

## Asthma and COPD market to change

**Nick O'Donoghue**

PROFITS from GlaxoSmithKline's (GSK) new once-a-day inhaled corticosteroid/long-acting beta2-agonist (ICS/LABA), Relovair (fluticasone furoate/vilanterol) are not expected to match its predecessor's a new report says.

The report by Datamonitor revealed GSK has dominated the asthma and chronic pulmonary disease (COPD) market with its twice-a-day ICS/LABA blockbuster Advair/Seretide (fluticasone propionate/salmeterol), but warned the rise of other "me too" products would cut the company's market share over the next 10 years.

ICS/LABA products have been popular because of their convenient combination of

two molecules in one inhaler, however up until now ICS/LABA combination drugs needed to be inhaled twice a day.

Health care analyst and author of the report Erin Brady revealed the Australian market was worth \$333 million in 2009, but forecast modest growth in the area over the next decade as a result of a maturing market, a lack of innovative products and alternative COPD medications.

However she said Relovair, which is yet to be launched in Australia, would help GSK to remain as the market leader, with sales expected to reach \$60 million in 2019.

"Increased competition from other once- and twice-daily ICS/LABA products in late-stage development, generic entry and

the loss of some COPD sales to the new long-acting beta2-agonist/long-acting anticholinergic (LABA/LAMA) combination drug class will keep Relovair's sales well short of its predecessor's lofty heights.

"Not only will the ICS/LABA drug class face a major upheaval as the two existing products face competition from at least four new entrants over the next 5 years but the COPD market, currently led by Boehringer Ingelheim's LAMA product Spiriva (tiotropium), will face a similar revolution as asthma did when ICS/LABA combinations were launched, as LABA/LAMA products hit the market," she said.

Ms Brady added Relovair would overtake Advair/Seretide as the market leader in 2016.

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## Ageing carers a real concern: AIHW report

**Nick O'Donoghue**

A REPORT from the Australian Institute of Health and Welfare (AIHW) has raised concerns that carers of people with arthritis and osteoporosis need care themselves.

The report found as Australia's population ages, the age and health of primary carers will become a major issue for patients with disabilities caused by arthritis and osteoporosis.

Based on figures from 2003 the report said arthritis and osteoporosis were the main reasons for disability for more than 600,000 Australians, predominantly among elderly people, with carers whose age was also a factor in limiting the length of time they could

effectively look after the patient.

Dr Naila Rahman of the AIHW's National Centre for Monitoring Arthritis and Musculoskeletal Conditions said the report found more than 40 per cent of carers were over 65 and 70 per cent had physical disabilities of their own.

"We found that often the carers themselves needed assistance with daily activities, such as self-care, housework, and transport and mobility. They also have unmet needs for respite care.

"Primary carers of people with disability due to arthritis and osteoporosis often see their caring role as a mark of their relationship with the care receiver and many reduce work hours or leave the paid workforce to meet their caring responsibilities," she said.

While women have traditionally been more likely to be primary carers for people with disabilities, the AIHW report found men were more likely to look after people with arthritis.

"In general, women assume the role of a primary carer more often than men. However this pattern is reversed among carers of people with arthritis, with men making up about 55% of primary carers.

"One reason for this reversal is that osteoarthritis and rheumatoid arthritis are both more common in women than in men, particularly among older age groups," Dr Rahman said.

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## e-Prescribing to be cost neutral

**Nick O'Donoghue**

PHARMACISTS will no longer feel the pinch of e-prescribing after eRx Script Exchange cut its fees to match the Federal Government's 15 cent incentive per script.

The new pricing structure has been designed so that pharmacists will pay a 15 cent fee on each prescription dispensed and then receive 15 cents from the government as of 1 July.

Chairman of eRx Graham Cunningham said the company was committed to making the system cost neutral for pharmacist and welcomed the government incentive.

"We believe that this is a vital step in providing an e-script service that is both comprehensive and easy to understand, but also in removing any cost concerns about e-scripts.

"Whilst the announcement of incentive payments is extremely positive for patient care and for the future of e-health in Australia, we would prefer an approach that includes all prescriptions.

"Our new pricing policy allows us to continue discussions on



these outstanding issues while we implement eRx fully across Australia for all prescriptions," he said.

However Mr Cunningham warned eRx may not be able to maintain a cost neutral policy indefinitely, but he said the company would work with the government and industry to maintain the policy.

He added users would be given at least two months notice of any change to the price structure before implementing it.

Currently eRx is available free of charge to members of the Pharmacy Guild of Australia and the Australian Friendly Societies Pharmacies Association.

eRx e-prescribing software has been used by more than 2000 pharmacies and 3700 doctors to dispense more than 8.5 million scripts since April 2009.

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## BRIEFS

### SIGMA BID

Shareholders in Sigma Pharmaceuticals are still being recommended to not to act on a bid tabled by Aspen Pharma last week.

The South African generic drug manufacturer made a \$0.60 a share bid, which was announced to the Australia Stock Exchange on Friday.

In an official statement to the ASX this morning Sigma general counsel and company secretary Sue Morgan-Dethick said the board was still considering the offer, but added shareholders were being recommended not to take any action at this stage.

However a report in today Australian Financial Review said shareholders were keen for the board to accept the bid.

### ONLINE PATIENT SUPPORT

Pfizer has launched a new 12-week online program to help new patients get used to and maintain their use of Lipitor (avastrostatin calcium).

The 'every day counts' was developed to reduce the numbers of patients who stop using medication within the first 12

weeks of up taking the medication.

Medical Director of Pfizer Australia Dr Peter Stewart said many patients stop taking medication, because their condition is largely asymptomatic and they believe they can control it themselves.

"The plan is to establish processes that support, adherent activity and intervene where non-adherent activity is identified. We are targeting 80 per cent retention of enrolled members," he said.

### NATIONAL MEDICINES SYMPOSIUM 2010

Australia's chief medical officer Jim Bishop will open the National Medicines Symposium on Wednesday at the Melbourne Conference and Exhibition Centre.

The biennial event, hosted by the National Prescribing Service, brings together everyone involved with medicines use including doctors, pharmacists, nurses, specialists, consumers, policy makers, academics and international experts.

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