

Prescribing of Testosterone Replacement Therapy Continues to Increase Among Older Men in Ontario

The use of testosterone replacement therapy (TRT) among elderly men in Ontario has more than tripled over the past 15 years despite policies to restrict prescribing

What does this mean?

- In 2006, coverage of TRT was restricted to the treatment of hypogonadism on the public drug formulary in Ontario. Despite an initial decrease in utilization following the policy implementation, the use of testosterone exceeded pre-policy levels by the end of the study period.
- Increased rates are driven largely by topical testosterone, which is the most common form of TRT dispensed to older men in Ontario.

Policy Implications

- ✓ TRT may be frequently used outside of its listed indications on the Ontario public drug formulary without any clear clinical benefit
- ✓ Policy-makers may want to consider more strict criteria for access to TRT through the public formulary, including requirements for documented lab data confirming hypogonadism.

How do we know this?

The ODPRN conducted a time series analysis using linked health administrative records among men aged 66 years of age and older who received testosterone products reimbursed by the provincial drug plan in Ontario, Canada between January 1997 and March 2012. A total of 28,477 men were dispensed testosterone over the study period. Overall, testosterone prescribing increased more than 3-fold between 1997 (3.6 men per 1000 eligible) and 2012 (11.0 men per 1000 eligible). Although testosterone prescribing declined 27.9% in early 2006 following their change in listing from General Benefit to Limited Use ($p < 0.01$), the overall decrease was temporary and testosterone use exceeded pre-policy levels by the end of the study period (11.0 men per 1000 eligible). This was largely driven by prescriptions for topical testosterone, which rose 464% between the policy change in 2006 (1.0 men per 1000 eligible) and the end of the study period (4.8 men per 1000 eligible). Only 6.3% of men who initiated TRT had a previous diagnosis for hypogonadism

Piszczek J, Mamadani M, Antonior T, Juurlink DN, Gomes T. The impact of the drug reimbursement policy on rates of testosterone replacement therapy among older men. *PLoS ONE* 2014;9(5):e96111. doi:10.1371/journal.pone.0096111

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