Prescription medication use among Canadian adults, 2016 to 2019

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Over half of Canadian adults aged 18 to 79 have used at least one prescription medication in the past month

New results show that 55% of adults aged 18 to 79 used at least one prescription medication in the past month, while 36% used two or more, and 24% used three or more. The use of prescribed medication increased with age (taking one medication or more: 38% at ages 18 to 39, 56% at ages 40 to 59, and 81% at ages 60 to 79; taking three medications or more: 7% at ages 18 to 39, 22% at ages 40 to 59, and 52% at ages 60 to 79).

Overall, a higher proportion of females aged 18 to 59 (55%) reported using prescription medications, compared with males (38%), while for 60- to 79-year-olds, there was no significant difference between males (80%) and females (81%).

These results are based on data combined from two cycles of the Canadian Health Measures Survey (CHMS), 2016 and 2017, and 2018 and 2019.

Along with hospital costs, medications constitute one of the major health spending categories in Canada, as reported by the Canadian Institute for Health Information. Spending on prescription medication accounted for 13% of total national health expenditures in 2019.

At least 1 in 10 Canadian adults are taking medications to treat high blood pressure, high blood cholesterol or mood disorders

Among Canadian adults, the most commonly reported prescription medications were to treat high blood pressure (16%); high blood cholesterol (12%); and mood disorders (10%) such as depression, bipolar disorder, mania or dysthymia. The use of these prescription medications was significantly higher in older age groups. Within the 60-to-79 age group, the use of prescription medications to treat high blood pressure (42%), high blood cholesterol (34%) and mood disorders (13%) was more common.

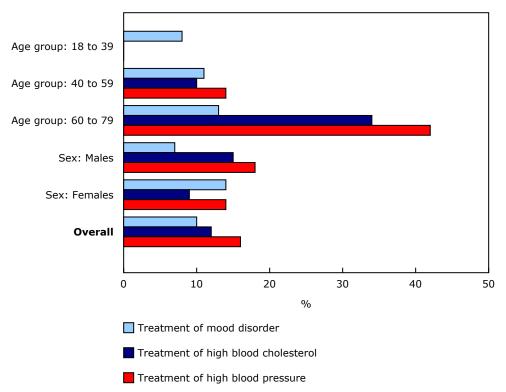
Females are twice more likely than males to take medication to treat mood disorders

Overall, the use of prescription medications to treat high blood pressure and high blood cholesterol was significantly more common in males than females. However, the use of prescription medication to treat mood disorders was twice more common among females (14%) than males (7%).





Chart 1
Prevalence of the three prescription medications most commonly used in the past month, by age group, sex and medication class, Canadians aged 18 to 79, 2016 to 2019



Note(s): For the 18-to-39 age group, data for the treatment of high blood cholesterol and high blood pressure were too unreliable to be published (data with a coefficient of variation greater than 33.3%; suppressed because of extreme sampling variability). The prevalence of prescription medication groups was classified by the most common Anatomical Therapeutic Chemical codes: treatment of high blood pressure (C02-antihypertensives, C03-diuretics, C07-beta blocking agents, C08-calcium channel blockers, and C09-agents acting on the renin-angiotensin system), treatment of high blood cholesterol (C10-lipid modifying agents) and treatment of mood disorder (N06-psychoanaleptics).

Source(s): Canadian Health Measures Survey (5071), Cycle 5 (2016 and 2017) and Cycle 6 (2018 and 2019).

Prescription medication use by people with high blood pressure or high blood cholesterol

The increase in prescription medication use with age is consistent with the similar trend observed in the prevalence of reported high blood pressure and high blood cholesterol. For example, the number of people who reported having high blood pressure or high blood cholesterol increased significantly with age (data not shown).

The CHMS collected self-reported information on chronic conditions and performed blood pressure measurements and lipids blood tests to determine the prevalence of high blood pressure and high blood cholesterol.

The survey results indicate that the majority of adults with high blood pressure diagnosed by a health professional were taking prescription medication to treat it (85%). However, according to the direct measure of blood pressure collected during this survey, medication was effectively treating the blood pressure of 58% of these adults.

Survey results also indicate that nearly half of adults were taking medication to treat high blood cholesterol diagnosed by a health professional. Based on the direct measures obtained during the survey, medication was effectively treating the cholesterol of 86% of these adults.

Detailed results for high blood pressure based on data from direct measurements and self-reported use of medication were released in the fact sheet "Blood pressure of adults, 2016-2019" (published in March 2021). Similar detailed results for high blood cholesterol are released in the fact sheet "Cholesterol levels of adults, 2016-2019" (available today).

The fact sheets "Blood pressure of adults, 2016-2019" and "Cholesterol levels of adults, 2016-2019" are available in the publication *Health Fact Sheets* (82-625-X).

Additional data

The Cycle 6 fasted laboratory data are now available.

Note to readers

The Canadian Health Measures Survey (CHMS) is currently the only ongoing nationally representative data source for measured physical fitness in Canada. Therefore, it represents an important mechanism to track changes in fitness levels.

The 2016-to-2019 reference period refers to combined results from Cycle 5 (2016 and 2017) and Cycle 6 (2018 and 2019) of the CHMS.

The target population for the CHMS consists of people aged 3 to 79 living in the 10 provinces. The observed population excludes people living in the three territories, people living on reserves and in other Indigenous settlements in the provinces, full-time members of the Canadian Forces, the institutionalized population, and residents of certain remote regions. Altogether these exclusions represent approximately 3% of the target population.

Survey weight and bootstrap weight files and instructions are available for combining Cycle 6 CHMS data (where possible) with equivalent data from cycles 1 to 5.

The first part of the survey is an in-person interview in the home, where information is collected on health conditions and medication use. The second part is a visit to a mobile examination centre where direct physical measurements, including blood pressure and blood tests, are taken. The blood pressure direct measurement results are based on the guideline for stage 1 hypertension (systolic blood pressure \geq 130 mmHg or diastolic blood pressure \geq 80 mmHg), while the high blood cholesterol levels are based on the Canadian Cardiovascular Society Guidelines.

Prescription medications in this publication are based on the second level of the Anatomical Therapeutic Chemical (ATC) classification system. This system classifies products according to the organ or system on which they act and their chemical, pharmacological and therapeutic properties. The prevalence of prescription medication groups was classified by the most common ATC codes: treatment of high blood pressure (C02-antihypertensives, C03-diuretics, C07-beta blocking agents, C08-calcium channel blockers, and C09-agents acting on the renin-angiotensin system), treatment of high blood cholesterol (C10-lipid modifying agents), and treatment of mood disorder (N06-psychoanaleptics). Only the prescription medications reported being taken in the past month were included in this analysis. An individual was considered diagnosed when they reported having high blood pressure or using antihypertensive medication, or being told by a health care professional that they had high cholesterol or taking prescribed medication for treating high blood cholesterol levels.

Definitions, data sources and methods: survey number 5071.

Available tables: 13-10-0326-01 and 13-10-0384-01.

The fact sheet "Cholesterol levels of adults, 2016-2019" is available in the publication *Health Fact Sheets* (82-625-X). This article also includes a medication data file containing collected information from the household and clinic questionnaires on self-reported medication use, and a fasted laboratory data file.

For more information, or to enquire about the concepts, methods or data quality of this release, contact us (toll-free 1-800-263-1136; 514-283-8300; **STATCAN.infostats-infostats.STATCAN@canada.ca**) or Media Relations (613-951-4636; **STATCAN.mediahotline-ligneinfomedias.STATCAN@canada.ca**).