HPR106

Utilization Trends of the 20 Most Used Prescription Medicine Active Substances in Estonia Between 2016 and 2024 Based on Statistical Yearbook Data

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OBJECTIVES

This study aimed to evaluate utilization trends of the selected prescription medicine active substances in Estonia between 2016 and 2024. The analysis focused on the 20 most used prescription medicine active substances and assessed their annual use using Defined Daily Dose (DDD)/1,000 inhabitants/day values.

METHODS

A descriptive analysis was conducted using Statistical Yearbook data published by the Estonian State Agency of Medicines. Active substances were selected from the 2020–2024 table of the 20 most used prescription medicines by Anatomical Therapeutic Chemical (ATC) code. Annual DDD/1,000 inhabitants/day values were extracted for 2016–2024 and compiled in Excel without filtering, exclusion, or adjustment.

RESULTS

Utilization of the 20 Most Used Active Substances (DDD/1,000 Inhabitants/Day)

#	Active Substance	2016	2024
1	Rosuvastatin	27.4	66.2
2	Ramipril	57.4	52.5
3	Atorvastatin	17.5	48.5
4	Metoprolol	23.7	28.1
5	Amlodipine	28.8	26.0
6	Omeprazole	27.3	26.0
7	Telmisartan	20.7	22.6
8	Nebivolol	20.1	22.6
9	Folic acid	9.49	22.1
10	Perindopril + indapamide	13.2	21.9
11	Levothyroxine sodium	17.4	20.3
12	Metformin	19.7	20.3
13	Perindopril + amlodipine + indapamide	6.0	19.7
14	Pantoprazole	9.0	18.4
15	Torasemide	12.0	17.2
16	Esomeprazole	7.3	16.8
17	Perindopril	3.1	14.0
18	Timolol	8.6	13.3
19	Zopiclone	16.0	13.3
20	Semaglutide	–*	18.2

* Semaglutide was recorded at 1.6 DDD/1,000 inhabitants/day in 2020.

Key Findings

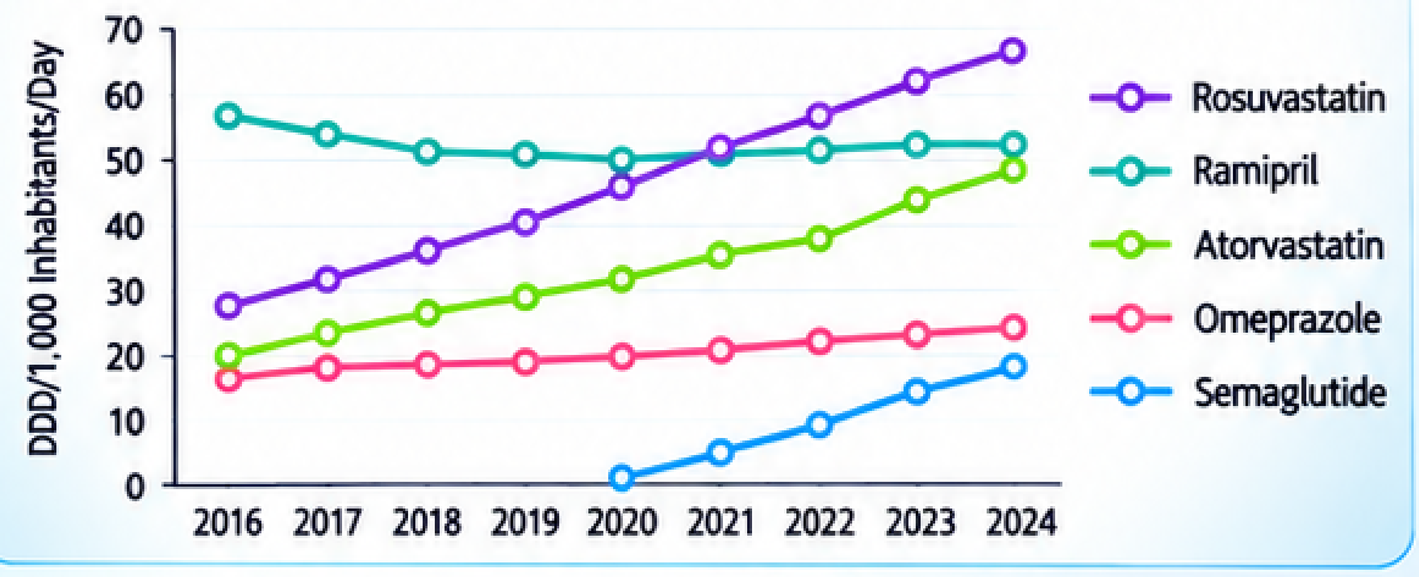
Highest Increase
Rosuvastatin (27.4 → 66.2) and atorvastatin (17.5 → 48.5) showed the largest increases.

Notable Decreases
Ramipril (57.4 → 52.5), amlodipine (28.8 → 26.0), omeprazole (27.3 → 26.0), and zopiclone (16.0 → 13.3) declined.

Emerging Growth
Semaglutide increased markedly (1.6 in 2020 → 18.2 in 2024).

Therapeutic Shift
A clear shift toward statins, fixed-dose combinations, and newer agents (e.g., semaglutide) was observed.

Trends in Key Active Substances (2016–2024)



Key Takeaways

Therapeutic Modernization
Increased use of statins, fixed-dose combinations, and semaglutide.

Evolving Prescribing Patterns
Declines in older monotherapies and a shift toward contemporary treatments.

Clinical and Policy Relevance
Findings suggest guideline-responsive prescribing and a more strategic treatment mix in Estonia.

CONCLUSIONS

Estonia's 2016–2024 prescription trends demonstrate clear therapeutic modernization, reflected in increased uptake of statins, perindopril-based fixed-dose combinations, and semaglutide, indicating evolving prescribing patterns across cardiovascular and metabolic care. Declines in older monotherapies such as ramipril, alongside shifts from omeprazole to pantoprazole and esomeprazole, suggest guideline-responsive prescribing and an evolving preference for more potent, contemporary, and strategically combined treatments across major therapeutic areas.

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