

DOES THE PATIENT'S GENDER PLAY A ROLE IN THE PRESCRIPTION OF NEW DRUGS?

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Conclusion:

Some gender differences in the prescription of new medicines can be linked to disease prevalence, while other differences show no obvious connection to biological aspects and thereby suggest unequal healthcare



Brodalumab	2,13
Guselkumab	1,61
Vosevi	1,13
Maviret	1,17
Cariprazine	3,00
Dupilumab	1,84
Benralizumab	1,38
Semaglutide	1,29

Results (PR in 2018)

These drugs were prescribed significantly more often to men and to women, resp.

Sarilumab	0,39
Tofacitinib	0,48
Baricitinib	0,28
Midostaurin	0,22

Discussion

It is to be expected that new drugs for the treatment of e.g. psoriasis are prescribed more often to men, and drugs for rheumatoid arthritis to women, due to differences in disease prevalence. Drugs marked in **bold text** above were unequally prescribed, without any obvious explanations in biological sex differences.

Methods

We studied 17 drugs that were introduced in 2017 and they were prescribed to all men and women in Sweden the years 2018-2022. Data was retrieved from the Swedish National Prescribed Register.

Analysis: A proportion ratio (PR) was calculated as the number of men/women prescribed a new medication out of the total number of men/women prescribed any medication within the same ATC group, with 95% CI.

