
DRUG COSTS

— IN CANADA —

Submitted to
the House of Commons
Standing Committee
on Industry

●
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1992

●
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Minister of Health

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INTRODUCTION

The cost of drugs is an important issue facing the Canadian health care system. At a time when other health care expenditure increases have been contained, drug expenditures are continuing to increase. This, along with concerns about Canadians receiving appropriate drug therapy, has made drugs a priority issue in the renewal of the health care system.

The purpose of this document is to describe Canada's experience with drug costs. After situating drugs within the Canadian health care system and discussing drug expenditures, the paper describes the two components of drug costs: drug prices and the quantity of drugs used (utilization). This is followed by a discussion of some public policy considerations that arise from current spending levels and trends.

PART I: DRUGS AND THE CANADIAN HEALTH CARE SYSTEM

Pharmaceuticals are a key component of the Canadian health care system. They play a vital role in protecting and promoting the health of the population by preventing, treating and curing diseases and other health conditions. Except for medicines received while in institutional care, drugs are not covered by the *Canada Health Act*.

1.1 Types of Pharmaceutical Products

Drugs include prescription medicines, non-prescription medicines or over-the-counter medicines (OTC) and personal health supplies. Prescription medicines are usually prescribed by physicians, dispensed by pharmacists, and are received either in hospital or in the community. OTC medicines, such as cough and cold remedies, are available without prescription through retail outlets. Personal health supplies include such items as oral hygiene products and home diagnostic kits, and are also available through retail outlets. For the most part, OTC medicines and personal health supplies are purchased directly by consumers and are paid for out-of-pocket.

1.2 Drug Coverage

With respect to prescription medicines, Canada's system of health insurance covers only medications received as part of institutional care (e.g., in hospital), and does not include drugs that are prescribed in the community. Unlike necessary hospital and medical care, which do fall under the *Canada Health Act* and are publicly-financed, multiple-payers are involved in the financing of prescription medicines. Payers include governments through pharmacare programs, hospitals, private insurers including insurance companies, employers and unions, and patients paying out-of-pocket.

The majority of Canadians have some form of coverage for prescription medicines. In 1995, it is estimated that 88 per cent of Canadians had coverage: 62 per cent were covered under private plans, 19 per cent under provincial plans, and 7 per cent were covered under both. Of the 12 per cent of the population without any drug coverage, more than half were employees and their dependents whose employers do not provide a supplementary drug benefit plan. Fewer than four per cent of Canadians without access to a drug benefit plan were self-employed entrepreneurs and their dependents, and two percent were without employment and did not qualify for government or private plans.¹

Provinces subsidize the cost of prescription medicines for at least some sectors of the population, most notably seniors and social assistance recipients. Four provinces have some form of universal program, but the benefits are usually linked to an individual's ability to pay through the application of copayments and deductibles. The federal government pays for drugs for specific groups within its jurisdiction, e.g., First Nations and veterans. Private sector plans are mostly offered through insurance companies and by employers as employee benefits.

While the many publicly and privately financed drug benefit plans currently in existence in Canada are diverse in their designs, there are several common elements among them. For example, all plans define who will be covered, which products will be covered, how reimbursement will be administered, and the degree of cost sharing by plan beneficiaries. The following is a brief description of these common elements.

Defined population of beneficiaries. As stated above, for provincial plans, this includes, at least, senior citizens (although some provinces restrict coverage to those who meet certain income conditions) and those on social assistance. Some provinces provide for universal coverage, while others have special programs for people with specific illnesses/conditions. Private plans generally cover plan members and, in some cases, their immediate families and retirees.

List of products eligible for reimbursement. Provincial drug plans generally use limited benefit lists (formularies), and have rigorous procedures for determining which drug products will be reimbursed. This could include both prescription and non-prescription drugs, as well as medical supplies such as syringes. Establishing whether a product will be covered is generally done by a therapeutics committee, which reviews drug submissions. Increasingly, the criteria for covering new drugs includes a pharmacoeconomic element, i.e., the drug must be cost effective, as well as safe and efficacious. Few private plans have defined benefit lists, although some only reimburse drugs listed on provincial formularies. In other cases, private plans simply follow a broad rule such as reimbursing all prescribed drugs.

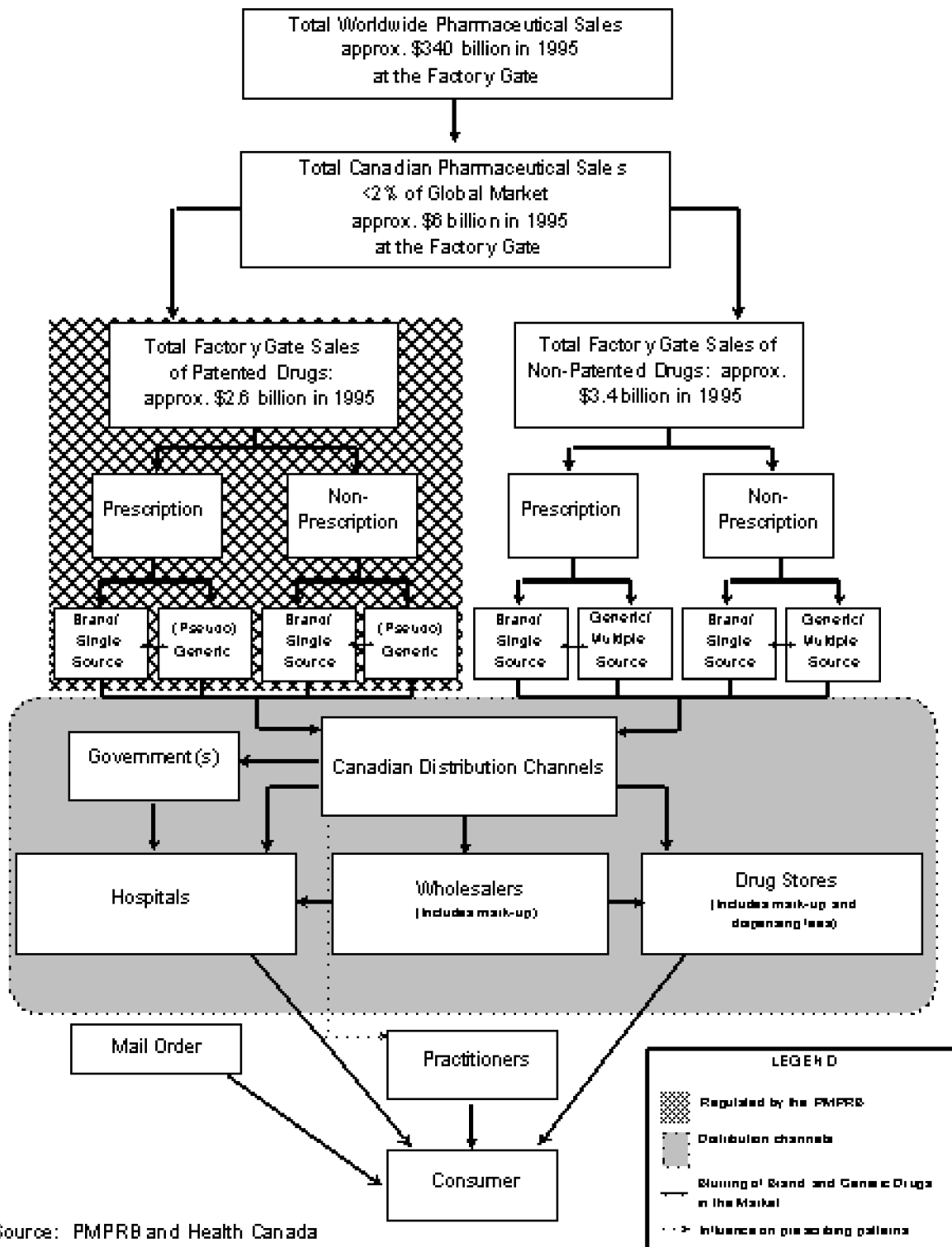
Reimbursement. Provincial drug plans all establish the price that will be reimbursed for each prescription. Various pricing mechanisms exist, including actual acquisition cost, lowest cost alternative, maximum allowable cost, best available price, and reference-based pricing. These pricing/reimbursement policies tend to favour generic substitution, when generics are available. In addition, provinces stipulate the percentage of the pharmacist's dispensing fee that will be reimbursed. Generally, provinces reimburse the pharmacy directly. Private plans tend to reimburse the beneficiary, but some are moving toward direct payment to the pharmacy. Because of the cost involved with administering the various types of pricing/reimbursement policies, private plans tend not to make use of them.

Cost sharing. Every province has some form of cost sharing for certain groups covered by the plans. The extent of cost-sharing required is often dependent on the beneficiary's income. The two methods used are deductibles and co-payments. With a deductible, the beneficiary pays the full cost of prescriptions up to a specified amount. With a co-payment, some portion of the drug cost is paid by the beneficiary. While some private plans remain cost-free to the beneficiary, others require deductibles and/or co-payments. In addition, some private plans stipulate a maximum coverage amount over a pre-determined time period.

1.3 The Canadian Pharmaceutical Market

The pharmaceutical market for prescription and OTC pharmaceutical products in Canada is depicted in the following schematic. In terms of manufacturers' or factory gate sales (i.e., not including distribution, mark-up or dispensing costs), the Canadian market for prescription and non-prescription medicines amounted to about \$6 billion in 1995. On a global context, this represented less than 2 per cent of total worldwide pharmaceutical sales.²

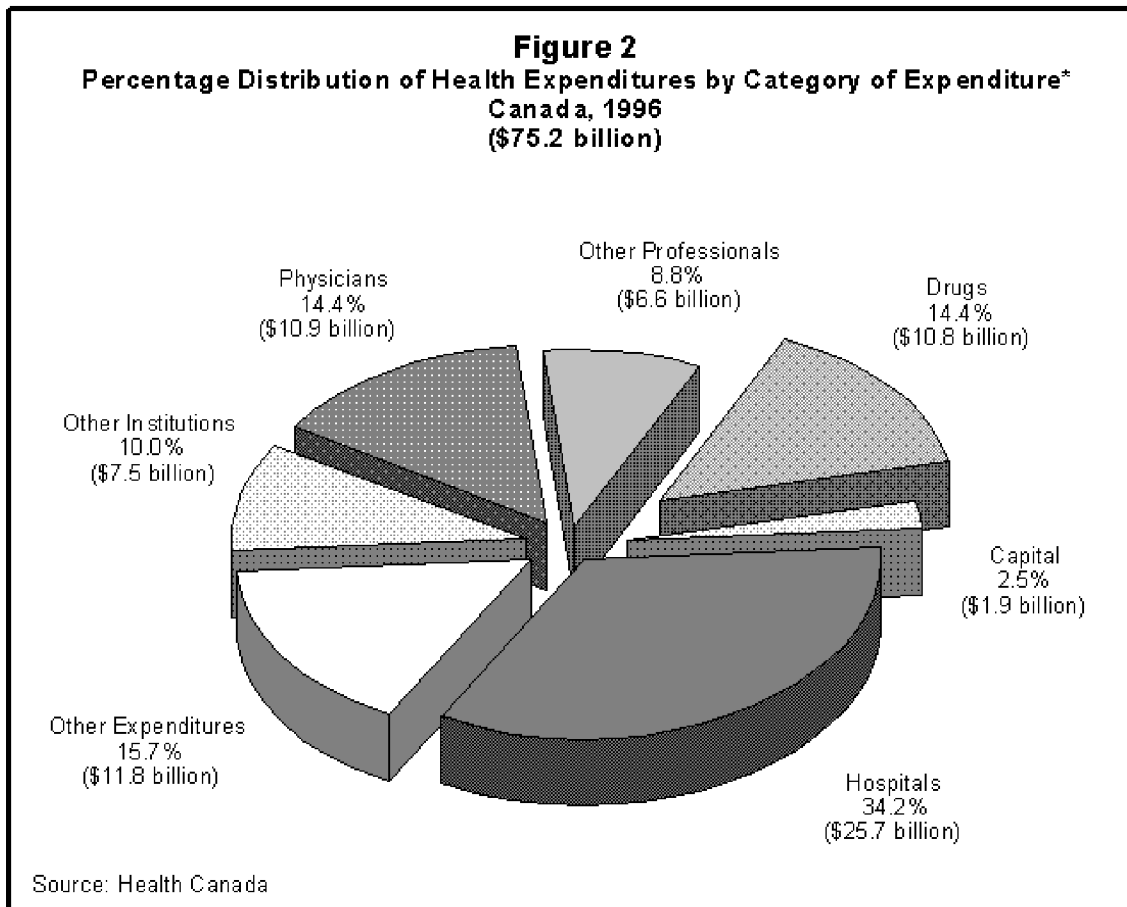
Figure 1
CANADIAN PHARMACEUTICAL MARKET



PART II: DRUG EXPENDITURE TRENDS

2.1 Total Drug Expenditures

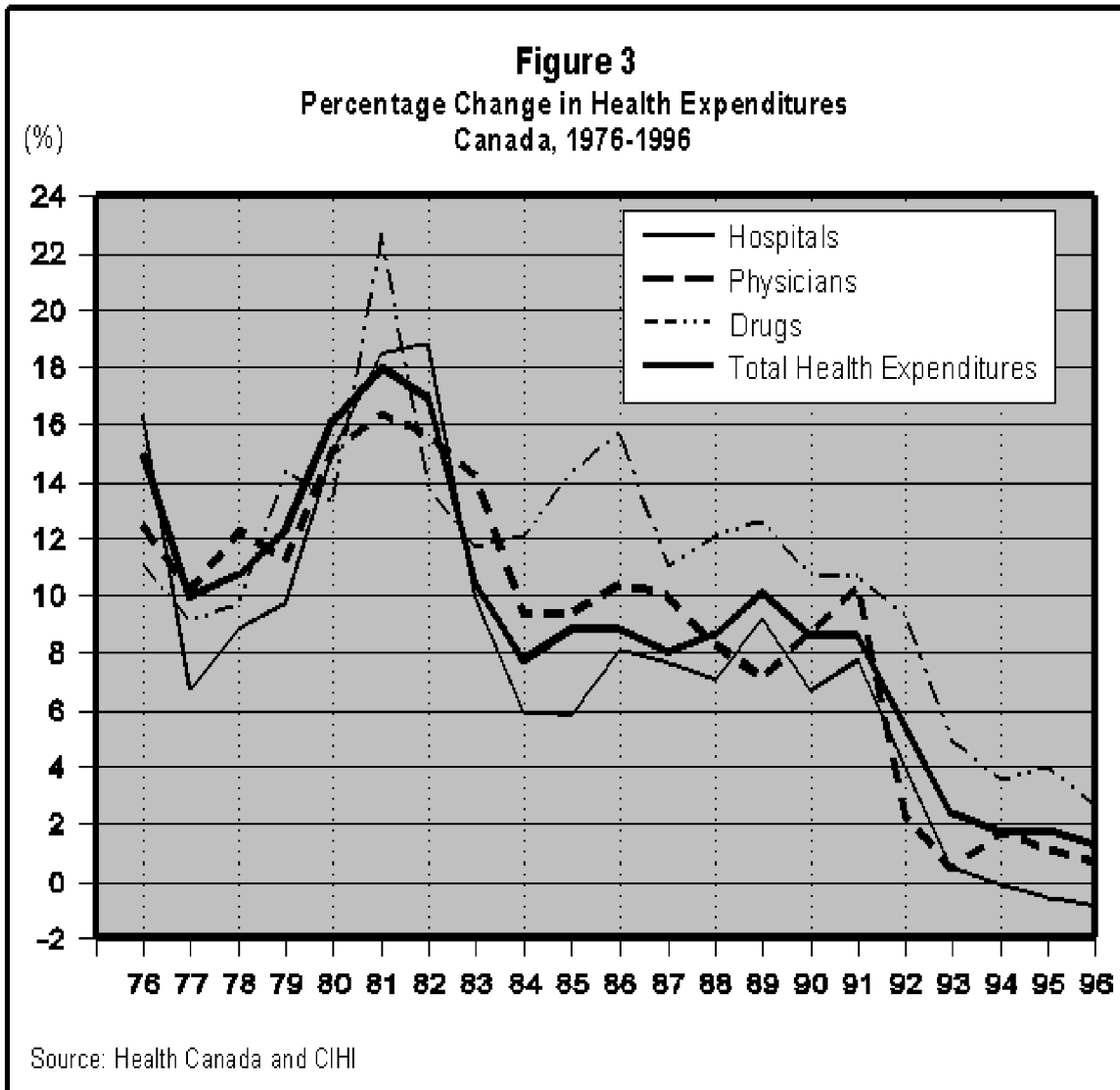
New drug expenditure estimates developed by Health Canada indicate that in 1996 Canada spent \$10.8 billion on drugs. This represented about 14.4 per cent of total health expenditures which are estimated at \$75.2 billion for that year (Appendix, Tables 1A and 1C).³ The new estimates encompass all drug spending in the health care system, including drugs in hospitals and other institutions, doctors' and other health practitioners' offices, and public health spending on drugs (e.g., vaccines). Previous estimates by Health Canada (i.e., 12.7 per cent in 1994) did not include drug expenditures in these other areas.



* Drug expenditures previously posted in the various categories (hospitals, etc.) are now regrouped in the drug category.

Since the early 1980s, drugs have accounted for a steadily increasing percentage of total health expenditures. For example, in 1983, drugs represented 9.8 per cent of health spending; by 1990, this had increased to 12.6 per cent and by 1996 to 14.4 per cent (Appendix, Table 1C). In general, Canadians now spend about as much on drugs as they do on physician services, or about \$362 per person per year (Appendix, Table 1B).

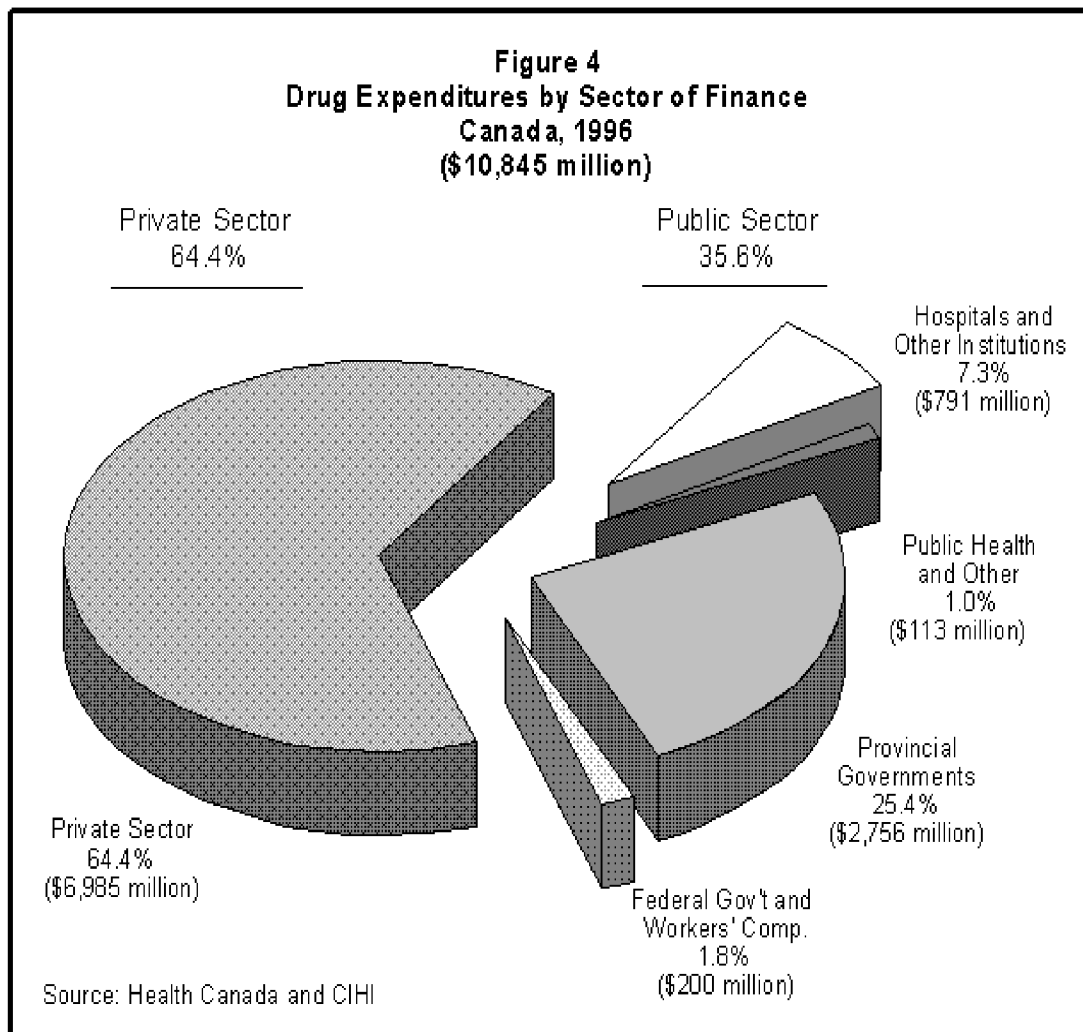
In total, drug expenditures increased by four per cent in 1995 and 2.7 per cent in 1996 (Appendix, Table 1A). As shown in Figure 3, drug spending continues to increase faster than spending in other key health sectors such as hospitals and physicians.



2.2 Drug Expenditures by Sector of Finance

The private sector pays for most drugs in Canada. In 1996, employers, insurance companies, unions and individuals paying out-of-pocket accounted for 64.4 per cent of drug expenditures (almost \$7 billion). Private sector expenditures increased by 5.5 per cent in 1995 and 5.9 per cent in 1996 (Appendix, Table 3A).

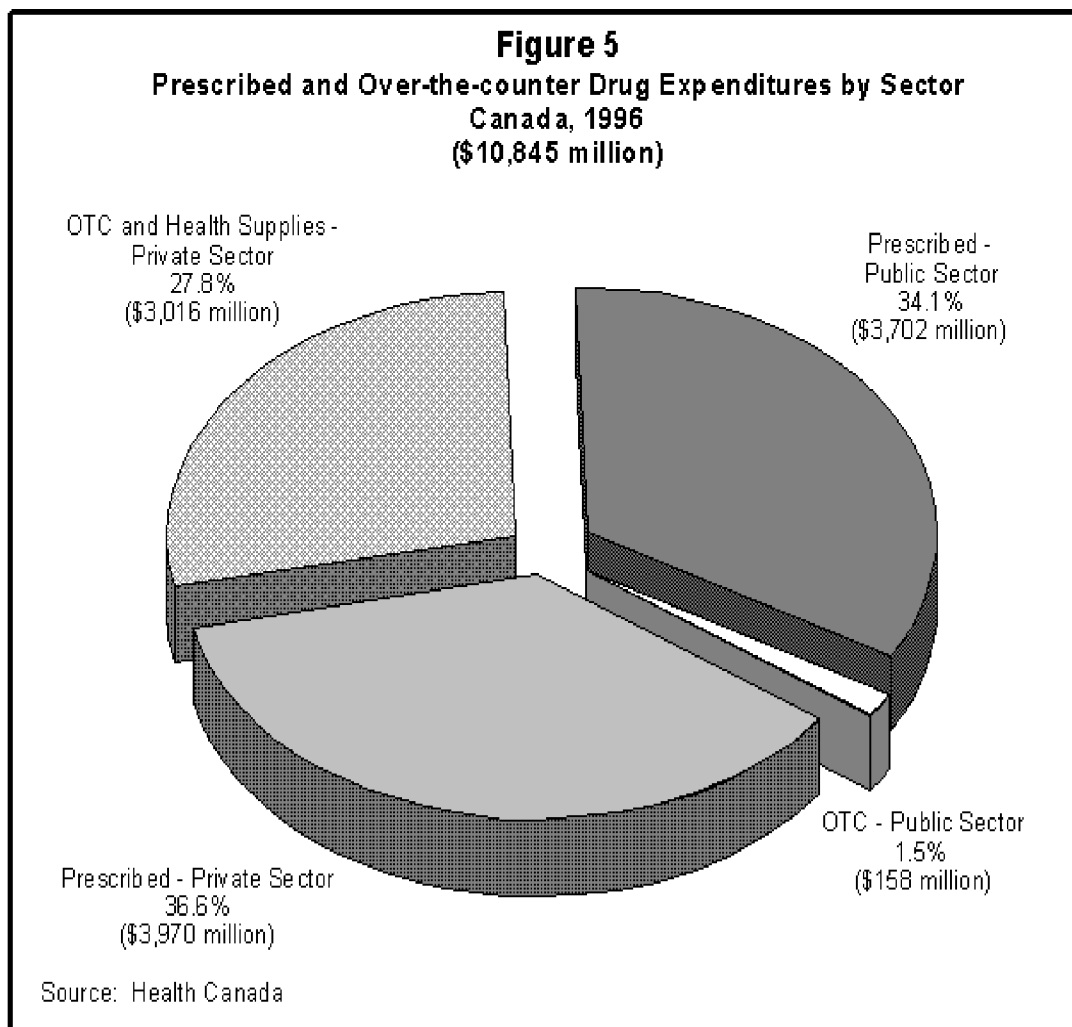
The public sector accounts for 35.6 per cent of drug expenditures. Within the public sector, the two largest payers are provincial governments (25.4 per cent) and hospitals and other institutions (7.3 per cent). Public sector expenditures, in contrast to private sector spending, increased by only 1.5 per cent in 1995 and decreased by 2.6 per cent in 1996 (Appendix, Table 3A).



2.3 Prescription Drug Expenditures

Prescription drug expenditures make up about 70.7 per cent of total drug expenditures (Appendix, Table 3C). In 1996, this amounted to approximately \$7.7 billion, or \$256 per person (Appendix, Tables 3A and 3B) Expenditures on prescribed drugs increased by 3.5 per cent and 1.6 per cent respectively in 1995 and 1996, compared to increases of more than 10.0 per cent in 1992 and before (Appendix, Table 3A). The private sector pays for about 52 per cent of prescription medicines, with provincial/territorial pharmacare and institutional drug expenditures accounting for 48 per cent (Appendix, Table 3C).

Expenditures on OTC products are predominantly private, given that public sector spending on drugs is mostly on prescription drugs through provincial pharmacare programs and in hospitals.

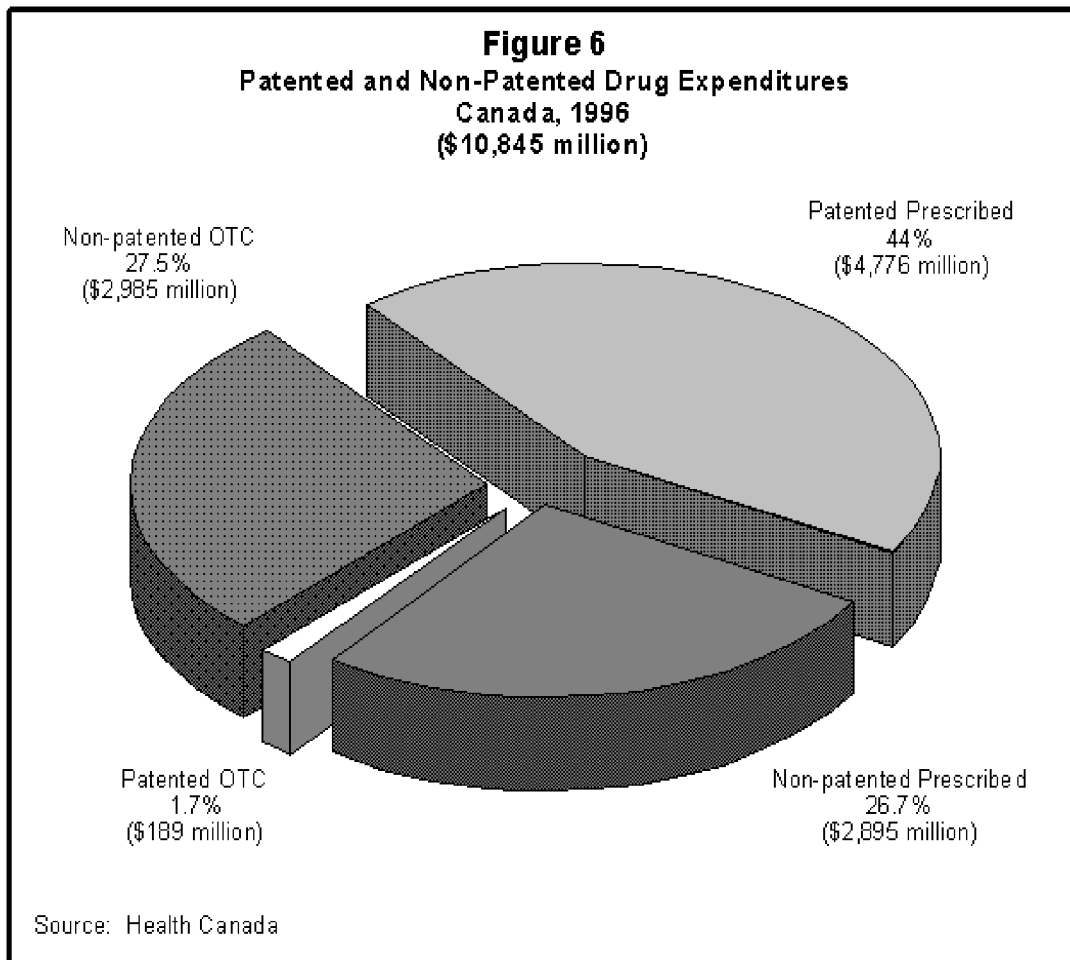


2.4 Patented and Non-Patented Drug Expenditures

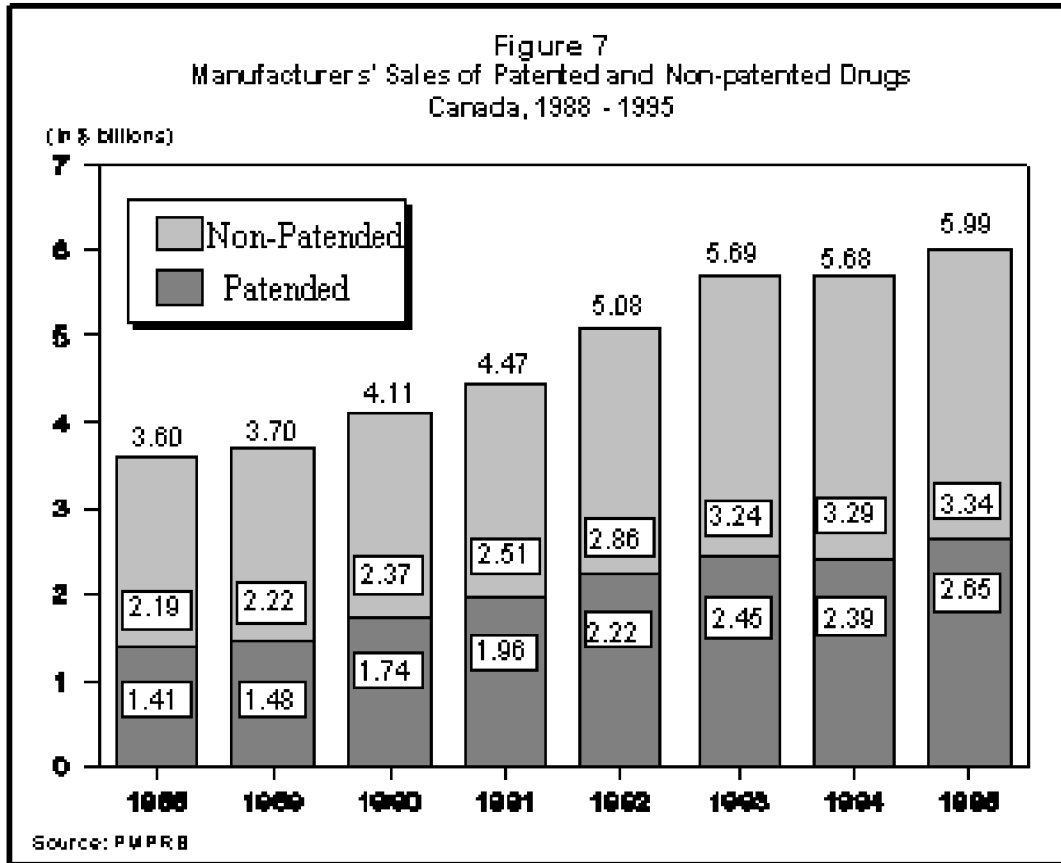
According to new Health Canada estimates, Canada spent about \$5 billion on patented drug products in 1996 (Appendix, Table 4A). Patented prescription medicines accounted for 44 per cent of total drug expenditures. Spending on patented OTC represented only 1.7 per cent of total spending on drugs (Table 4C).

Spending on non-patented pharmaceuticals was almost evenly split between prescription medicines and other drug products (non-prescribed drugs and personal health supplies).

With respect to spending on prescription medicines, expenditures on patented drugs have increased, as a percentage of total spending, from 40.8 per cent in 1990 to 44.0 per cent in 1995 and 1996. Non-patented prescription drug expenditures were 30.6 per cent in 1990 and 26.7 per cent of total spending in 1996 (Appendix, Table 4C).



In terms of manufacturers' sales of prescription and OTC products (i.e., excluding personal health supplies, distribution, mark-ups and dispensing costs), which were about \$6 billion in 1995 (Figure 1), non-patented drugs made up about 56 per cent of total sales, while patented drugs accounted for 44 per cent. As shown in Figure 7, this ratio has changed only slightly since 1988 when non-patented drugs accounted for 60 per cent, and patented drugs for 40 per cent.



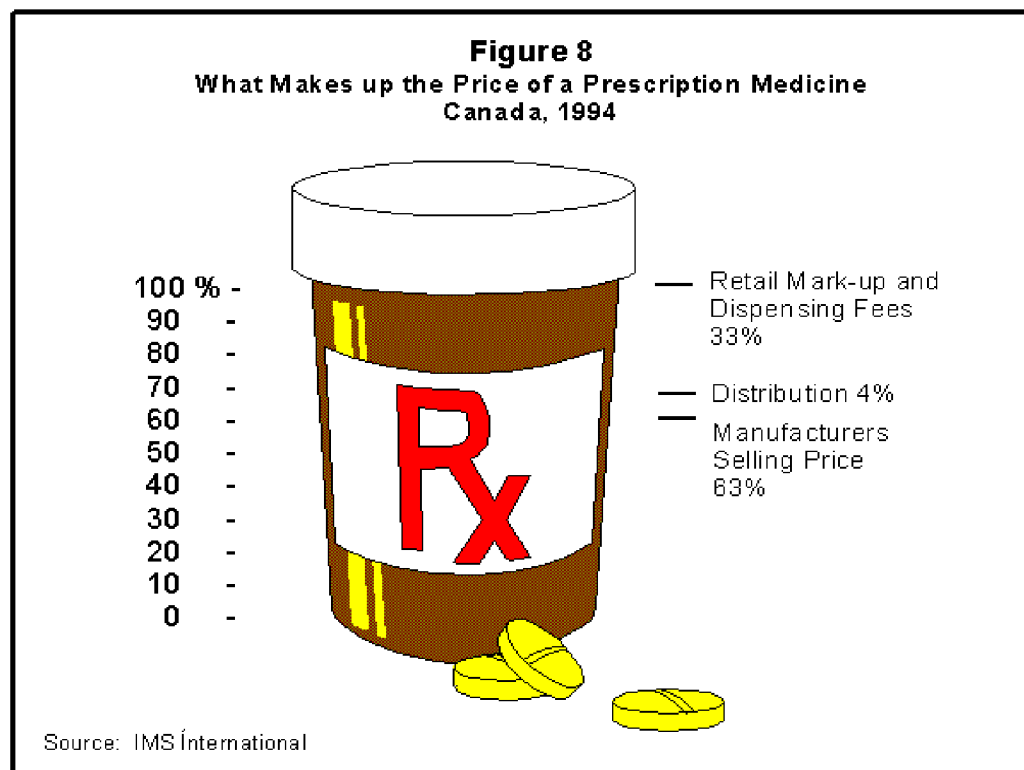
2.5 Factors Affecting Drug Expenditures

Expenditures on drugs are a function of several factors: prices, quantities of drugs consumed, and the tendency of prescribers to shift to newer, more expensive drugs.

Changes in total expenditures result from changes in prescribing habits, changes in the utilization of drugs and changes in drug prices. Higher prices mean higher expenditures. Consumption of larger quantities of drugs can result in increased expenditures even if prices go down. Similarly, shifts in prescribing from older therapies that often use cheaper drugs to newer therapies that include more expensive ones result in increased costs even if the actual price levels of the products involved do not change.

PART III: DRUG PRICES

Retail drug prices (i.e., the prices that consumers and other payers pay) are comprised of the manufacturer price (or the factory gate price), distribution costs and retail costs (includes retail mark-ups and pharmacists' dispensing fees).



Because of Canada's drug price regulatory regime, drug prices must be examined according to the patent status of the pharmaceutical product, i.e., patented drug prices and non-patented drug prices. Patented drug prices, at the manufacturer level, have been regulated by the Patented Medicine Prices Review Board (PMPRB) since 1987.

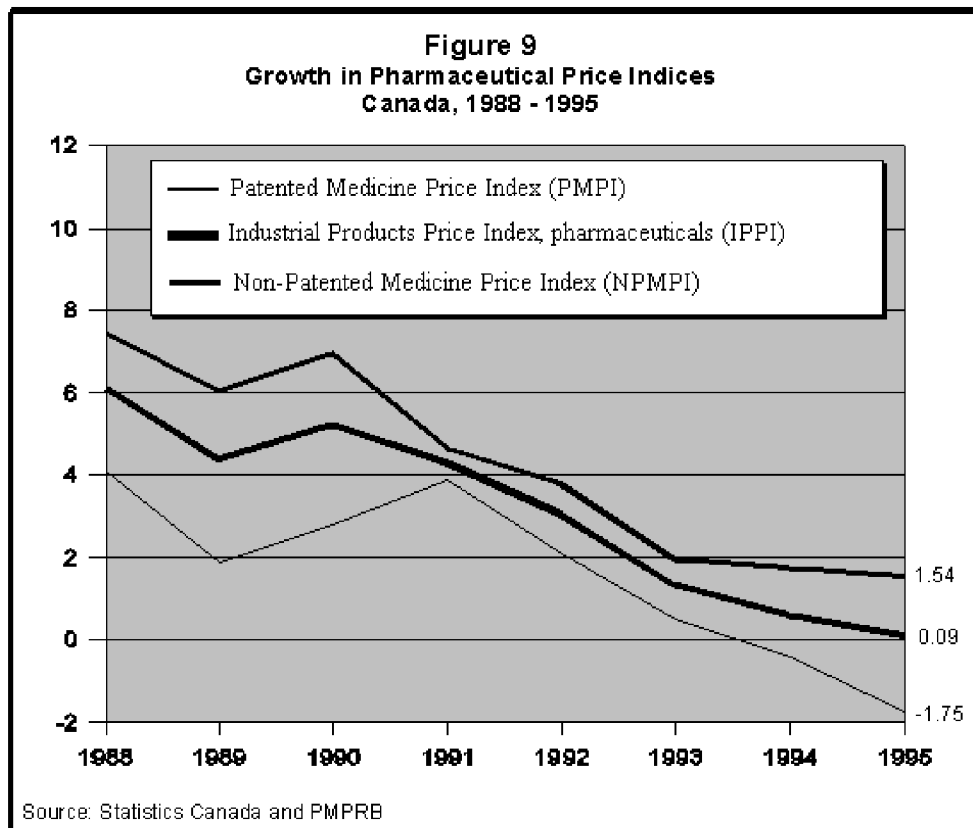
Non-patented drugs include drugs that are not yet patented, drugs whose patents have expired, drugs for which there has never been a patent and generic copies. Most non-patented drugs are brand name products, many of which are single-source drugs. Non-patented drug prices are not regulated⁴, but their prices are often influenced by provincial and hospital formularies and reimbursement policies, as are dispensing fees.

Among countries that regulate drug prices, Canada is unique in that it regulates only the prices of patented drugs.

3.1 Price Trends of All Drugs

A comparison of price trends between Canada and the United States suggests that increases in drug prices in Canada have slowed since the late 1980s. From 1984 to 1987, manufacturers' prices for all drugs in Canada increased at a rate equal to or greater than the rate in the United States. Since then, the average annual rate of increase in Canada has declined relative to the rate of increase in the United States.⁵

According to the pharmaceutical component of Statistics Canada's Industrial Products Price Index (IPPI), pharmaceutical prices, at the manufacturer level, (including patented and non-patented drugs) increased by only 0.09 per cent in 1995.⁶



3.2 Patented Drug Prices

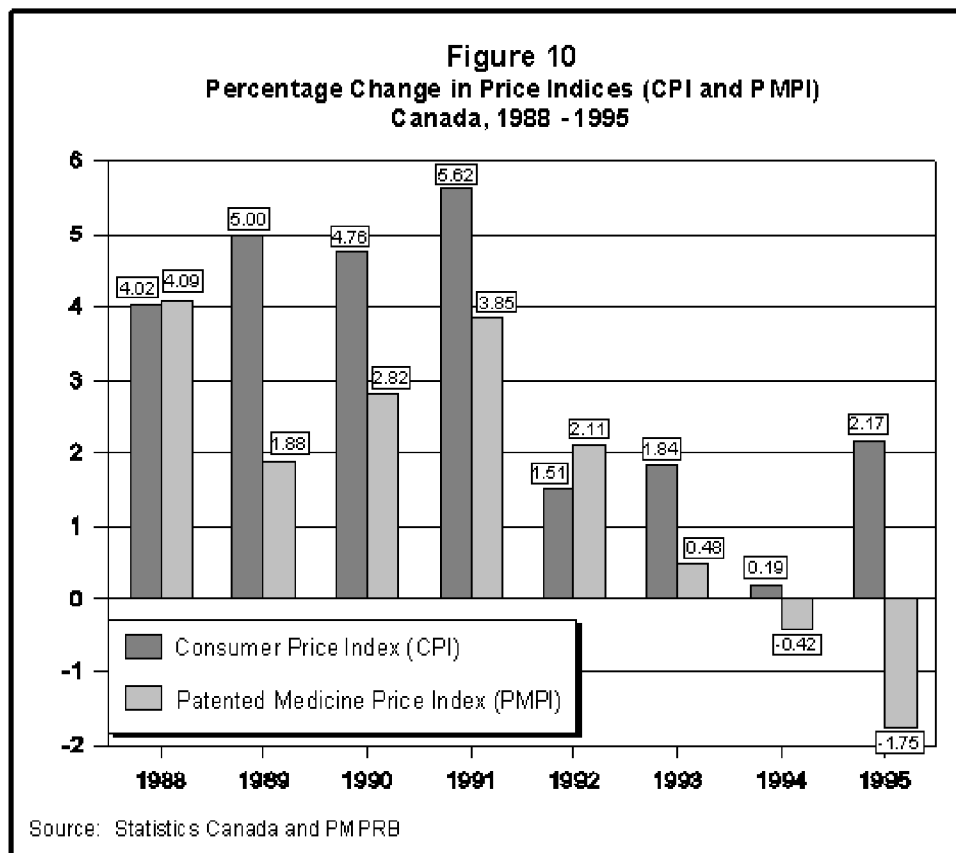
According to the new Health Canada estimates, in 1996, patented drugs accounted for 45.8 per cent of drug spending. About 900 patented drug products are sold in Canada; this represents about 10 per cent of all drug products available in the country.⁷

Patented drug prices are regulated in Canada by the Patented Medicine Prices Review Board (PMPRB). There are two components to this price regulation. One is the limit on increases of patented drugs already on the market; the other is the limit on introductory prices of new patented drugs.

Price Changes

The PMPRB maintains a comprehensive database on manufacturers' prices for patented medicines. As part of its responsibilities for monitoring the prices of patented medicines, the PMPRB has developed the Patented Medicine Price Index (PMPI).

The PMPRB reported that in 1995, the prices of patented medicines, as measured by the PMPI, declined by 1.75 per cent from their level in 1994 (Figure 10). This was the second year of decline; the PMPI declined by 0.42 per cent in 1994.⁸



The PMPRB limits price increases for existing medicines to changes in the CPI. Figure 10 shows the year-over-year changes in patented drug prices compared to the changes in the CPI.

Since the establishment of the PMPRB in 1987, the year-over-year changes in the PMPI have been less than the changes in the CPI, except in 1988 and 1992.⁹

The PMPRB reports that from 1988 to 1995, manufacturers' prices for all pharmaceuticals, as measured by the pharmaceutical component of Statistic Canada's Industrial Product Price Index [IPPI (pharma)], and the CPI have increased on average by almost the same amount, just over three per cent per year. In contrast, prices for patented drugs have increased at a significantly lower rate over that time period, by 1.63 per cent per year, on average. Prior to the creation of the PMPRB, from 1982 to 1987, when there was no direct regulation of drug prices, price increases for all drugs, as measured by the IPPI (pharma), averaged 8.96 per cent per year as compared to increased in the CPI of 5.60 per cent per year. The decline in the rate of increase of all drugs relative to the CPI coincided with the introduction of federal price regulation of patented drugs, which represent about 44 per cent of manufacturers' sales of all drugs.¹⁰

Introductory Prices: Canadian Prices Relative to Foreign Prices

According to PMPRB Guidelines, the prices of most new drugs may not exceed the maximum price of other drugs that treat the same disease. The introductory prices of "breakthrough" drugs may not exceed the median of the foreign prices of the drugs.

In reviewing the prices of Canada's top 200 selling patented drugs, the PMPRB found that the prices charged by drug manufacturers for Canada's most popular patented drugs declined on average for the first time in 1994 (by 0.28 per cent). The prices of 86 per cent of the top 200 products either stayed the same or went down. This figure is up from 70 per cent in 1993 and contrasts with 1992 when only 39 per cent of the prices of the top 200 products did not go up in price.¹¹

The PMPRB has also found that 1994 price levels for patented drugs in Canada ranked below those in the United States, Switzerland and Germany, but above those in the United Kingdom, Sweden, France and Italy. In 1987, before regulation, average Canadian patented drug prices were the second highest, ranking below the U.S. but above the other countries.¹²

3.3 Non-Patented Drug Prices

Information on the manufacturer prices of non-patented drugs is limited in Canada. Because they are unregulated, there is no central reporting mechanism as is the case with patented drugs (PMPRB). Data that is available is inconsistent and scattered among the various payers of pharmaceuticals in the country (e.g., provincial drug plans, insurance companies).

Statistics Canada, however, reports that the prices of non-patented drugs increased on average about 3.2 per cent per year between 1989 and 1994. The PMPRB has recently developed a Non-Patented Medicine Price Index (NPMPI). As shown earlier in Figure 9, the NPMPI increased at a higher annual rate since 1987 relative to the IPPI (pharma) and the PMPI.

There is a generally held concern among pharmaceutical payers about the prices of some non-patented products in that they appear to be clearly out of line with the level of prices for non-patented drugs in general (e.g., some single source products for which there is no competition).

With respect to the prices of generic drugs, which fall within the category of non-patented drugs, a recent analysis by the federal government, based on a sample of IMS data for the years 1990 to 1995, suggests that, on average, a generic drug will be priced at approximately 77.6 per cent of the corresponding brand name drug price, in cases where there is only one generic on the market.

When there are two generics on the market, the generic prices on average are approximately 65.3 per cent of the corresponding brand name drug price. This ratio declines to 62.6 per cent when there are three or more generics on the market.¹³ Generic drugs represent about 12 per cent of pharmaceutical manufacturers' sales revenues.¹⁴

PART IV: DRUG UTILIZATION

Drug utilization, or the quantity of drugs used, is the other key component of drug costs (costs = price x quantity). Given that patented drug prices are regulated in Canada, utilization is considered to be a key determining factor in the level of drug costs in Canada.

4.1 Trends

Canada lacks a comprehensive, national database on drug utilization. Provincial governments maintain utilization data within their pharmacare programs, but most of these programs usually only cover certain sectors of the population (e.g., seniors, social assistance recipients, individuals with catastrophic drug costs). Private sector payers are many and, like public payers, do not cover whole population groups. In addition, there are no standards for utilization data that would allow for the association or combining of existing data bases in order to track national utilization patterns.

There are, however, general indicators that can be used to give an idea of drug utilization patterns. For example, in 1995, approximately 228 million prescriptions were written in Canada, according to IMS Canada.¹⁵ This was up by 3.7 per cent over 1994. Prescription numbers are not a precise measure of rates of utilization because the quantity per prescription (i.e., number of pills) can vary and some prescriptions are never filled, etc. Nevertheless, it does give an indication of the magnitude of prescribing in Canada -- an average of eight prescriptions per person.

Another indicator is the rate of increase in the quantity of patented drugs sold. The PMPRB reports that in 1995, the quantity of patented drug products sold increased by 14.8 per cent over the amount sold in 1994.¹⁶ Again, this is not a precise measure, because, for example, new patented products may have come on the market that could have changed therapies.

There is concern about the level of medication use among the senior population. Seniors are the largest consumers of prescription drugs in Canada. In 1994, seniors made up about 12 per cent of the population, but according to Health Canada analysis, accounted for about 40 per cent of prescription drug expenditures.¹⁷

With increasing age comes increased morbidity, severity of illness and greater risk of drug reactions. A higher level of drug use among the elderly population is therefore to be expected but there is some evidence that much of the drug use by seniors is not appropriate. About 19 to 28 per cent of hospital admissions for patients over 50 years of age result from medication problems.¹⁸ Sixty percent of these admissions are attributed to adverse drug reactions to medication and 40 per cent to inappropriate use of the medication.¹⁹ It is estimated that seniors use anywhere from 18 to 50 per cent of their medications inappropriately.²⁰

A 1995 study estimated that inappropriate use of pharmaceuticals costs the Canadian economy \$3.5-4.5 billion each year in direct health care costs (i.e., hospitalization, physician visits and laboratory tests). Adding indirect costs (i.e., lost productivity due to absenteeism and premature death) brings the total to \$7-9 billion.²¹

4.2 Factors Affecting Utilization

There are many factors which affect the level of drug use among the population. Some of the key factors are demographic changes, disease patterns, new drug products, and prescribing practices.

Changes in the age and sex composition of the population can affect the utilization of pharmaceuticals. Canada's population is aging and, as stated above, seniors tend to use more drugs. About 12 per cent of the population is currently 65 years of age or older. By 2016, the percentage of seniors is expected to increase to 16 per cent and by 2041 it may reach 22-25 per cent.²² In general, women tend to use more drugs than men.

The prevalence of conditions or diseases also have an impact on utilization. Increases in cardiovascular disease, gastrointestinal problems, respiratory illnesses such as asthma and specific diseases such as HIV/AIDS and hepatitis and the availability of drug treatment for those conditions can increase drug utilization. Drugs to treat cardiovascular and gastrointestinal conditions account for the largest increase in drug expenditures by the elderly.²³

New drug products, either improved formulations of existing medicines or true breakthrough products are continually coming on the market. New products tend to displace older products, and to the extent that newer products are more expensive than older products, drug costs will increase. The availability of new drug therapies for conditions previously untreated, or treated through other interventions such as surgery, will affect utilization.

Prescribing practices are a key determining factor of drug utilization. There is, unfortunately, considerable scope for inappropriate prescribing, including incorrect dosage, unnecessary duplication of therapies (i.e., two or more drugs to treat the same condition), inappropriate duration of drug therapy, prescribing drugs that adversely interact, and unnecessary prescribing related to misdiagnosis and treating a condition that does not exist. This can be compounded by the availability and quality of information on prescription medicines that is necessary for prescribers to ensure optimal drug therapy for their patients. Prescribers are aware of the difficulties in this area and are seeking to improve overall prescribing practices.

PART V: PUBLIC POLICY CONSIDERATIONS

Increasing drug costs are having an impact in both the public and private sectors. In attempting to cope and adjust to increased costs, the multiple payers have been taking individual actions that have resulted in a number of changes in the pharmaceutical sector. The uncoordinated nature of the changes has produced trends which appear to be at odds with Canadian policy directions for health care.

5.1 Impacts on the Public Sector

Provincial government drug expenditures (prescription drug programs) represented 25.4 per cent of total drug expenditures in Canada in 1996. During the 1980s and early 1990s, provincial drug program expenditures were experiencing average annual rates of increase in the range of 11 to 20 per cent.²⁴ To address this rate of increase, provinces have undertaken a number of changes in their plans, including using formularies or lists of drugs eligible for reimbursement, reimbursement ceilings and reference-based pricing to limit the amount paid for drugs, negotiating or limiting pharmacy dispensing fees and encouraging the dispensing of larger quantities to minimize these fees, restricting the eligible population, and imposing or increasing payments made by individuals (copayments and deductibles). Provincial drug program expenditures moderated significantly in the 1990s, e.g., an increase of one per cent in 1994 to a drop of 3.7 per cent in 1996.²⁵

The overall trend produced by public sector reaction to increasing drug costs has been toward changing public coverage for drugs based on one's "ability-to-pay". This approach has reduced the rate of increase of public sector drug expenditures, but there is concern about the impact on private sector payers and individual access to drug coverage.

5.2 Impacts on the Private Sector

Private sector payers have experienced drug benefit cost increases similar to those in the public sector. On average, the cost of employee drug plans has increased from 0.72 per cent of payroll to 1.07 per cent between 1990 and 1994. This represents a growth rate of almost 50 per cent over five years.²⁶ Reactions to these cost increases, which are unsustainable from a business competitiveness point of view, have included increasing premiums and employee contributions, introducing formularies to limit the drugs paid for, and establishing "flexible benefit" programs which place a cap on the level of benefits available.

While not directly attributable to increasing employee benefit costs, there is also an observable trend in the work environment toward increasing use of a contingent workforce: contract work and part-time work, which usually offers little or no employee benefits.²⁷

CONCLUSION

Drugs are an integral and increasingly important element of the Canadian health care system. There is a consensus that the primary objective of drug policy should be to ensure optimal drug therapy (the right drug for the right patient) at an affordable level of expenditure. There is also concern that Canada is experiencing drug cost increases which are considered to be unaffordable and may be having a negative impact on Canadians' access to necessary pharmaceutical care.

The findings of the National Forum on Health indicate that the current situation with respect to drugs in Canada is incompatible with Canadians' vision for the health care system, and have recommended the establishment of a single-payer, publicly-financed system for pharmaceuticals.

The federal government, the provinces and territories have recognized that dealing with drug costs and ensuring optimal drug therapy is a national concern and that there is a need for national coordination and cooperation in this area. This work has been started with the creation of a federal/provincial/territorial review of drug issues by Federal/Provincial/Territorial Ministers of Health in April 1996.

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APPENDIX - DATA TABLES

TABLE	TITLE
1 (A,B,C)	Total Health Expenditures by Category of Expenditure, Canada, 1975 - 1996
2 (A,B,C)	Total Drug Expenditures (including prescribed, non-prescribed and personal health supplies Canada, 1975 - 1996
3 (A,B,C)	Drug Expenditures by Type of Drug and Sector of Finance, Canada, 1975 - 1996
4 (A,B,C)	Patented and Non-patented Drug Expenditures, Canada, 1975 - 1996

Table 1A
Tableau 1A

Total Health Expenditures by Category of Expenditure *
Dépenses totales de santé par catégorie de dépenses *
Canada, 1975-1996

Year	Hospitals	Other Institutions	Physicians	Other Professionals	Drugs*	Capital	Other Expenditures	Total
Année	Hôpitaux	Autres établissements	Médecins	Autres professionnels	Médicaments*	Immobilisations	Autres dépenses	Total
(\$ '000,000)								
1975	5,396.8	1,121.9	1,838.1	899.4	1,247.1	536.9	1,220.7	12,260.9
1976	6,276.0	1,364.5	2,069.0	1,048.1	1,386.1	545.3	1,414.8	14,103.7
1977	6,697.0	1,572.0	2,282.2	1,234.1	1,511.6	564.7	1,640.3	15,501.8
1978	7,287.7	1,845.6	2,564.1	1,420.2	1,658.2	672.5	1,724.0	17,172.4
1979	7,995.9	2,164.0	2,854.2	1,640.4	1,897.4	786.9	1,953.7	19,292.6
1980	9,193.9	2,529.7	3,284.2	1,902.4	2,151.5	1,054.4	2,292.1	22,408.3
1981	10,893.1	2,874.1	3,821.0	2,179.3	2,638.4	1,206.7	2,836.4	26,449.1
1982	12,941.9	3,326.7	4,416.4	2,503.9	3,003.9	1,467.1	3,253.0	30,912.9
1983	14,227.8	3,684.4	5,047.7	2,724.4	3,356.8	1,510.0	3,617.0	34,168.1
1984	15,077.4	3,875.1	5,520.3	2,952.3	3,762.0	1,560.9	4,071.8	36,819.9
1985	15,957.9	4,065.3	6,040.7	3,315.7	4,300.9	1,839.0	4,538.6	40,058.1
1986	17,248.9	4,056.5	6,668.7	3,643.6	4,975.8	2,026.2	4,963.3	43,583.0
1987	18,570.0	4,297.8	7,335.1	3,972.8	5,525.5	2,058.4	5,297.6	47,057.2
1988	19,887.4	4,707.7	7,941.4	4,323.5	6,192.6	2,025.9	6,063.8	51,142.3
1989	21,712.9	5,109.7	8,509.8	4,766.3	6,976.5	2,202.5	7,059.8	56,337.6
1990	23,169.3	5,711.7	9,251.1	5,204.6	7,724.7	2,237.2	7,870.3	61,168.9
1991	24,969.3	6,296.8	10,210.6	5,672.5	8,551.4	2,134.6	8,591.0	66,426.3
1992	25,979.5	6,815.8	10,455.4	5,947.5	9,349.7	2,255.4	9,304.5	70,107.8
1993	26,109.2	6,841.1	10,506.2	6,119.2	9,807.9	2,101.1	10,300.4	71,785.0
1994	26,089.9	6,957.8	10,681.8	6,297.5	10,156.0	1,961.7	10,882.8	73,027.5
1995	25,944.1	7,252.5	10,799.8	6,467.7	10,560.2	1,901.9	11,380.3	74,306.4
1996	25,714.6	7,503.9	10,867.5	6,619.7	10,845.2	1,850.0	11,823.7	75,224.7
(Annual percentage change / Variation annuelle en pourcentage)								
1975	--	--	--	--	--	--	--	--
1976	16.29	21.63	12.56	16.53	11.14	1.57	15.90	15.03
1977	6.71	15.21	10.30	17.75	9.06	3.56	15.94	9.91
1978	8.82	17.41	12.36	15.08	9.70	19.10	5.10	10.78
1979	9.72	17.25	11.31	15.50	14.42	17.00	13.33	12.35
1980	14.98	16.90	15.07	15.98	13.39	33.99	17.32	16.15
1981	18.48	13.62	16.34	14.56	22.63	14.45	23.75	18.03
1982	18.81	15.74	15.58	14.89	13.85	21.58	14.69	16.88
1983	9.94	10.75	14.29	8.81	11.75	2.92	11.19	10.53
1984	5.97	5.18	9.36	8.36	12.07	3.37	12.57	7.76
1985	5.84	4.91	9.43	12.31	14.32	17.82	11.47	8.79
1986	8.09	-0.22	10.40	9.89	15.69	10.18	9.36	8.80
1987	7.66	5.95	9.99	9.03	11.05	1.59	6.74	7.97
1988	7.09	9.54	8.27	8.83	12.07	-1.58	14.46	8.68
1989	9.18	8.54	7.16	10.24	12.66	8.72	16.42	10.16
1990	6.71	11.78	8.71	9.20	10.72	1.57	11.48	8.58
1991	7.77	10.24	10.37	8.99	10.70	-4.58	9.16	8.59
1992	4.05	8.24	2.40	4.85	9.34	5.66	8.31	5.54
1993	0.50	0.37	0.49	2.89	4.90	-6.85	10.70	2.39
1994	-0.07	1.71	1.67	2.91	3.55	-6.63	5.65	1.73
1995	-0.56	4.24	1.10	2.70	3.98	-3.05	4.57	1.75
1996	-0.88	3.47	0.63	2.35	2.70	-2.73	3.90	1.24

Source: Health Canada and CIHI / Santé Canada and ICIS

* Note: The drug category now groups together all drug expenditures, including those in hospitals.

/ La catégorie médicaments regroupe maintenant toutes les dépenses en médicaments, y compris celles des hôpitaux.

Table 1B
Tableau 1B

Total Health Expenditures by Category of Expenditure *
Dépenses totales de santé par catégorie de dépenses *

Canada, 1975-1996

Year	Hospitals	Other Institutions	Physicians	Other Professionals	Drugs*	Capital	Other Expenditures	Total
Année	Hôpitaux	Autres établissements	Médecins	Autres professionnels	Médicaments*	Immobilisations	Autres dépenses	Total
(\$ per capita / \$ par habitant)								
1975	232.53	48.34	79.20	38.75	53.73	23.13	52.60	528.28
1976	266.86	58.02	87.98	44.57	58.94	23.19	60.16	599.71
1977	281.43	66.06	95.90	51.86	63.52	23.73	68.93	651.44
1978	303.19	76.78	106.68	59.09	68.99	27.98	71.72	714.44
1979	329.36	89.14	117.57	67.57	78.16	32.41	80.48	794.69
1980	373.84	102.86	133.54	77.36	87.48	42.87	93.20	911.15
1981	437.47	115.43	153.46	87.52	105.96	48.46	113.91	1,062.21
1982	513.53	132.00	175.24	99.35	119.19	58.21	129.08	1,226.61
1983	558.91	144.73	198.29	107.02	131.86	59.32	142.09	1,342.23
1984	586.63	150.77	214.78	114.87	146.37	60.73	158.42	1,432.58
1985	615.15	156.71	232.86	127.81	165.79	70.89	174.95	1,544.16
1986	658.26	154.81	254.49	139.05	189.89	77.32	189.41	1,663.23
1987	699.44	161.88	276.28	149.64	208.12	77.53	199.53	1,772.42
1988	739.45	175.04	295.28	160.76	230.25	75.33	225.46	1,901.57
1989	793.04	186.62	310.81	174.09	254.81	80.45	257.85	2,057.67
1990	833.71	205.52	332.89	187.28	277.96	80.50	283.20	2,201.06
1991	887.95	223.92	363.11	201.72	304.10	75.91	305.51	2,362.24
1992	910.21	238.80	366.31	208.38	327.57	79.02	325.99	2,456.29
1993	901.97	236.33	362.95	211.39	338.83	72.58	355.84	2,479.90
1994	891.79	237.83	365.12	215.26	347.15	67.05	371.99	2,496.19
1995	876.04	244.89	364.67	218.39	356.58	64.22	384.27	2,509.05
1996	858.19	250.43	362.69	220.93	361.95	61.74	394.60	2,510.53
(Annual percentage change / Variation annuelle en pourcentage)								
1975	--	--	--	--	--	--	--	--
1976	14.77	20.03	11.09	15.00	9.68	0.24	14.38	13.52
1977	5.46	13.85	9.01	16.37	7.78	2.34	14.58	8.63
1978	7.73	16.24	11.23	13.93	8.60	17.91	4.05	9.67
1979	8.63	16.09	10.21	14.36	13.29	15.84	12.20	11.23
1980	13.50	15.39	13.59	14.49	11.93	32.27	15.81	14.66
1981	17.02	12.22	14.91	13.14	21.12	13.04	22.22	16.58
1982	17.38	14.36	14.20	13.52	12.49	20.12	13.31	15.48
1983	8.84	9.65	13.15	7.72	10.63	1.90	10.08	9.43
1984	4.96	4.17	8.32	7.33	11.00	2.38	11.50	6.73
1985	4.86	3.94	8.41	11.27	13.27	16.73	10.43	7.79
1986	7.01	-1.21	9.29	8.79	14.54	9.08	8.26	7.71
1987	6.26	4.57	8.56	7.61	9.60	0.27	5.34	6.56
1988	5.72	8.13	6.88	7.43	10.63	-2.84	12.99	7.29
1989	7.25	6.62	5.26	8.29	10.66	6.80	14.36	8.21
1990	5.13	10.13	7.10	7.58	9.09	0.07	9.83	6.97
1991	6.51	8.95	9.08	7.71	9.40	-5.70	7.88	7.32
1992	2.51	6.64	0.88	3.30	7.72	4.10	6.70	3.98
1993	-0.91	-1.03	-0.92	1.45	3.44	-8.15	9.16	0.96
1994	-1.13	0.63	0.60	1.83	2.46	-7.62	4.54	0.66
1995	-1.77	2.97	-0.12	1.46	2.72	-4.23	3.30	0.52
1996	-2.04	2.26	-0.54	1.16	1.50	-3.86	2.69	0.06

Source: Health Canada and CIHI / Santé Canada and ICIS

* Note: The drug category now groups together all drug expenditures, including those in hospitals.

/ La catégorie médicaments regroupe maintenant toutes les dépenses en médicaments, y compris celles des hôpitaux.

Table 1C
Tableau 1C

Total Health Expenditures by Category of Expenditure *
Dépenses totales de santé par catégorie de dépenses *
Canada, 1975-1996

Year	Hospitals	Other Institutions	Physicians	Other Professionals	Drugs*	Capital	Other Expenditures	Total
Année	Hôpitaux	Autres établissements	Médecins	Autres professionnels	Médicaments*	Immobilisations	Autres dépenses	Total
(Percentage distribution / Répartition en pourcentage)								
1975	44.0	9.1	15.0	7.3	10.2	4.4	10.0	100.0
1976	44.5	9.7	14.7	7.4	9.8	3.9	10.0	100.0
1977	43.2	10.1	14.7	8.0	9.8	3.6	10.6	100.0
1978	42.4	10.7	14.9	8.3	9.7	3.9	10.0	100.0
1979	41.4	11.2	14.8	8.5	9.8	4.1	10.1	100.0
1980	41.0	11.3	14.7	8.5	9.6	4.7	10.2	100.0
1981	41.2	10.9	14.4	8.2	10.0	4.6	10.7	100.0
1982	41.9	10.8	14.3	8.1	9.7	4.7	10.5	100.0
1983	41.6	10.8	14.8	8.0	9.8	4.4	10.6	100.0
1984	40.9	10.5	15.0	8.0	10.2	4.2	11.1	100.0
1985	39.8	10.1	15.1	8.3	10.7	4.6	11.3	100.0
1986	39.6	9.3	15.3	8.4	11.4	4.6	11.4	100.0
1987	39.5	9.1	15.6	8.4	11.7	4.4	11.3	100.0
1988	38.9	9.2	15.5	8.5	12.1	4.0	11.9	100.0
1989	38.5	9.1	15.1	8.5	12.4	3.9	12.5	100.0
1990	37.9	9.3	15.1	8.5	12.6	3.7	12.9	100.0
1991	37.6	9.5	15.4	8.5	12.9	3.2	12.9	100.0
1992	37.1	9.7	14.9	8.5	13.3	3.2	13.3	100.0
1993	36.4	9.5	14.6	8.5	13.7	2.9	14.3	100.0
1994	35.7	9.5	14.6	8.6	13.9	2.7	14.9	100.0
1995	34.9	9.8	14.5	8.7	14.2	2.6	15.3	100.0
1996	34.2	10.0	14.4	8.8	14.4	2.5	15.7	100.0

Source: Health Canada and CIHI / Santé Canada and ICIS

* Note: The drug category now groups together all drug expenditures, including those in hospitals.

/ La catégorie médicaments regroupe maintenant toutes les dépenses en médicaments, y compris celles des hôpitaux.

Table 2A
Tableau 2A

**Total Drug Expenditures (prescribed, non-prescribed and personal health supplies),
Dépenses totales en médicaments (prescrits, non-prescrits
et produits d'hygiène personnelle),
Canada, 1975-1996**

Year	Drug Expenditures Previously Reported in the Drug Category					Drug Expenditures Previously Reported in Other Categories				Grand Total	As a % of Total Health Expenditures
	Provincial Gov'ts	Federal Direct	Workers' Comp.	Private Sector	[Total]	Hospitals	Other Institu- tions	Physicians and Other Professional	Public Health		
Année	Dépenses en médicaments déclarées auparavant dans la catégorie médicaments					Dépenses en médicaments déclarées auparavant dans les autres catégories				Grand Total	En % des dépenses totales de santé
	Gouv. provinciaux	Fédérales directes	Accidents du travail	Secteur privé	[Total]	Hôpitaux	Autres établisse- ments	Médecins et autres profes- sionnels	Santé publique		
(\$' 000 000)											
1975	142.0	13.5	2.0	918.7	[1,076.2]	117.5	3.4	4.5	46.4	1,248.1	10.2
1976	196.2	15.7	2.3	983.6	[1,197.9]	132.7	4.5	5.2	47.0	1,387.3	9.8
1977	243.4	17.8	2.5	1,045.9	[1,309.5]	144.6	5.4	6.0	47.6	1,513.1	9.8
1978	301.4	20.3	2.8	1,117.6	[1,442.0]	156.6	6.4	6.8	48.1	1,660.0	9.7
1979	359.2	21.1	3.1	1,272.0	[1,655.3]	180.3	7.5	7.8	48.6	1,899.4	9.8
1980	431.1	26.7	4.2	1,419.6	[1,881.5]	205.3	8.8	9.0	49.2	2,153.8	9.6
1981	527.2	30.4	6.1	1,765.2	[2,328.9]	241.4	10.7	10.4	49.8	2,641.2	10.0
1982	636.1	36.8	7.5	1,955.5	[2,635.9]	296.4	12.3	12.0	50.4	3,006.9	9.7
1983	761.2	43.8	9.0	2,135.6	[2,949.6]	332.7	13.4	13.3	50.9	3,360.0	9.8
1984	879.2	49.6	10.8	2,371.3	[3,310.8]	374.7	14.0	14.4	51.4	3,765.4	10.2
1985	1,039.2	58.0	12.6	2,683.6	[3,793.4]	428.4	14.7	16.0	51.9	4,304.4	10.7
1986	1,229.2	63.3	15.2	3,097.9	[4,405.6]	490.6	12.9	17.6	52.4	4,979.2	11.4
1987	1,391.9	68.2	17.8	3,422.2	[4,900.1]	543.6	12.8	19.3	53.1	5,528.8	11.7
1988	1,579.6	92.0	20.8	3,816.8	[5,509.2]	599.6	14.1	21.0	52.5	6,196.3	12.1
1989	1,825.1	108.2	22.9	4,265.8	[6,222.0]	665.7	15.3	22.9	54.6	6,980.4	12.4
1990	2,107.0	126.5	27.5	4,649.8	[6,910.8]	719.2	16.9	24.9	57.2	7,729.0	12.6
1991	2,412.4	135.8	33.2	5,095.0	[7,676.5]	766.9	21.8	27.3	59.1	8,551.6	12.9
1992	2,681.8	147.4	38.0	5,589.1	[8,456.3]	780.4	22.5	28.4	62.3	9,349.8	13.3
1993	2,772.7	154.6	40.2	5,933.2	[8,900.7]	793.5	22.8	28.9	62.2	9,808.1	13.7
1994*	2,800.8	159.4	39.9	6,250.1	[9,250.1]	786.9	23.6	29.6	65.9	10,156.1	13.9
1995*	2,863.1	163.8	40.3	6,595.9	[9,663.1]	776.0	24.4	30.3	66.4	10,560.2	14.2
1996*	2,755.9	159.1	40.8	6,985.4	[9,941.2]	765.4	25.2	30.8	82.6	10,845.2	14.4
(annual percentage change / variation annuelle en pourcentage)											
1975	--	--	--	--	--	--	--	--	--	--	--
1976	38.2	16.6	19.4	7.1	11.3	12.9	30.0	14.9	1.3	11.2	--
1977	24.0	13.1	7.5	6.3	9.3	9.0	21.0	14.8	1.2	9.1	--
1978	23.9	14.0	10.6	6.9	10.1	8.3	18.8	14.0	1.0	9.7	--
1979	19.2	3.9	10.7	13.8	14.8	15.1	16.8	13.9	1.0	14.4	--
1980	20.0	26.6	35.2	11.6	13.7	13.9	17.2	15.6	1.3	13.4	--
1981	22.3	13.8	46.8	24.3	23.8	17.6	21.5	15.2	1.2	22.6	--
1982	20.7	21.1	23.5	10.8	13.2	22.7	15.2	15.1	1.2	13.8	--
1983	19.7	19.1	20.1	9.2	11.9	12.3	9.3	10.8	1.0	11.7	--
1984	15.5	13.3	19.0	11.0	12.2	12.6	4.5	8.7	1.0	12.1	--
1985	18.2	16.9	17.2	13.2	14.6	14.3	4.6	11.2	0.9	14.3	--
1986	18.3	9.2	20.9	15.4	16.1	14.5	-12.3	10.1	1.0	15.7	--
1987	13.2	7.7	16.9	10.5	11.2	10.8	-1.0	9.4	1.3	11.0	--
1988	13.5	34.9	16.7	11.5	12.4	10.3	10.3	8.6	-1.1	12.1	--
1989	15.5	17.6	10.0	11.8	12.9	11.0	8.7	9.1	4.0	12.7	--
1990	15.4	17.0	20.0	9.0	11.1	8.0	10.5	9.0	4.7	10.7	--
1991	14.5	7.4	21.0	9.6	11.1	6.6	29.0	9.5	3.4	10.6	--
1992	11.2	8.5	14.4	9.7	10.2	1.8	3.4	3.9	5.3	9.3	--
1993	3.4	4.9	5.8	6.2	5.3	1.7	1.0	2.0	-0.1	4.9	--
1994*	1.0	3.1	-0.9	5.3	3.9	-0.8	3.5	2.5	6.1	3.5	--
1995*	2.2	2.8	1.0	5.5	4.5	-1.4	3.5	2.1	0.8	4.0	--
1996*	-3.7	-2.9	1.2	5.9	2.9	-1.4	3.4	1.7	24.4	2.7	--

Source: Health Canada and CIHI / Santé Canada and ICIS

* Estimated by Health Canada. / Estimé par Santé Canada.

Table 2B
Tableau 2B

**Total Drug Expenditures (prescribed, non-prescribed and personal health supplies),
Dépenses totales en médicaments (prescrits, non-prescrits
et produits d'hygiène personnelle),
Canada, 1975-1996**

Year	Drug Expenditures Previously Reported in the Drug Category					Drug Expenditures Previously Reported in Other Categories				Grand Total	As a % of Total Health Expenditures
	Provincial Gov'ts	Federal Direct	Workers' Comp.	Private Sector	[Total]	Hospitals	Other Institu- tions	Physicians and Other Professional	Public Health		
Année	Dépenses en médicaments déclarées auparavant dans la catégorie médicaments					Dépenses en médicaments déclarées auparavant dans les autres catégories				Grand Total	En % des dépenses totales de santé
	Gouv. provinciaux	Fédérales directes	Accidents du travail	Secteur privé	[Total]	Hôpitaux	Autres établis- sements	Médecins et autres profes- sionnels	Santé publique		
(\$ per capita / \$ par habitant)											
1975	6.12	0.58	0.08	39.59	[46.37]	5.06	0.15	0.20	2.00	53.78	--
1976	8.34	0.67	0.10	41.82	[50.94]	5.64	0.19	0.22	2.00	58.99	--
1977	10.23	0.75	0.11	43.95	[55.03]	6.07	0.23	0.25	2.00	63.58	--
1978	12.54	0.84	0.12	46.49	[59.99]	6.52	0.27	0.28	2.00	69.06	--
1979	14.80	0.87	0.13	52.40	[68.18]	7.43	0.31	0.32	2.00	78.24	--
1980	17.53	1.08	0.17	57.72	[76.51]	8.35	0.36	0.37	2.00	87.58	--
1981	21.17	1.22	0.24	70.89	[93.53]	9.70	0.43	0.42	2.00	106.07	--
1982	25.24	1.46	0.30	77.59	[104.59]	11.76	0.49	0.47	2.00	119.31	--
1983	29.90	1.72	0.36	83.89	[115.87]	13.07	0.53	0.52	2.00	131.99	--
1984	34.21	1.93	0.42	92.26	[128.82]	14.58	0.55	0.56	2.00	146.50	--
1985	40.06	2.23	0.49	103.45	[146.23]	16.51	0.57	0.62	2.00	165.93	--
1986	46.91	2.42	0.58	118.22	[168.13]	18.72	0.49	0.67	2.00	190.02	--
1987	52.42	2.57	0.67	128.90	[184.56]	20.47	0.48	0.73	2.00	208.24	--
1988	58.73	3.42	0.77	141.91	[204.84]	22.29	0.52	0.78	1.95	230.39	--
1989	66.66	3.95	0.84	155.80	[227.25]	24.31	0.56	0.83	1.99	254.95	--
1990	75.82	4.55	0.99	167.32	[248.67]	25.88	0.61	0.90	2.06	278.12	--
1991	85.79	4.83	1.18	181.19	[272.99]	27.27	0.78	0.97	2.10	304.11	--
1992	93.96	5.17	1.33	195.82	[296.27]	27.34	0.79	0.99	2.18	327.58	--
1993	95.79	5.34	1.39	204.97	[307.49]	27.41	0.79	1.00	2.15	338.83	--
1994*	95.74	5.45	1.36	213.64	[316.18]	26.90	0.81	1.01	2.25	347.15	--
1995*	96.68	5.53	1.36	222.72	[326.29]	26.20	0.82	1.02	2.24	356.58	--
1996*	91.98	5.31	1.36	233.13	[331.77]	25.54	0.84	1.03	2.76	361.95	--
(annual percentage change / variation annuelle en pourcentage)											
1975	--	--	--	--	--	--	--	--	--	--	--
1976	36.4	15.1	17.9	5.7	9.8	11.4	28.2	13.4	0.0	9.7	--
1977	22.6	11.7	6.2	5.1	8.0	7.7	19.6	13.5	0.0	7.8	--
1978	22.6	12.9	9.5	5.8	9.0	7.3	17.6	12.9	0.0	8.6	--
1979	18.0	2.9	9.6	12.7	13.7	14.0	15.6	12.8	0.0	13.3	--
1980	18.5	25.0	33.4	10.2	12.2	12.5	15.7	14.2	0.0	11.9	--
1981	20.8	12.4	44.9	22.8	22.3	16.1	20.1	13.8	0.0	21.1	--
1982	19.2	19.6	22.0	9.5	11.8	21.3	13.8	13.8	0.0	12.5	--
1983	18.5	17.9	18.9	8.1	10.8	11.1	8.2	9.7	0.0	10.6	--
1984	14.4	12.2	17.9	10.0	11.2	11.5	3.5	7.7	0.0	11.0	--
1985	17.1	15.9	16.1	12.1	13.5	13.3	3.7	10.2	0.0	13.3	--
1986	17.1	8.1	19.7	14.3	15.0	13.4	-13.2	9.0	0.0	14.5	--
1987	11.8	6.3	15.4	9.0	9.8	9.4	-2.2	8.0	0.0	9.6	--
1988	12.0	33.1	15.2	10.1	11.0	8.9	8.9	7.2	-2.4	10.6	--
1989	13.5	15.5	8.1	9.8	10.9	9.1	6.8	7.1	2.1	10.7	--
1990	13.7	15.2	18.3	7.4	9.4	6.4	8.8	7.4	3.2	9.1	--
1991	13.2	6.1	19.6	8.3	9.8	5.4	27.5	8.2	2.2	9.3	--
1992	9.5	6.9	12.7	8.1	8.5	0.2	1.8	2.4	3.8	7.7	--
1993	1.9	3.4	4.3	4.7	3.8	0.3	-0.4	0.6	-1.5	3.4	--
1994*	-0.1	2.0	-1.9	4.2	2.8	-1.9	2.5	1.4	5.0	2.5	--
1995*	1.0	1.6	-0.2	4.3	3.2	-2.6	2.3	0.9	-0.5	2.7	--
1996*	-4.9	-4.0	0.0	4.7	1.7	-2.5	2.2	0.6	22.9	1.5	--

Source: Health Canada and CIHI / Santé Canada and ICIS

* Estimated by Health Canada. / Estimé par Santé Canada.

Table 2C
Tableau 2C

**Total Drug Expenditures (prescribed, non-prescribed and personal health supplies),
Dépenses totales en médicaments (prescrits, non-prescrits
et produits d'hygiène personnelle),
Canada, 1975-1996**

Year	Drug Expenditures Previously Reported in the Drug Category					Drug Expenditures Previously Reported in Other Categories				Grand Total	As a % of Total Health Expenditures
	Provincial Gov'ts	Federal Direct	Workers' Comp.	Private Sector	[Total]	Hospitals	Other Institu- tions	Physicians and Other Professional	Public Health		
Année	Dépenses en médicaments déclarées auparavant dans la catégorie médicaments					Dépenses en médicaments déclarées auparavant dans les autres catégories				Grand Total	En % des dépenses totales de santé
	Gouv. provinciaux	Fédérales directes	Accidents du travail	Secteur privé	[Total]	Hôpitaux	Autres établissements	Médecins et autres profes- sionnels	Santé publique		
(percentage distribution / répartition en pourcentage)											
1975	11.4	1.1	0.2	73.6	[86.2]	9.4	0.3	0.4	3.7	100.0	--
1976	14.1	1.1	0.2	70.9	[86.3]	9.6	0.3	0.4	3.4	100.0	--
1977	16.1	1.2	0.2	69.1	[86.5]	9.6	0.4	0.4	3.1	100.0	--
1978	18.2	1.2	0.2	67.3	[86.9]	9.4	0.4	0.4	2.9	100.0	--
1979	18.9	1.1	0.2	67.0	[87.1]	9.5	0.4	0.4	2.6	100.0	--
1980	20.0	1.2	0.2	65.9	[87.4]	9.5	0.4	0.4	2.3	100.0	--
1981	20.0	1.1	0.2	66.8	[88.2]	9.1	0.4	0.4	1.9	100.0	--
1982	21.2	1.2	0.3	65.0	[87.7]	9.9	0.4	0.4	1.7	100.0	--
1983	22.7	1.3	0.3	63.6	[87.8]	9.9	0.4	0.4	1.5	100.0	--
1984	23.3	1.3	0.3	63.0	[87.9]	10.0	0.4	0.4	1.4	100.0	--
1985	24.1	1.3	0.3	62.3	[88.1]	10.0	0.3	0.4	1.2	100.0	--
1986	24.7	1.3	0.3	62.2	[88.5]	9.9	0.3	0.4	1.1	100.0	--
1987	25.2	1.2	0.3	61.9	[88.6]	9.8	0.2	0.3	1.0	100.0	--
1988	25.5	1.5	0.3	61.6	[88.9]	9.7	0.2	0.3	0.8	100.0	--
1989	26.1	1.5	0.3	61.1	[89.1]	9.5	0.2	0.3	0.8	100.0	--
1990	27.3	1.6	0.4	60.2	[89.4]	9.3	0.2	0.3	0.7	100.0	--
1991	28.2	1.6	0.4	59.6	[89.8]	9.0	0.3	0.3	0.7	100.0	--
1992	28.7	1.6	0.4	59.8	[90.4]	8.3	0.2	0.3	0.7	100.0	--
1993	28.3	1.6	0.4	60.5	[90.7]	8.1	0.2	0.3	0.6	100.0	--
1994*	27.6	1.6	0.4	61.5	[91.1]	7.7	0.2	0.3	0.6	100.0	--
1995*	27.1	1.6	0.4	62.5	[91.5]	7.3	0.2	0.3	0.6	100.0	--
1996*	25.4	1.5	0.4	64.4	[91.7]	7.1	0.2	0.3	0.8	100.0	--

Source: Health Canada and CIHI / Santé Canada and ICIS

* Estimated by Health Canada. / Estimé par Santé Canada.

Table 3A
Tableau 3A

Drug Expenditures by Type of Drug and Sector of Finance,
Dépenses en médicaments selon le genre de médicaments et le secteur de financement,
Canada, 1975-1996

Year	Public Sector				Private Sector				Public and Private Sectors			
	Prescribed	Non-prescribed (OTC)	Personal Health Supplies	Total	Prescribed	Non-prescribed (OTC)	Personal Health Supplies	Total	Prescribed	Non-prescribed (OTC)	Personal Health Supplies	Total
Année	Secteur public				Secteur privé				Secteurs public et privé			
	Avec prescription	Sans prescription (au comptoir)	Produits d'hygiène personnelle	Total	Avec prescription	Sans prescription (au comptoir)	Produits d'hygiène personnelle	Total	Avec prescription	Sans prescription (au comptoir)	Produits d'hygiène personnelle	Total
(\$ '000 000)												
1975	304.4	24.0	0.0	328.4	613.1	162.8	142.8	918.7	917.5	186.8	142.8	1,247.1
1976	375.3	27.2	0.0	402.5	667.6	168.3	147.7	983.6	1,042.8	195.5	147.7	1,386.1
1977	436.0	29.7	0.0	465.7	721.4	172.8	151.7	1,045.9	1,157.4	202.5	151.7	1,511.6
1978	508.4	32.3	0.0	540.7	724.7	209.2	183.6	1,117.6	1,233.2	241.5	183.6	1,658.2
1979	588.3	37.2	0.0	625.4	776.5	263.9	231.6	1,272.0	1,364.7	301.1	231.6	1,897.4
1980	686.5	42.4	0.0	728.9	833.3	315.3	274.0	1,422.6	1,519.9	357.6	274.0	2,151.5
1981	823.3	49.9	0.0	873.2	1,110.2	348.8	306.1	1,765.2	1,933.6	398.7	306.1	2,638.4
1982	987.3	61.1	0.0	1,048.4	1,240.5	380.8	334.2	1,955.5	2,227.8	441.9	334.2	3,003.9
1983	1,152.6	68.6	0.0	1,221.2	1,289.8	450.5	395.4	2,135.6	2,442.3	519.1	395.4	3,356.8
1984	1,313.6	77.1	0.0	1,390.7	1,312.7	563.8	494.8	2,371.3	2,626.3	640.9	494.8	3,762.0
1985	1,529.4	87.9	0.0	1,617.3	1,447.7	658.2	577.7	2,683.6	2,977.1	746.1	577.7	4,300.9
1986	1,777.9	100.0	0.0	1,878.0	1,698.8	745.1	653.9	3,097.9	3,476.8	845.1	653.9	4,975.8
1987	1,992.8	110.6	0.0	2,103.4	1,800.4	863.7	758.0	3,422.2	3,793.2	974.3	758.0	5,525.5
1988	2,253.9	122.0	0.0	2,375.9	2,031.8	950.6	834.3	3,816.8	4,285.7	1,072.6	834.3	6,192.6
1989	2,575.3	135.4	0.0	2,710.7	2,290.1	1,052.1	923.5	4,265.8	4,865.5	1,187.5	923.5	6,976.5
1990	2,928.5	146.4	0.0	3,074.9	2,591.1	1,096.1	962.6	4,649.8	5,519.6	1,242.5	962.6	7,724.7
1991	3,298.6	157.7	0.0	3,456.3	2,858.4	1,191.2	1,045.5	5,095.0	6,157.0	1,348.9	1,045.5	8,551.4
1992	3,600.1	160.5	0.0	3,760.6	3,187.4	1,278.9	1,122.8	5,589.1	6,787.5	1,439.4	1,122.8	9,349.7
1993	3,711.5	163.2	0.0	3,874.7	3,373.2	1,359.3	1,200.7	5,933.2	7,084.7	1,522.5	1,200.7	9,807.9
1994*	3,743.9	162.1	0.0	3,906.0	3,552.8	1,432.2	1,265.1	6,250.1	7,296.7	1,594.2	1,265.1	10,156.0
1995*	3,804.2	160.1	0.0	3,964.3	3,748.7	1,511.7	1,335.5	6,595.9	7,552.9	1,671.8	1,335.5	10,560.2
1996*	3,701.7	158.1	0.0	3,859.8	3,969.8	1,601.0	1,414.6	6,985.4	7,671.5	1,759.1	1,414.6	10,845.2
(annual percentage change / variation annuelle en pourcentage)												
1975	--	--	--	--	--	--	--	--	--	--	--	--
1976	23.3	13.3	--	22.6	8.9	3.4	3.4	7.1	13.7	4.7	3.4	11.1
1977	16.2	9.3	--	15.7	8.1	2.7	2.7	6.3	11.0	3.6	2.7	9.1
1978	16.6	8.6	--	16.1	0.5	21.1	21.1	6.9	6.5	19.2	21.1	9.7
1979	15.7	15.2	--	15.7	7.1	26.2	26.2	13.8	10.7	24.7	26.2	14.4
1980	16.7	14.0	--	16.5	7.3	19.5	18.3	11.8	11.4	18.8	18.3	13.4
1981	19.9	17.7	--	19.8	33.2	10.6	11.7	24.1	27.2	11.5	11.7	22.6
1982	19.9	22.6	--	20.1	11.7	9.2	9.2	10.8	15.2	10.8	9.2	13.9
1983	16.7	12.2	--	16.5	4.0	18.3	18.3	9.2	9.6	17.5	18.3	11.7
1984	14.0	12.4	--	13.9	1.8	25.2	25.2	11.0	7.5	23.5	25.2	12.1
1985	16.4	14.1	--	16.3	10.3	16.7	16.7	13.2	13.4	16.4	16.7	14.3
1986	16.3	13.8	--	16.1	17.3	13.2	13.2	15.4	16.8	13.3	13.2	15.7
1987	12.1	10.6	--	12.0	6.0	15.9	15.9	10.5	9.1	15.3	15.9	11.0
1988	13.1	10.3	--	13.0	12.9	10.1	10.1	11.5	13.0	10.1	10.1	12.1
1989	14.3	11.0	--	14.1	12.7	10.7	10.7	11.8	13.5	10.7	10.7	12.7
1990	13.7	8.1	--	13.4	13.1	4.2	4.2	9.0	13.4	4.6	4.2	10.7
1991	12.6	7.7	--	12.4	10.3	8.7	8.6	9.6	11.5	8.6	8.6	10.7
1992	9.1	1.8	--	8.8	11.5	7.4	7.4	9.7	10.2	6.7	7.4	9.3
1993	3.1	1.7	--	3.0	5.8	6.3	6.9	6.2	4.4	5.8	6.9	4.9
1994*	0.9	-0.7	--	0.8	5.3	5.4	5.4	5.3	3.0	4.7	5.4	3.5
1995*	1.6	-1.2	--	1.5	5.5	5.6	5.6	5.5	3.5	4.9	5.6	4.0
1996*	-2.7	-1.2	--	-2.6	5.9	5.9	5.9	5.9	1.6	5.2	5.9	2.7

Source: Health Canada and CIHI / Santé Canada and ICIS
* Estimated by Health Canada. / Estimé par Santé Canada.

Table 3B
Tableau 3B

Drug Expenditures by Type of Drug and Sector of Finance,
Dépenses en médicaments selon le genre de médicaments et le secteur de financement,
Canada, 1975-1996

Year	Public Sector				Private Sector				Public and Private Sectors			
	Prescribed	Non-prescribed (OTC)	Health Supplies	Total	Prescribed	Non-prescribed (OTC)	Health Supplies	Total	Prescribed	Non-prescribed (OTC)	Health Supplies	Total
Année	Secteur public				Secteur privé				Secteurs public et privé			
	Avec prescription	Sans prescription (au comptoir)	Produits d'hygiène personnelle	Total	Avec prescription	Sans prescription (au comptoir)	Produits d'hygiène personnelle	Total	Avec prescription	Sans prescription (au comptoir)	Produits d'hygiène personnelle	Total
(\$ per capita / \$ par habitant)												
1975	13.11	1.03	--	14.15	26.42	7.01	6.15	39.59	39.53	8.05	6.15	53.73
1976	15.96	1.16	--	17.11	28.39	7.16	6.28	41.82	44.34	8.31	6.28	58.94
1977	18.32	1.25	--	19.57	30.31	7.26	6.37	43.95	48.64	8.51	6.37	63.52
1978	21.15	1.34	--	22.49	30.15	8.70	7.64	46.49	51.30	10.05	7.64	68.99
1979	24.23	1.53	--	25.76	31.98	10.87	9.54	52.40	56.22	12.40	9.54	78.16
1980	27.92	1.72	--	29.64	33.88	12.82	11.14	57.85	61.80	14.54	11.14	87.48
1981	33.07	2.00	--	35.07	44.59	14.01	12.29	70.89	77.65	16.01	12.29	105.96
1982	39.17	2.43	--	41.60	49.22	15.11	13.26	77.59	88.40	17.54	13.26	119.19
1983	45.28	2.69	--	47.97	50.67	17.70	15.53	83.89	95.94	20.39	15.53	131.86
1984	51.11	3.00	--	54.11	51.07	21.94	19.25	92.26	102.18	24.94	19.25	146.37
1985	58.95	3.39	--	62.34	55.81	25.37	22.27	103.45	114.76	28.76	22.27	165.79
1986	67.85	3.82	--	71.67	64.83	28.43	24.96	118.22	132.68	32.25	24.96	189.89
1987	75.06	4.17	--	79.22	67.81	32.53	28.55	128.90	142.87	36.70	28.55	208.12
1988	83.80	4.54	--	88.34	75.55	35.34	31.02	141.91	159.35	39.88	31.02	230.25
1989	94.06	4.95	--	99.01	83.65	38.43	33.73	155.80	177.71	43.37	33.73	254.81
1990	105.38	5.27	--	110.64	93.24	39.44	34.64	167.32	198.62	44.71	34.64	277.96
1991	117.31	5.61	--	122.91	101.65	42.36	37.18	181.19	218.96	47.97	37.18	304.10
1992	126.13	5.62	--	131.76	111.67	44.81	39.34	195.82	237.81	50.43	39.34	327.57
1993	128.22	5.64	--	133.86	116.53	46.96	41.48	204.97	244.75	52.60	41.48	338.83
1994*	127.97	5.54	--	133.51	121.44	48.95	43.24	213.64	249.41	54.49	43.24	347.15
1995*	128.45	5.41	--	133.86	126.58	51.05	45.10	222.72	255.03	56.45	45.10	356.58
1996*	123.54	5.28	--	128.82	132.49	53.43	47.21	233.13	256.03	58.71	47.21	361.95
(annual percentage change / variation annuelle en pourcentage)												
1975	--	--	--	--	--	--	--	--	--	--	--	--
1976	21.7	11.8	--	21.0	7.5	2.1	2.1	5.7	12.2	3.3	2.1	9.7
1977	14.8	8.0	--	14.4	6.8	1.5	1.5	5.1	9.7	2.4	1.5	7.8
1978	15.4	7.5	--	14.9	-0.5	19.8	19.8	5.8	5.5	18.0	19.8	8.6
1979	14.6	14.0	--	14.5	6.1	24.9	24.9	12.7	9.6	23.4	24.9	13.3
1980	15.2	12.6	--	15.0	5.9	17.9	16.8	10.4	9.9	17.3	16.8	11.9
1981	18.5	16.3	--	18.3	31.6	9.3	10.3	22.6	25.7	10.1	10.3	21.1
1982	18.5	21.1	--	18.6	10.4	7.9	7.9	9.5	13.8	9.5	7.9	12.5
1983	15.6	11.1	--	15.3	2.9	17.1	17.1	8.1	8.5	16.3	17.1	10.6
1984	12.9	11.3	--	12.8	0.8	24.0	24.0	10.0	6.5	22.3	24.0	11.0
1985	15.3	13.0	--	15.2	9.3	15.7	15.7	12.1	12.3	15.3	15.7	13.3
1986	15.1	12.7	--	15.0	16.2	12.1	12.1	14.3	15.6	12.1	12.1	14.5
1987	10.6	9.1	--	10.5	4.6	14.4	14.4	9.0	7.7	13.8	14.4	9.6
1988	11.7	8.9	--	11.5	11.4	8.6	8.7	10.1	11.5	8.7	8.7	10.6
1989	12.2	9.0	--	12.1	10.7	8.7	8.7	9.8	11.5	8.8	8.7	10.7
1990	12.0	6.5	--	11.8	11.5	2.6	2.7	7.4	11.8	3.1	2.7	9.1
1991	11.3	6.5	--	11.1	9.0	7.4	7.3	8.3	10.2	7.3	7.3	9.4
1992	7.5	0.3	--	7.2	9.9	5.8	5.8	8.1	8.6	5.1	5.8	7.7
1993	1.7	0.2	--	1.6	4.4	4.8	5.4	4.7	2.9	4.3	5.4	3.4
1994*	-0.2	-1.8	--	-0.3	4.2	4.2	4.3	4.2	1.9	3.6	4.3	2.5
1995*	0.4	-2.4	--	0.3	4.2	4.3	4.3	4.3	2.3	3.6	4.3	2.7
1996*	-3.8	-2.4	--	-3.8	4.7	4.7	4.7	4.7	0.4	4.0	4.7	1.5

Source: Health Canada and CIHI / Santé Canada and ICIS
* Estimated by Health Canada. / Estimé par Santé Canada.

Table 3C
Tableau 3C

Drug Expenditures by Type of Drug and Sector of Finance,
Dépenses en médicaments selon le genre de médicaments et le secteur de financement,

Canada, 1975-1996

Year	Public Sector				Private Sector				Public and Private Sectors			
	Prescribed	Non-prescribed (OTC)	Health Supplies	Total	Prescribed	Non-prescribed (OTC)	Health Supplies	Total	Prescribed	Non-prescribed (OTC)	Health Supplies	Total
Année	Secteur public				Secteur privé				Secteurs public et privé			
	Avec prescription	Sans prescription (au comptoir)	Produits d'hygiène personnelle	Total	Avec prescription	Sans prescription (au comptoir)	Produits d'hygiène personnelle	Total	Avec prescription	Sans prescription (au comptoir)	Produits d'hygiène personnelle	Total
(percentage distribution on sub-totals / répartition en pourcentage des sous-totaux)												
1975	92.7	7.3	--	100.0	66.7	17.7	15.5	100.0	73.6	15.0	11.5	100.0
1976	93.2	6.8	--	100.0	67.9	17.1	15.0	100.0	75.2	14.1	10.7	100.0
1977	93.6	6.4	--	100.0	69.0	16.5	14.5	100.0	76.6	13.4	10.0	100.0
1978	94.0	6.0	--	100.0	64.9	18.7	16.4	100.0	74.4	14.6	11.1	100.0
1979	94.1	5.9	--	100.0	61.0	20.7	18.2	100.0	71.9	15.9	12.2	100.0
1980	94.2	5.8	--	100.0	58.6	22.2	19.3	100.0	70.6	16.6	12.7	100.0
1981	94.3	5.7	--	100.0	62.9	19.8	17.3	100.0	73.3	15.1	11.6	100.0
1982	94.2	5.8	--	100.0	63.4	19.5	17.1	100.0	74.2	14.7	11.1	100.0
1983	94.4	5.6	--	100.0	60.4	21.1	18.5	100.0	72.8	15.5	11.8	100.0
1984	94.5	5.5	--	100.0	55.4	23.8	20.9	100.0	69.8	17.0	13.2	100.0
1985	94.6	5.4	--	100.0	53.9	24.5	21.5	100.0	69.2	17.3	13.4	100.0
1986	94.7	5.3	--	100.0	54.8	24.1	21.1	100.0	69.9	17.0	13.1	100.0
1987	94.7	5.3	--	100.0	52.6	25.2	22.2	100.0	68.6	17.6	13.7	100.0
1988	94.9	5.1	--	100.0	53.2	24.9	21.9	100.0	69.2	17.3	13.5	100.0
1989	95.0	5.0	--	100.0	53.7	24.7	21.6	100.0	69.7	17.0	13.2	100.0
1990	95.2	4.8	--	100.0	55.7	23.6	20.7	100.0	71.5	16.1	12.5	100.0
1991	95.4	4.6	--	100.0	56.1	23.4	20.5	100.0	72.0	15.8	12.2	100.0
1992	95.7	4.3	--	100.0	57.0	22.9	20.1	100.0	72.6	15.4	12.0	100.0
1993	95.8	4.2	--	100.0	56.9	22.9	20.2	100.0	72.2	15.5	12.2	100.0
1994*	95.9	4.1	--	100.0	56.8	22.9	20.2	100.0	71.8	15.7	12.5	100.0
1995*	96.0	4.0	--	100.0	56.8	22.9	20.2	100.0	71.5	15.8	12.6	100.0
1996*	95.9	4.1	--	100.0	56.8	22.9	20.3	100.0	70.7	16.2	13.0	100.0
(percentage distribution on totals / répartition en pourcentage des totaux)												
1975	33.2	12.8	--	26.3	66.8	87.2	100.0	73.7	100.0	100.0	100.0	100.0
1976	36.0	13.9	--	29.0	64.0	86.1	100.0	71.0	100.0	100.0	100.0	100.0
1977	37.7	14.7	--	30.8	62.3	85.3	100.0	69.2	100.0	100.0	100.0	100.0
1978	41.2	13.4	--	32.6	58.8	86.6	100.0	67.4	100.0	100.0	100.0	100.0
1979	43.1	12.3	--	33.0	56.9	87.7	100.0	67.0	100.0	100.0	100.0	100.0
1980	45.2	11.8	--	33.9	54.8	88.2	100.0	66.1	100.0	100.0	100.0	100.0
1981	42.6	12.5	--	33.1	57.4	87.5	100.0	66.9	100.0	100.0	100.0	100.0
1982	44.3	13.8	--	34.9	55.7	86.2	100.0	65.1	100.0	100.0	100.0	100.0
1983	47.2	13.2	--	36.4	52.8	86.8	100.0	63.6	100.0	100.0	100.0	100.0
1984	50.0	12.0	--	37.0	50.0	88.0	100.0	63.0	100.0	100.0	100.0	100.0
1985	51.4	11.8	--	37.6	48.6	88.2	100.0	62.4	100.0	100.0	100.0	100.0
1986	51.1	11.8	--	37.7	48.9	88.2	100.0	62.3	100.0	100.0	100.0	100.0
1987	52.5	11.4	--	38.1	47.5	88.6	100.0	61.9	100.0	100.0	100.0	100.0
1988	52.6	11.4	--	38.4	47.4	88.6	100.0	61.6	100.0	100.0	100.0	100.0
1989	52.9	11.4	--	38.9	47.1	88.6	100.0	61.1	100.0	100.0	100.0	100.0
1990	53.1	11.8	--	39.8	46.9	88.2	100.0	60.2	100.0	100.0	100.0	100.0
1991	53.6	11.7	--	40.4	46.4	88.3	100.0	59.6	100.0	100.0	100.0	100.0
1992	53.0	11.2	--	40.2	47.0	88.8	100.0	59.8	100.0	100.0	100.0	100.0
1993	52.4	10.7	--	39.5	47.6	89.3	100.0	60.5	100.0	100.0	100.0	100.0
1994*	51.3	10.2	--	38.5	48.7	89.8	100.0	61.5	100.0	100.0	100.0	100.0
1995*	50.4	9.6	--	37.5	49.6	90.4	100.0	62.5	100.0	100.0	100.0	100.0
1996*	48.3	9.0	--	35.6	51.7	91.0	100.0	64.4	100.0	100.0	100.0	100.0

Source: Health Canada and CIHI / Santé Canada and ICIS
 * Estimated by Health Canada. / Estimé par Santé Canada.

Table 4A
Tableau 4A

Patented and Non-patented Drug Expenditures,
Dépenses en médicaments brevetés et non brevetés,
Canada, 1975-1996

Year	Prescribed Drugs		Non-Prescribed Drugs and Health Supplies		All Types of Drugs		Grand Total
	Patented	Non-patented	Patented	Non-patented	Patented	Non-patented	
Année	Médicaments sous prescription		Médicaments non-prescrits et produits d'hygiène personnelle		Tous les genres de médicaments		Grand total
	Brevetés	Non brevetés	Brevetés	Non brevetés	Brevetés	Non brevetés	
(\$' 000 000)							
1975	--	--	--	--	--	--	1,247.1
1976	--	--	--	--	--	--	1,386.1
1977	--	--	--	--	--	--	1,511.6
1978	--	--	--	--	--	--	1,658.2
1979	--	--	--	--	--	--	1,897.4
1980	--	--	--	--	--	--	2,151.5
1981	--	--	--	--	--	--	2,638.4
1982	--	--	--	--	--	--	3,003.9
1983	--	--	--	--	--	--	3,356.8
1984	--	--	--	--	--	--	3,762.0
1985	--	--	--	--	--	--	4,300.9
1986	--	--	--	--	--	--	4,975.8
1987	1,966.4	1,824.3	77.7	1,657.2	2,044.0	3,481.5	5,525.5
1988	2,351.4	1,931.6	92.9	1,816.7	2,444.3	3,748.3	6,192.6
1989	2,719.0	2,143.7	107.4	2,006.5	2,826.4	4,150.1	6,976.5
1990	3,155.1	2,361.5	124.6	2,083.5	3,279.7	4,445.0	7,724.7
1991	3,649.0	2,504.7	144.1	2,253.5	3,793.2	4,758.2	8,551.4
1992	4,025.7	2,758.2	159.0	2,406.8	4,184.7	5,165.0	9,349.7
1993	4,087.6	2,993.1	161.5	2,565.7	4,249.1	5,558.9	9,807.9
1994*	4,129.2	3,163.1	163.1	2,700.5	4,292.3	5,863.7	10,156.0
1995*	4,650.9	2,897.4	183.7	2,828.2	4,834.6	5,725.6	10,560.2
1996*	4,776.4	2,890.1	188.7	2,990.0	4,965.1	5,880.1	10,845.2
(annual percentage change / variation annuelle en pourcentage)							
1975	--	--	--	--	--	--	--
1976	--	--	--	--	--	--	11.1
1977	--	--	--	--	--	--	9.1
1978	--	--	--	--	--	--	9.7
1979	--	--	--	--	--	--	14.4
1980	--	--	--	--	--	--	13.4
1981	--	--	--	--	--	--	22.6
1982	--	--	--	--	--	--	13.9
1983	--	--	--	--	--	--	11.7
1984	--	--	--	--	--	--	12.1
1985	--	--	--	--	--	--	14.3
1986	--	--	--	--	--	--	15.7
1987	--	--	--	--	--	--	11.0
1988	19.6	5.9	19.6	9.6	19.6	7.7	12.1
1989	15.6	11.0	15.6	10.4	15.6	10.7	12.7
1990	16.0	10.2	16.0	3.8	16.0	7.1	10.7
1991	15.7	6.1	15.7	8.2	15.7	7.0	10.7
1992	10.3	10.1	10.3	6.8	10.3	8.5	9.3
1993	1.5	8.5	1.5	6.6	1.5	7.6	4.9
1994*	1.0	5.7	1.0	5.3	1.0	5.5	3.5
1995*	12.6	-8.4	12.6	4.7	12.6	-2.4	4.0
1996*	2.7	-0.2	2.7	5.7	2.7	2.7	2.7

Source: Health Canada, CIHI and PMPRB / Santé Canada, ICIS et CEPMB

* Estimated by Health Canada. / Estimé par Santé Canada.

Table 4B
Tableau 4B

Patented and Non-patented Drug Expenditures,
Dépenses en médicaments brevetés et non brevetés,
Canada, 1975-1996

Year Année	Prescribed Drugs		Non-Prescribed Drugs and Health Supplies		All Types of Drugs		Grand Total Grand total
	Patented	Non-patented	Patented	Non-patented	Patented	Non-patented	
	Médicaments sous prescription		Médicaments non-prescrits et produits d'hygiène personnelle		Tous les genres de médicaments		
	Brevetés	Non brevetés	Brevetés	Non brevetés	Brevetés	Non brevetés	
(\$ per capita / \$ par habitant)							
1975	--	--	--	--	--	--	53.73
1976	--	--	--	--	--	--	58.94
1977	--	--	--	--	--	--	63.52
1978	--	--	--	--	--	--	68.99
1979	--	--	--	--	--	--	78.16
1980	--	--	--	--	--	--	87.48
1981	--	--	--	--	--	--	105.96
1982	--	--	--	--	--	--	119.19
1983	--	--	--	--	--	--	131.86
1984	--	--	--	--	--	--	146.37
1985	--	--	--	--	--	--	165.79
1986	--	--	--	--	--	--	189.89
1987	--	--	--	--	--	--	208.12
1988	87.43	71.82	3.45	67.55	90.88	139.37	230.25
1989	99.31	78.29	3.92	73.28	103.23	151.58	254.81
1990	113.53	84.97	4.48	74.97	118.02	159.95	277.96
1991	129.77	89.07	5.13	80.14	134.89	169.21	304.10
1992	141.04	96.63	5.57	84.32	146.61	180.96	327.57
1993	141.21	103.40	5.58	88.64	146.79	192.04	338.83
1994*	141.14	108.12	5.58	92.31	146.72	200.43	347.15
1995*	157.04	97.83	6.20	95.50	163.25	193.33	356.58
1996*	159.41	96.45	6.30	99.79	165.70	196.24	361.95
(annual percentage change / variation annuelle en pourcentage)							
1975	--	--	--	--	--	--	--
1976	--	--	--	--	--	--	9.7
1977	--	--	--	--	--	--	7.8
1978	--	--	--	--	--	--	8.6
1979	--	--	--	--	--	--	13.3
1980	--	--	--	--	--	--	11.9
1981	--	--	--	--	--	--	21.1
1982	--	--	--	--	--	--	12.5
1983	--	--	--	--	--	--	10.6
1984	--	--	--	--	--	--	11.0
1985	--	--	--	--	--	--	13.3
1986	--	--	--	--	--	--	14.5
1987	--	--	--	--	--	--	9.6
1988	--	--	--	--	--	--	10.6
1989	13.6	9.0	13.6	8.5	13.6	8.8	10.7
1990	14.3	8.5	14.3	2.3	14.3	5.5	9.1
1991	14.3	4.8	14.3	6.9	14.3	5.8	9.4
1992	8.7	8.5	8.7	5.2	8.7	6.9	7.7
1993	0.1	7.0	0.1	5.1	0.1	6.1	3.4
1994*	0.0	4.6	0.0	4.1	0.0	4.4	2.5
1995*	11.3	-9.5	11.3	3.5	11.3	-3.5	2.7
1996*	1.5	-1.4	1.5	4.5	1.5	1.5	1.5

Source: Health Canada, CIHI and PMPRB / Santé Canada, ICIS et CEPMB

* Estimated by Health Canada. / Estimé par Santé Canada.

Table 4C
Tableau 4C

**Patented and Non-patented Drug Expenditures,
Dépenses en médicaments brevetés et non brevetés,
Canada, 1975-1996**

Year	Prescribed Drugs		Non-Prescribed Drugs and Health Supplies		All Types of Drugs		Grand Total
	Patented	Non-patented	Patented	Non-patented	Patented	Non-patented	
Année	Médicaments sous prescription		Médicaments non-prescrits et produits d'hygiène personnelle		Tous les genres de médicaments		Grand total
	Brevetés	Non brevetés	Brevetés	Non brevetés	Brevetés	Non brevetés	
(percentage distribution / répartition en pourcentage)							
1975	--	--	--	--	--	--	100.0
1976	--	--	--	--	--	--	100.0
1977	--	--	--	--	--	--	100.0
1978	--	--	--	--	--	--	100.0
1979	--	--	--	--	--	--	100.0
1980	--	--	--	--	--	--	100.0
1981	--	--	--	--	--	--	100.0
1982	--	--	--	--	--	--	100.0
1983	--	--	--	--	--	--	100.0
1984	--	--	--	--	--	--	100.0
1985	--	--	--	--	--	--	100.0
1986	--	--	--	--	--	--	100.0
1987	--	--	--	--	--	--	100.0
1988	38.0	31.2	1.5	29.3	39.5	60.5	100.0
1989	39.0	30.7	1.5	28.8	40.5	59.5	100.0
1990	40.8	30.6	1.6	27.0	42.5	57.5	100.0
1991	42.7	29.3	1.7	26.4	44.4	55.6	100.0
1992	43.1	29.5	1.7	25.7	44.8	55.2	100.0
1993	41.7	30.5	1.6	26.2	43.3	56.7	100.0
1994*	40.7	31.1	1.6	26.6	42.3	57.7	100.0
1995*	44.0	27.4	1.7	26.8	45.8	54.2	100.0
1996*	44.0	26.6	1.7	27.6	45.8	54.2	100.0

Source: Health Canada, CIHI and PMPRB / Santé Canada, ICIS et CEPMB

* Estimated by Health Canada. / Estimé par Santé Canada.