

Pharmacy data—a complete picture?

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Dear Sir,

As Anders Ekedahl writes, in Sweden as in many others countries, the patient can fill his or her prescription at any pharmacy. This should have been more clearly pointed out in our article. With respect to the attrition rates the study^{1,2} we refer to was carried out in 1980, i.e. in the middle of the time period analysed in our study. Further, in that study the prescriptions of all inhabitants of the community were analysed. The data that Anders Ekedahl presents are from 1999, i.e. 19 years later. During the time period 1980–1999 the commuting into the nearby city of Uppsala has increased considerably. Furthermore, the data Anders Ekedahl presents are for the age group 20–59 years which is the age group where the proportion of the population commuting is the highest. Obviously, the study we cite in our article must give a more accurate estimate on the attrition rate in the late seventies and early eighties than the estimate Anders Ekedahl presents.

However, the estimate presented by Anders Ekedahl is interesting from another point of view. Because of regulations in Sweden it is, to our understanding, not

possible to use prescription data on an individual level identified through the civil registration numbers obtained from the computerized system of the National Corporation of Swedish Pharmacies in research or other studies. It is therefore very surprising to read that Anders Ekedahl, Department of Community Medicine, Lund University, evidently has had access to such a computerized register, containing individualized data on prescription drugs purchased and that he has been able to perform the analyses which he describes.

REFERENCES

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2. Isacson D. *Heavy use of Prescription Drugs: Pharmacoepidemiological Studies in a Swedish Community*. Acta Universitatis Upsaliensis, Comprehensive Summaries of Uppsala Dissertations from the Faculty of Medicine: Uppsala, 1987; 124.

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