxinology. These sections are well prepared and will undoubtedly be very useful for practising clinicians like me, who rarely deal with such cases.

The book starts with an excellent section on resuscitation which underpins most of the other emergency medicine topics. However, given the book includes 'wilderness topics', it would