Pharmacists’ Attitudes And Practices Regarding Generic Drugs

September 2005
Pharmacists’ Attitudes and Practices Regarding Generic Drugs

Data Collected by Harris Interactive, Inc.

Report Prepared by Linda L. Barrett, Ph.D.
AARP Knowledge Management
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Acknowledgements

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Introduction

This is the third study in a series that examines attitudes and practices regarding the use of generic drugs. The first study examined consumers’ views, the second examined physicians’ perspectives. This study focuses on pharmacists. The role of pharmacists has changed from that of one who compounds and dispenses drugs and medications to one who may have responsibilities for preventive health care, medication review, providing information on the wise use of medications and medication management.

The purpose of this study is to investigate pharmacists’ opinions about the use of generic drugs, their sources of information about generics, and their experience with them. We also asked about their interactions with pharmacy customers and how prepared they feel to respond to customers’ questions. Finally, we asked pharmacists about the importance of information regarding the comparative effectiveness of drugs to treat specific conditions and whether the new Medicare drug benefit should promote the use of generics.

Methods

The data for this study were collected on-line from a panel of pharmacists who completed a self-administered questionnaire between May 9 and May 19, 2005. Among the 502 respondents, approximately 70 per cent represent chain or grocery pharmacies. Thirty per cent represent independent pharmacies.

Summary

Two out of three pharmacists agree that generic drugs must be therapeutically equivalent with brand name drugs, most support generic substitution, and seven in ten say they are very prepared to talk with pharmacy customers about the customers’ experience with generics. They report that half of the prescriptions they receive in a typical day have generics alternatives available and four times out of five they are allowed to make the substitution.

1 Harris Interactive Inc. sent an electronic invitation to 11,550 pharmacists who are part of the Epocrates panel of pharmacists. Harris Interactive Inc. hosted the questionnaire on their server, and tabulated the data. The response rate was approximately four per cent. Epocrates typically experiences response rates between eight to twelve per cent. The age and gender of our sample closely parallels the proportions for pharmacists in the U.S. as reported by the American Association of Colleges of Pharmacy. In theory, with probability samples of this size, one could say with 95 percent certainty that the results have a sampling error of plus or minus 4.4 percentage points of what they would be if the entire U.S. population of these pharmacists had been polled with complete accuracy. Unfortunately, there are several other possible sources of error in all polls or surveys that are perhaps more serious than theoretical calculations of sampling error. These sources of error include refusals to be interviewed (non-response bias), question wording and question order, and weighting. It is impossible to measure the errors that might result from these factors. Online samples like the one used in this study are not probability samples.
More than half of the pharmacists say they spend a quarter or less of their time consulting with pharmacy customers about their prescription drugs. When they do talk with their customers, they say customers most often want to talk about the cost of prescription drugs. While 60 per cent of the pharmacists say they understand their pharmacy customer’s economic concerns about drug costs very well, a third say they only feel somewhat prepared for this conversation. Slightly more than half the pharmacists say they know a lot about the price differences between brand and generic drugs and four in ten say they only know some about these price comparisons. Nonetheless, almost nine in ten say the price difference between generics and brand name drugs is often so great they feel they must dispense prescriptions with generic substitutes for people who do not have prescription drug benefits because of price.

The corporate office and wholesalers or suppliers are identified as the most frequent and reliable source of information about new generics on the market.

The vast majority of pharmacists say it is somewhat or very important for the new Medicare drug benefit to promote the use of generic drugs. They would like to have resources such as brochures or other handouts to advise pharmacy customers about this new benefit and they would like these materials to address issues such as pricing, formularies, and benefits.

Three-fourths of the pharmacists in this study say it is important to have information available about the comparative effectiveness of medications to treat specific conditions. They also say the Food and Drug Administration should have the responsibility for providing information about the comparative effectiveness of medications to treat specific conditions.

**Background Demographics**

**Most pharmacists are males and many have 20+ years of experience**

Two-thirds (66%) of the pharmacists in this study are male and one-third (34%) are female. Overall, the age of pharmacists is fairly evenly distributed. However, male pharmacists tend to be older than female pharmacists, they are more likely to say they have more years of pharmacy experience, and they are more likely to work in independent settings.

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2 Almost three in ten (29%) are between the ages of 30-39 years, one in four (25%) are between 40-49 years, and about one in five (21%) are between 50-59 years of age.

3 Forty-nine per cent of male pharmacists have 20+ years of pharmacy experience while only 23 per cent of female pharmacists have 20+ years of experience. Female pharmacists are more likely than male pharmacists to have between 5 – 9 years of experience (24% v 13%). Male pharmacists are more likely to report working in independent settings compared female pharmacists (33% v 24%). Female pharmacists are more likely than male pharmacists to report working in a grocery store pharmacy (25% v 16%).
We also found gender differences among pharmacists regarding their perceived knowledge, beliefs, and practice. While the details regarding these differences appear throughout this report, male pharmacists generally are more likely than females to say they know a lot about price differences between brand and generic drugs. They are less likely to believe therapeutic failures are a serious problem with generics, and they feel less to feel pressured to dispense generic rather than brand name drugs. Female pharmacists say they spend more time consulting with pharmacy customers than male pharmacists say they spend consulting with pharmacy customers.

**The majority of pharmacists work in large chain pharmacies**

As noted earlier, 70 per cent of the work settings in this study represent chain or grocery pharmacies. Additional details include the following: more than four in ten (42%) of the pharmacists in this study say they work in a large chain community pharmacy with more than ten units under the same ownership. About a quarter (26%) say they work in an independent community pharmacy with fewer than four stores under the same ownership. Fewer than one in five (17%) say they work in a supermarket pharmacy, ten per cent work in big box stores (mass merchandisers), and five per cent are in small chain community pharmacies.

**Pharmacists estimate two-thirds of their pharmacy customers are age 45 or older**

Pharmacists estimate the age of their customers is almost evenly divided between those ages 45 to 65 (28%) and ages 65 to 84 (28%). A minority (10%) say their customers are age 85 or older. They also estimate about one in five (20%) of their customers is between ages 19 and 44 and only 15 per cent say their customers are under the age of 18.

**Detailed Findings**

**Pharmacists say they personally consult with an average of 48 customers per day. More than half (54%) of the pharmacists say they spend 25 per cent or less of their time consulting with pharmacy customers about their prescription drugs.**

More than nine in ten (96%) pharmacists say they personally consult with between 1-150 customers daily at this time of year. Most (62%) say they personally dispense or process 1-150 prescriptions or orders daily at this time of year (the overall average is 153).
Virtually none (2%) of the pharmacists in this survey say they spend more than 80 per cent of his or her time consulting with pharmacy customers (Figure 1).

Pharmacists report the average number of prescriptions dispensed by their pharmacy per day at this time of year is 271. Almost three in ten (29%) say the pharmacy where they work dispenses between 151-250 prescriptions per day at this time of year. Another quarter (28%) say the pharmacy where they work dispenses between 1-150 prescriptions per day at this time of year. Another quarter of the pharmacists (27%) say the pharmacy where they work dispenses more than 300 prescriptions per day at this time of year. Only sixteen per cent say the pharmacy where they work dispenses 251-300 prescriptions per day at this time of year.

**Pharmacists’ beliefs about generics differ somewhat from FDA standards**

Although the Food and Drug Administration states that generic drugs must be therapeutically equivalent with brand name drugs, only about two-thirds (65%) of pharmacists say they strongly agree or somewhat agree that this is true (Table Four item f). Compared to physicians, this is relatively high. Only about four in ten (42%) of
physicians agree with this statement. Almost one-quarter (23%) of pharmacists say they strongly or somewhat agree that therapeutic failures are a serious problem with some generic products (Table Four item g).

In the opinion of the pharmacists in this study, the generic drugs most likely to result in therapeutic failures are Warfarin (31%), Levothyroxine (26%) and Digoxin (17%). In the opinion of the pharmacists in this study, certain classes of medications such as thyroid medication (11%), anti-seizure medicine (5%), or hormone products (3%) may also result in therapeutic failures.

*The vast majority of pharmacists say it is somewhat or very important for the new Medicare drug benefit which takes effect in 2006 to promote the use of generic drugs.*

More than eight in ten (85%) pharmacists say it is somewhat or very important for the new Medicare drug benefit to promote the use of generic drugs. Three-fifths (63%) say it is very important.

More than half (53%) say they need resources such as brochures or other handouts to advise pharmacy customers about the new prescription drug benefit. Half (52%) also say they need information such as pricing information, formulary information, and benefits information to help them in this role.

Almost all pharmacists (96%) say it is somewhat or very difficult for them to know all the different benefit plan formulary parameters.

*Pharmacists say that more than half of the prescriptions they receive in a typical day have generic alternatives available. Four times out of five the prescription allows generic substitution.*

On average, pharmacists say that about six out of ten (62%) prescription orders they receive on a typical day are written for drug products which are off patent. This means that generic substitution is possible in these situations. On average, pharmacists report that more than eight of ten (84%) of these prescriptions allow generic substitution.

*Pharmacists support generic substitution and report they are very prepared to talk with pharmacy customers about their experiences with generics.*

More than two-thirds (68%) of pharmacists say they support generic substitution for brand name drugs in most cases. Approximately one-third (32%) say they support generic substitution for brand name drugs in all cases where a generic is available. None

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of the pharmacists in this study say they do not support generic substitution for brand name drugs.

Virtually all pharmacists say they feel at least *somewhat prepared* to talk with their customers about the potential side effects of prescription drugs, the appropriate use of their medications, and their experiences with generic drugs (see Table 1). However, fewer pharmacists say they feel *very prepared* to talk with their customers about the cost of prescription drugs (Table 2 also see Figure 2).

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**Table 1**

Proportion of Pharmacy Customers Who Want to Talk With Pharmacist About their Medications

Q425: How often do your customers want to talk about the following?

<table>
<thead>
<tr>
<th>Item</th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Frequently</th>
</tr>
</thead>
<tbody>
<tr>
<td>The appropriate use of their medications</td>
<td>--</td>
<td>7%</td>
<td>55%</td>
<td>37%</td>
</tr>
<tr>
<td>The side effects of prescription drugs</td>
<td>--</td>
<td>4</td>
<td>33</td>
<td>63</td>
</tr>
<tr>
<td>The cost of prescription drugs</td>
<td>--</td>
<td>1</td>
<td>23</td>
<td>76</td>
</tr>
<tr>
<td>Their experiences with generic drugs</td>
<td>1</td>
<td>40</td>
<td>50</td>
<td>10</td>
</tr>
</tbody>
</table>

Source: Pharmacists Attitudes and Practices Regarding Generic Drugs, AARP, June 2005
Base = 502

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**Table 2**

Proportion of Pharmacists Who Say They Feel Prepared to Talk With Customers about Their Medications

Q427: How prepared to you feel to talk with pharmacy customers about the following:

<table>
<thead>
<tr>
<th>Item</th>
<th>Not at all</th>
<th>Not Very</th>
<th>Somewhat</th>
<th>Very</th>
</tr>
</thead>
<tbody>
<tr>
<td>The appropriate use of their medications</td>
<td>--</td>
<td>1%</td>
<td>13%</td>
<td>86%</td>
</tr>
<tr>
<td>The side effects of prescription drugs</td>
<td>--</td>
<td>1</td>
<td>23</td>
<td>77%</td>
</tr>
<tr>
<td>The cost of prescription drugs</td>
<td>--</td>
<td>3</td>
<td>33</td>
<td>63%</td>
</tr>
<tr>
<td>Their experiences with generic drugs</td>
<td>--</td>
<td>1</td>
<td>26</td>
<td>72%</td>
</tr>
</tbody>
</table>

Source: Pharmacists Attitudes and Practices Regarding Generic Drugs, AARP, June 2005
Base = 502
Pharmacists say their customers frequently want to talk to them about their prescription drugs cost, however one-third say they only feel somewhat prepared for this conversation and only sixty per cent say they understand their pharmacy customers’ economic concerns about drug costs very well.

The cost of prescription drugs is the issue pharmacists say their customers want to talk about most often (Table 1). In fact, 99 per cent of these pharmacists say their customers want to talk about prescription drug costs at least some of the time. However, pharmacists are less likely to say they feel very prepared to talk with their customers about the cost of prescription drugs than three other issues (Figure 2). A little more than half (55%) of the pharmacists say they know a lot about the price differences between brand name drugs and generic drugs. Four in ten (42%) say they know some about these price differences but few (3%) say they know very little about the price differences between brand name drugs and generic drugs. Male pharmacists are more likely to say female pharmacists to say they know a lot about price differences between brand and generic drugs (65% v 36%) while female pharmacists are more likely than their counterparts to say they know some about these price differences (58% v 33%).

While prescription drug manufacturers have the most influence over drug prices, the price the consumer ultimately pays depends upon many factors. Generic drugs are especially subject to price differences. Therefore, it is not surprising that some pharmacists only feel somewhat prepared to talk with customers about cost.5

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Figure 2

Proportion of Customers Who Frequently Want to Talk With Pharmacist
Proportion of Pharmacists Who Feel Very Prepared to Talk with Customers

Q425: How often do your customers want to talk about the following?
Q427: How prepared do you feel to talk with pharmacy customers about the following?

Base = 502

Pharmacists are more likely to say the feel pressure from consumers to dispense prescriptions with generic drugs rather than brand name drugs.

Three out of four (75%) pharmacists say they sometimes or frequently feel pressure from consumers to dispense prescriptions with generic drugs (Table 3). On the other hand, half (50%) of pharmacists say they sometimes or frequently feel pressure from consumers to dispense prescriptions with brand name drugs. Female pharmacists are more likely than their male colleagues to say they sometimes feel pressured by pharmacy customers to dispense prescriptions with brand name drugs (52% v 43%). Male pharmacists are more likely than females to say they rarely feel pressured by pharmacy customers to dispense prescriptions with brand name drugs (52% v 42%).

Nearly half (48%) say they rarely feel discouraged by a manufacturer of a brand name drug from dispensing a generic version of their product. However, more than four out of five say they sometimes feel encouraged by a pharmacy benefit management company to dispense a prescription with a brand name drug that is different from the brand name drug originally prescribed (Figure 3).
### Table 3
Proportion of Pharmacists Who Feel Pressured Regarding The Prescriptions They Dispense

<table>
<thead>
<tr>
<th>Item</th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Frequently</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q460: How often do you feel pressured by pharmacy customers to dispense prescriptions with brand name drugs?</td>
<td>1%</td>
<td>46%</td>
<td>4%</td>
<td>4%</td>
</tr>
<tr>
<td>Q465: How often do you feel pressured by pharmacy customers to dispense prescriptions with generic drugs?</td>
<td>4</td>
<td>33</td>
<td>42</td>
<td></td>
</tr>
<tr>
<td>Q475: When dispensing a specific prescription, how often has a manufacturer of a brand name drug discouraged you from dispensing a generic version of their product?</td>
<td>14</td>
<td>48</td>
<td>34</td>
<td>4</td>
</tr>
<tr>
<td>Q485: How often has a pharmacy benefit management company encouraged you to dispense a prescription with a brand name drug that is different from the brand name drug originally prescribed?</td>
<td>6</td>
<td>19</td>
<td>45</td>
<td>31</td>
</tr>
</tbody>
</table>

Base = 502

### Figure 3
Proportion of Pharmacists Who Say They Frequently or Sometimes Feel Pressured Regarding the Prescriptions They Dispense

Q460/465: How often do you feel pressured by pharmacy customers to . . .
Q475: When dispensing a specific prescription, how often has a manufacturer of a brand name drug discouraged you from dispensing a generic version of their product?
A485: How often has a pharmacy benefit management company encouraged you to dispense a prescription with a brand name drug that is different from the brand name drug originally prescribed?

discouraged by manufacturer from dispensing generic: 38%
encouraged by pbm to dispense different brand: 76%
presured by customers for generic: 75%
presured by customers for brand: 50%

Base = 502
The corporate office and wholesalers or suppliers are identified as the most frequent source of information about new generics on the market

The corporate office is cited as the most frequent source of information about new generics on the market among pharmacists who work in chain drug stores. Wholesalers or suppliers are cited as the most frequent source of information about new generics on the market among pharmacists who work in independent settings. Pharmacy journal articles are also frequently identified as sources for this type of information (Figure 4).

Figure 4

Source of Information about New Generic Alternatives to Brand Name Drugs

Q430: How do you normally find out about when a brand name drug’s patent has expired and a new generic alternative is available for the first time? Please select all that apply.

- My corporate office*: 78%
- Wholesalers or suppliers: 62%
- Pharmacy journal articles: 59%
- Pharmacy journal ads: 55%
- Informational literature: 52%
- Colleagues/peers: 48%
- Health Ins / PBM: 38%
- Drug Company: 37%
- Internet: 32%
- Drug reps: 29%
- Mtg/Conference: 16%
- Customers: 9%

*Independent pharmacists have been excluded from this item (Base = 369).
The corporate office and wholesalers or suppliers are considered the most reliable sources of information about new generics.

The corporate office is identified as the most reliable source of information about new generic drugs on the market among pharmacists who work in chain drug stores (Figure 5). Wholesalers or suppliers are identified as the most reliable source of information about new generic drugs on the market among pharmacists who work in independent settings. Pharmacy journal articles are also considered reliable sources of information about new generic drugs on the market.

Figure 5

Information Sources Pharmacists Consider Most Reliable.

Q432: And among these information sources, which one do you feel is the most reliable?

Base = 502
*Independent pharmacists have been excluded from this item (Base = 369).
Health care plans and pharmacy benefit managers have considerable influence over the use of generic substitution according to pharmacists.

Although almost all pharmacists say they willingly support generic substitution for brand name drugs which have a generic available, they also say that pharmacy benefit managers and health care plans are increasingly denying reimbursement for brand name drugs when a generic is available (Table 4).

The reach of pharmacy benefit managers is confirmed by a recent report that states all pharmacy benefit managers have a system which is connected to retail and mail-order pharmacies and distribution centers so that pharmacists can verify the customer’s coverage, formulary limits, drug interactions, and the amount of co-pay the customer owes in real-time at the point-of-sale.⁶

Nearly seven in ten pharmacists say that they have to support generic substitution to keep customers who have prescription drug benefits.

### Table 4

#### Proportion of Pharmacists Who Say They Strongly or Somewhat Agree With Each Statement

Q505: Please indicate your level of agreement or disagreement with each of the following statements.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. I willingly support generic substitution for multi-source brand name prescription products (that is, those that are substitutable).</td>
<td>95%</td>
</tr>
<tr>
<td>b. Pharmacy benefit managers are increasingly denying reimbursement for brand name drugs when a generic is available.</td>
<td>95%</td>
</tr>
<tr>
<td>c. Health care plans are increasingly denying reimbursement for brand name drugs when a generic is available.</td>
<td>94%</td>
</tr>
<tr>
<td>d. Health care plans are increasingly forcing physicians to prescribe generic drugs.</td>
<td>87%</td>
</tr>
<tr>
<td>e. In order to keep customers who have prescription drug benefits, I have to support generic substitution</td>
<td>69%</td>
</tr>
<tr>
<td>f. All products approved by the Food and Drug Administration as generic drugs can be considered therapeutically equivalent with brand name products</td>
<td>65%</td>
</tr>
<tr>
<td>g. Therapeutic failures are a serious problem with some generic products.</td>
<td>23%</td>
</tr>
<tr>
<td>h. Wider use of generic drugs will mean that less money will be used for research and development of new pharmaceuticals.</td>
<td>22%</td>
</tr>
</tbody>
</table>

Base = 502

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About one in four (23%) pharmacists in this study strongly or somewhat agree that therapeutic failures are a serious problem with some generic products. Male pharmacists are more likely than female pharmacists to say therapeutic failures are rarely a serious problem with some generic drugs (75% v 66%). Female pharmacists, on the other hand, are more likely than male pharmacists to say therapeutic failures are sometimes a serious problem with some generic products (29% v 16%).

_Virtually all pharmacists support the use of generic drugs and most believe they must dispense generics to people who do not have prescription drug benefits because of price._

<table>
<thead>
<tr>
<th>Table 5</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Proportion of Pharmacists Who Agree Somewhat or Strongly</td>
<td></td>
</tr>
<tr>
<td>With the Following Statements</td>
<td></td>
</tr>
<tr>
<td>Q510: Please indicate your level of agreement or disagreement with each</td>
<td></td>
</tr>
<tr>
<td>of the following statements.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Statement</th>
<th>Proportion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Most pharmacists support the use of generics today.</td>
<td>98%</td>
</tr>
<tr>
<td>Most physicians support the use of generics today.</td>
<td>90%</td>
</tr>
<tr>
<td>The price difference between generic and brand name drugs is often so</td>
<td>89%</td>
</tr>
<tr>
<td>great that I feel I must dispense prescriptions with generic substitutes for people who do not have prescription drug benefits.</td>
<td></td>
</tr>
<tr>
<td>There are some drugs with narrow therapeutic indices that should not be substituted even when required by third parties.</td>
<td>73%</td>
</tr>
<tr>
<td>Being required to dispense prescriptions with generic substitutes for drugs with narrow therapeutic indices will increase my exposure to lawsuits.</td>
<td>37%</td>
</tr>
</tbody>
</table>


Base = 502
Pharmacists report it is important to have information about the comparative effectiveness of medications to treat specific conditions.

Three-fourths (76%) say it is somewhat or very important to have this information available (Figure 6).

Pharmacists’ Perception of the Importance of Comparative Effectiveness Information

Q520: How important is it to you that information about the comparative effectiveness of medications to treat specific conditions is available?

Base = 502

Pharmacists say several groups provide information about the comparative effectiveness of medications to treat specific conditions, but that it should be the responsibility of the Food and Drug Administration.

More than eight in ten (84%) of pharmacists say it is the role of the Food and Drug Administration to provide information about the effectiveness of medications to treat specific conditions and almost two-thirds (64%) say pharmaceutical companies have this responsibility. About half (55%) say academic centers have a role to play in this process as well as independent groups (49%).

Almost six in ten (58%) say it should be the role of the Food and Drug Administration to provide comparative effectiveness information about medications to treat specific conditions. Only 15 per cent say it should be the role of independent groups, 14 per cent
say it should be the role of pharmaceutical companies, and ten per cent say it should be the role of academic centers.

**Electronic communications impacts pharmacy orders.**

Two-thirds (66%) of pharmacists say they frequently receive incoming prescriptions via fax but only 12 per cent say they frequently receive incoming prescriptions electronically through e-prescribing. About a third (34%) says they receive prescriptions through e-prescribing sometimes or frequently.

**Pharmacists are rarely or never paid for non-dispensing related services such as medication therapy management.**

Even though the public may be willing to pay a pharmacy to receive advice about health care, seven in ten (69%) pharmacists say they are never paid for non-dispensing related services. A survey of consumers found that one out of five (22%) of adults say they are willing to pay pharmacies a fee for health care advice.  

**Conclusions**

Pharmacists and their customers could benefit from having more information to understand and compare the costs of prescription drugs. This may be even more important as the Medicare prescription drug benefit is implemented in 2006. While the vast majority of pharmacists agree it is important for the Medicare drug benefit to promote the use of generic drugs, they need resources such as brochures and other handout materials to advise their customers about this new benefit. It would be helpful if these materials addressed the following three high priority issues: drug pricing, formulary restrictions, and benefits.

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Welcome and thank you for agreeing to participate in this survey. We are asking pharmacists across the USA some questions about their views on and experiences with the use of generic drugs. Please note that all of your responses will be kept confidential.

Q325 Which of the following best describes your work setting?
- 30% Independent pharmacy
- 51% Chain drug store pharmacy
- 19% Pharmacy located in a grocery or other type of store

Q330 In what year were you born?
- 18% 18-29
- 29% 30-39
- 25% 40-49
- 21% 50-59
- 7% 60+
SECTION 400: ATTITUDES TOWARD GENERIC DRUGS

Q400 Approximately what percentage of your time is spent consulting with pharmacy customers about their prescription drugs? Please give us your best estimate.

15% 0-10%
27% 11-20%
25% 21-30%
12% 31-40%
8% 41-50%
4% 51-60%
4% 61-70%
4% 71-80%
* 81-90%
* 91-100%

Q402 Please indicate which statement best expresses your general opinion of substituting generic medications for brand name drugs.

32% I support generic substitution for brand name drugs in all cases where a generic is available.
68% I support generic substitution for brand name drugs in most cases
- I do not support generic substitution for brand name drugs.

Q405 Approximately what percent of prescription orders received on a typical day are written for multi-source (off patent) drug products?

2% 0-10%
2% 11-20%
3% 21-30%
5% 31-40%
17% 41-50%
25% 51-60%
17% 61-70%
20% 71-80%
9% 81-90%
1% 91-100%
Q410 Of those multi-source drug product prescription orders, what percent allow you to substitute a generic?

1% 0-10%  
2% 11-20%  
2% 21-30%  
2% 31-40%  
6% 41-50%  
3% 51-60%  
5% 61-70%  
9% 71-80%  
23% 81-90%  
48% 91-100%

Q425 How often do your customers want to talk about the following?

**The appropriate use of their medications**
* Never  
  7% Rarely  
  55% Sometimes  
  37% Frequently

**The side effects of prescription drugs**
- Never  
  4% Rarely  
  33% Sometimes  
  63% Frequently

**The cost of prescription drugs**
- Never  
  1% Rarely  
  23% Sometimes  
  76% Frequently

**Their experiences with generic drugs**
1% Never  
40% Rarely  
50% Sometimes  
10% Frequently
Q427 How prepared do you feel to talk with pharmacy customers about the following?

The appropriate use of their medications

- 1% Not At All/Not Very Prepared (NET)
  - Not at all Prepared
- 1% Not very Prepared
- 99% Somewhat/Very Prepared (NET)
  - 13% Somewhat Prepared
  - 86% Very Prepared

The side effects of prescription drugs

- 1% Not At All/Not Very Prepared (NET)
  - Not at all Prepared
- 1% Not very Prepared
- 99% Somewhat/Very Prepared (NET)
  - 23% Somewhat Prepared
  - 77% Very Prepared

The cost of prescription drugs

- 4% Not At All/Not Very Prepared (NET)
  * Not at all Prepared
- 3% Not very Prepared
- 96% Somewhat/Very Prepared (NET)
  - 33% Somewhat Prepared
  - 63% Very Prepared

Their experiences with generic drugs

- 1% Not At All/Not Very Prepared (NET)
  * Not at all Prepared
- 1% Not very Prepared
- 99% Somewhat/Very Prepared (NET)
  - 26% Somewhat Prepared
  - 72% Very Prepared
Q430  How do you normally find out about when a brand name drug’s patent has expired and a new generic alternative is available for the first time? Please select all that apply.

62%  From wholesalers or suppliers
59%  Pharmacy journal articles
58%  From my corporate office
55%  Pharmacy journal advertisements
51%  Informational literature (PDR
47%  From colleagues/peers
38%  Information from health insurers or pharmacy benefit managers
37%  Drug company written information
31%  From Internet/Webistes/Emails
29%  Drug manufacturer representatives
16%  Meetings/Conferences
9%   From customers
2%   From medical doctors
8%   Other

BASE = 42 Individuals who cited another source of finding out

Q431  How else do you find out when a brand name drug’s patent expires and a new generic alternative is available?

21%  Software/Computer system prompt (Epocrates)
19%  From wholesalers or suppliers
19%  From Internet/Webistes/Emails
12%  TV news media
10%  Pharmacy journal articles
10%  Informational literature (PDR
7%   From colleagues/peers
5%   Pharmacist letter
2%   Information from health insurers or pharmacy benefit managers
2%   Drug manufacturer representatives
2%   From customers
17%  Other
Q430 with coded answers  How do you normally find out about when a brand name drug’s patent has expired and a new generic alternative is available for the first time? Please select all that apply.

- 62%  From wholesalers or suppliers
- 59%  Pharmacy journal articles
- 58%  From my corporate office
- 55%  Pharmacy journal advertisements
- 52%  Informational literature (PDR
- 48%  From colleagues/peers
- 38%  Information from health insurers or pharmacy benefit managers
- 37%  Drug company written information
- 32%  From Internet/Websites/Emails
- 29%  Drug manufacturer representatives
- 16%  Meetings/Conferences
- 9%  From customers
- 2%  From medical doctors
- 2%  Software/Computer system prompt (Epocrates)
- 1%  TV news media
  *  Pharmacist letter
- 1%  Other

Q432  And among these information sources, which one do you feel is most reliable?

- 25%  From my corporate office
- 23%  From wholesalers or suppliers
- 20%  Pharmacy journal articles
- 14%  Informational literature (PDR
- 1%  From colleagues/peers
- 1%  Information from health insurers or pharmacy benefit managers
- 1%  Software/Computer system prompt (Epocrates)
  *  Pharmacist letter
  *  From customers
- 1%  None

Q435  How much would you say you know about the price differences between brand name drugs and generic drugs?

- 55%  A lot
- 42%  Some
- 3%  Very little
- 3%  Very little
Q460 How often do you feel pressured by pharmacy customers to dispense prescriptions with brand name drugs?

1% Never
49% Rarely
46% Sometimes
4% Frequently

Q465 How often do you feel pressured by pharmacy customers to dispense prescriptions with generic drugs?

4% Never
21% Rarely
33% Sometimes
42% Frequently

Q475 When dispensing a specific prescription, how often has a manufacturer of a brand name drug discouraged you from dispensing a generic version of their product?

14% Never
48% Rarely
34% Sometimes
4% Frequently

Q485 How often has a pharmacy benefit management company encouraged you to dispense a prescription with a brand name drug that is different from the brand name drug originally prescribed?

6% Never
19% Rarely
45% Sometimes
31% Frequently
Q505 Please indicate your level of agreement or disagreement with each of the following statements.

**SUMMARY TABLE OF TOTAL AGREE**

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Statement</th>
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<tbody>
<tr>
<td>95%</td>
<td>I willingly support generic substitution for multi-source brand name prescription products (that is, those that are substitutable)</td>
</tr>
<tr>
<td>95%</td>
<td>Pharmacy benefit managers are increasingly denying reimbursement for brand name drugs when a generic is available.</td>
</tr>
<tr>
<td>94%</td>
<td>Health care plans are increasingly denying reimbursement for brand name drugs when a generic is available.</td>
</tr>
<tr>
<td>87%</td>
<td>Health care plans are increasingly forcing physicians to prescribe generic drugs.</td>
</tr>
<tr>
<td>69%</td>
<td>In order to keep customers who have prescription drug benefits, I have to support generic substitution</td>
</tr>
<tr>
<td>65%</td>
<td>All products approved by the Food and Drug Administration as generic drugs can be considered therapeutically equivalent with brand name products.</td>
</tr>
<tr>
<td>23%</td>
<td>Therapeutic failures are a serious problem with some generic products.</td>
</tr>
<tr>
<td>22%</td>
<td>Wider use of generic drugs will mean that less money will be used for research and development of new pharmaceuticals.</td>
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</tbody>
</table>

**SUMMARY TABLE OF TOTAL DISAGREE**

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<td>I willingly support generic substitution for multi-source brand name prescription products (that is, those that are substitutable)</td>
</tr>
<tr>
<td>2%</td>
<td>Pharmacy benefit managers are increasingly denying reimbursement for brand name drugs when a generic is available.</td>
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</table>

All products approved by the Food and Drug Administration as generic drugs can be considered therapeutically equivalent with brand name products.

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Wider use of generic drugs will mean that less money will be used for research and development of new pharmaceuticals.

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Therapeutic failures are a serious problem with some generic products.

59% Strongly/Somewhat Disagree (NET)
30% Strongly Disagree
28% Somewhat Disagree
18% Neither Agree Nor Disagree
23% Somewhat/Strongly Agree (NET)
20% Somewhat Agree
4% Strongly Agree

Health care plans are increasingly denying reimbursement for brand name drugs when a generic is available.

3% Strongly/Somewhat Disagree (NET)
2% Strongly Disagree
1% Somewhat Disagree
3% Neither Agree Nor Disagree
94% Somewhat/Strongly Agree (NET)
20% Somewhat Agree
74% Strongly Agree

Pharmacy benefit managers are increasingly denying reimbursement for brand name drugs when a generic is available.

2% Strongly/Somewhat Disagree (NET)
1% Strongly Disagree
1% Somewhat Disagree
2% Neither Agree Nor Disagree
95% Somewhat/Strongly Agree (NET)
21% Somewhat Agree
74% Strongly Agree

Health care plans are increasingly forcing physicians to prescribe generic drugs.

5% Strongly/Somewhat Disagree (NET)
2% Strongly Disagree
3% Somewhat Disagree
8% Neither Agree Nor Disagree
87% Somewhat/Strongly Agree (NET)
30% Somewhat Agree
57% Strongly Agree

I willingly support generic substitution for multi-source brand name prescription products (that is, those that are substitutable).

3% Strongly/Somewhat Disagree (NET)
1% Strongly Disagree
1% Somewhat Disagree
2% Neither Agree Nor Disagree
95% Somewhat/Strongly Agree (NET)
17% Somewhat Agree
78% Strongly Agree
In order to keep customers who have prescription drug benefits, I have to support generic substitution.

12% Strongly/Somewhat Disagree (NET)
5% Strongly Disagree
6% Somewhat Disagree
19% Neither Agree Nor Disagree
69% Somewhat/Strongly Agree (NET)
32% Somewhat Agree
37% Strongly Agree

Q510 Please indicate your level of agreement or disagreement with each of the following statements.

SUMMARY TABLE OF TOTAL AGREE
98% Most pharmacists support the use of generics today.
90% Most physicians support the use of generics today.
89% The price difference between generic and brand name drugs is often so great that I feel I must dispense prescriptions with generic substitutes for people who do not have prescription drug benefits.
73% There are some drugs with narrow therapeutic indices that should not be substituted even when required by third parties.
37% Being required to dispense prescriptions with generic substitutes for drugs with narrow therapeutic indices will increase my exposure to lawsuits.

SUMMARY TABLE OF TOTAL DISAGREE
34% Being required to dispense prescriptions with generic substitutes for drugs with narrow therapeutic indices will increase my exposure to lawsuits.
18% There are some drugs with narrow therapeutic indices that should not be substituted even when required by third parties.
5% The price difference between generic and brand name drugs is often so great that I feel I must dispense prescriptions with generic substitutes for people who do not have prescription drug benefits.
4% Most physicians support the use of generics today.
1% Most pharmacists support the use of generics today.

Being required to dispense prescriptions with generic substitutes for drugs with narrow therapeutic indices will increase my exposure to lawsuits.

34% Strongly/Somewhat Disagree (NET)
14% Strongly Disagree
20% Somewhat Disagree
29% Neither Agree Nor Disagree
37% Somewhat/Strongly Agree (NET)
28% Somewhat Agree
9% Strongly Agree

The price difference between generic and brand name drugs is often so great that I feel I must dispense prescriptions with generic substitutes for people who do not have prescription drug benefits.

5% Strongly/Somewhat Disagree (NET)
2% Strongly Disagree
3% Somewhat Disagree
6% Neither Agree Nor Disagree
89% Somewhat/Strongly Agree (NET)
28% Somewhat Agree
61% Strongly Agree
Most physicians support the use of generics today.
- 4% Strongly/Somewhat Disagree (NET)
- 1% Strongly Disagree
- 3% Somewhat Disagree
- 6% Neither Agree Nor Disagree
- 90% Somewhat/Strongly Agree (NET)
- 51% Somewhat Agree
- 40% Strongly Agree

Most pharmacists support the use of generics today.
- 1% Strongly/Somewhat Disagree (NET)
- 1% Strongly Disagree
- 1% Somewhat Disagree
- 1% Neither Agree Nor Disagree
- 98% Somewhat/Strongly Agree (NET)
- 25% Somewhat Agree
- 73% Strongly Agree

There are some drugs with narrow therapeutic indices that should not be substituted even when required by third parties.
- 18% Strongly/Somewhat Disagree (NET)
- 5% Strongly Disagree
- 14% Somewhat Disagree
- 9% Neither Agree Nor Disagree
- 73% Somewhat/Strongly Agree (NET)
- 41% Somewhat Agree
- 31% Strongly Agree

Q515 How often do you think therapeutic failures are a serious problem with some generic products?
- 7% Never
- 72% Rarely
- 21% Sometimes
  - * Frequently
Q517  Which generic products are most likely to result in therapeutic failures?

58%  **Generic Product (NET)**
- 31% Warfarin
- 26% Levothyroxine
- 17% Digoxin
- 17% Phenytoin
- 6% Theophylline
- 3% Carbamazepine
- 3% Fentanyl
- 2% Conjugated Estrogen
- 1% Cyclosporine
- 1% Furosemide
- 1% Gabapentin
- 1% Amiodarone
- 1% Lisinopril
- 1% Lithium
- 6% Other generic product mentions

26%  **Class of medication (NET)**
- 11% Thyroid medication
- 5% Anti seizure / convulsion medication
- 3% Hormone/HRT products
- 2% Pain medication
- 2% Anticoagulant medication
- 2% Cardiovascular medication
- 1% Pancreatic enzymes
- 1% Birth control medication
- 1% Antipsychotic medication
- 1% Immunosuppressant
- 1% Antibiotics
- 4% Other classes of medication

21%  **Brand name (NET)**
- 10% Coumadin
- 8% Synthroid
- 7% Dilantin
- 3% Lanoxin
- 2% Tegretol
- 1% Levoxyl
- 5% Other brand name mentions

4%  **Narrow therapeutic index formulations**

2%  **Extended release formulations**

2%  **Not AB rated medications**

3%  **Other**

5%  **None/Nothing**
Q 520 How important is it to you that information about the comparative effectiveness of medications to treat specific conditions is available?

- 22% Very/Somewhat Unimportant (NET)
- 19% Very unimportant
- 3% Somewhat unimportant
- 76% Somewhat/Very Important (NET)
- 18% Somewhat important
- 58% Very important
- 1% Not sure
- 1% Decline to answer

Q525 Whose role is it to provide information about the comparative effectiveness of medications to treat specific conditions? Please select all that apply.

- 84% Food and Drug Administration
- 64% Pharmaceutical companies
- 55% Academic centers
- 49% Independent groups
- 5% Other

BASE = 27 respondents who said other in Q525

Q525 Whose role is it to provide information about the comparative effectiveness of medications to treat specific conditions? Please select all that apply.

- 37% Pharmacists
- 26% Food and Drug Administration
- 19% Pharmaceutical companies
- 15% Doctors
- 11% Academic centers
- 7% Medical journals
- 4% Independent groups
- 26% Other

Q525 with coded responses Whose role is it to provide information about the comparative effectiveness of medications to treat specific conditions? Please select all that apply.

- 84% Food and Drug Administration
- 64% Pharmaceutical companies
- 55% Academic centers
- 49% Independent groups
- 2% Pharmacists
- 1% Doctors
- * Medical journals
- 1% Other
Q530 Whose role should it be to provide information about the comparative effectiveness of medications to treat specific conditions? Please select only one response.

- 58% Food and Drug Administration
- 15% Independent groups
- 14% Pharmaceutical companies
- 10% Academic centers

Q535 How often do you receive incoming prescriptions by fax?

- * Never
- 7% Rarely
- 26% Sometimes
- 66% Frequently

Q540 How often do you receive incoming prescriptions electronically, that is, through e-prescribing?

- 42% Never
- 24% Rarely
- 22% Sometimes
- 12% Frequently
Q545  How often are you paid for non-dispensing related services such as medication therapy management services?

- 69% Never
- 25% Rarely
- 6% Sometimes
- Frequently

Q550  How well do you understand your pharmacy customers’ economic concerns about drug costs?

- 3% Not at all
- 37% Not very well
- 60% Somewhat well
- 3% Very well

Q555  How important is it for the new Medicare drug benefit which takes effect in 2006 to promote the use of generic drugs?

- 11% Very/Somewhat Unimportant (NET)
- 8% Very unimportant
- 3% Somewhat unimportant
- 4% Neither unimportant nor important
- 85% Very/Somewhat Important (NET)
- 22% Somewhat important
- 63% Very important
Q557 What information, or resources, do pharmacists need to help them advise pharmacy customers about the new Medicare prescription drug benefit?

53% **Resources (NET)**
- 18% Brochures/Pamphlets/Handouts/Booklets
- 17% Internet/Website/Emails
- 6% Phone number/Toll free numbers
- 6% Literature
- 5% Continuing education (CME)
- 4% Printed/written material
- 3% Information from Medicare
- 3% Media
- 2% Information from associations
- 2% Software
- 2% Manual
- 1% Newsletters
- 1% Meetings/Seminars
- 1% Training
- 1% CMS
- 1% Presentations/Notes/Worksheets
- 1% Cards
- 1% Programs
- 1% Mailings
- 6% Other resource mentions

52% **Information (NET)**
- 19% Pricing information
- 16% Formulary information
- 10% Benefits information
- 8% Plan/Program specifics
- 6% Coverage information
- 5% Co-pay information
- 4% Eligibility information
- 3% Guidelines/Rules/Instructions
- 3% Comparison of different plans
- 2% Reimbursement information
- 2% Information on plan limits
- 2% Information on generics
- 2% Enrollment information
- 2% Information (unsp)
- 1% Contact information
- 1% Information on medication source
- 1% Availability information
- 1% Requirement information
- 1% Company/Corporate information
- 1% Efficacy information
- 5% Other information mentions

17% **Clear concise easy to read information**

4% **Other**
**Q560** How difficult is it for pharmacists to know all the different benefit plan formulary parameters?

<table>
<thead>
<tr>
<th>Rating</th>
<th>Percentage</th>
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</thead>
<tbody>
<tr>
<td>Very/Somewhat Difficult (NET)</td>
<td>96%</td>
</tr>
<tr>
<td>Very difficult</td>
<td>75%</td>
</tr>
<tr>
<td>Somewhat difficult</td>
<td>21%</td>
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<tr>
<td>Neither difficult nor easy</td>
<td>3%</td>
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<tr>
<td>Neither difficult nor easy</td>
<td></td>
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<tr>
<td>Somewhat/Very Easy (NET)</td>
<td>1%</td>
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<tr>
<td>Somewhat easy</td>
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<tr>
<td>Very easy</td>
<td>-</td>
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</tbody>
</table>
### SECTION 600: STANDARD PHARMACIST DEMOGRAPHICS

**Q600** Are you…?

- **66%** Male
- **34%** Female

**Q605** Which of the following best describes your work setting?

- **26%** Independent Community Pharmacy (fewer than 4 stores under the same ownership)
- **5%** Small Chain Community Pharmacy (4 to 10 stores under the same ownership)
- **42%** Large Chain Community Pharmacy (more than 10 units under same ownership)
- **10%** Mass Merchandiser (i.e., Big Box Store)
- **17%** Supermarket Pharmacy
  - * Mail Service Pharmacy

**Q610** How many prescriptions are dispensed by your pharmacy per day at this time of year?

- * 0
- **28%** 1-150
- **29%** 151-250
- **16%** 251-300
- **27%** 301+
- **270.9 Mean**

**Q615** How many prescriptions or orders do you personally dispense/process daily at this time of year?

- **1%** 0
- **62%** 1-150
- **29%** 151-250
- **4%** 251-300
- **4%** 301+
- **152.9 Mean**

**Q620** How many customers do you personally consult with daily at this time of year?

- **1%** 0
- **96%** 1-150
- **2%** 151-250
- **1%** 251-300
  - * 301+
- **48.2 Mean**
Q625  What percent of your pharmacy customers fall into the following age categories? Your total must sum to 100%.

18 years or younger (pediatric)

1% 0%
46% 1-10%
37% 11-20%
12% 21-30%
4% 31-40%
1% 41-50%
* 51-60%
- 61-70%
- 71-80%
- 81-90%
- 91-100%

19 years to 44 years (young adult)

* 0%
27% 1-10%
44% 11-20%
17% 21-30%
6% 31-40%
3% 41-50%
1% 51-60%
* 61-70%
* 71-80%
* 81-90%
- 91-100%

45 years to 65 (midlife adult)

4% 1-10%
31% 11-20%
39% 21-30%
18% 31-40%
5% 41-50%
1% 51-60%
* 61-70%
* 71-80%
- 81-90%
- 91-100%
66 years to 84 (older adult)

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<td>71-80%</td>
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<td>-</td>
<td>81-90%</td>
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<td>91-100%</td>
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85 years and older (geriatric)

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Q630 How long have you been a practicing pharmacist?

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<tbody>
<tr>
<td>20%</td>
<td>0 to 4 years</td>
<td>17%</td>
<td>5 to 9 years</td>
<td>11%</td>
<td>10 to 14 years</td>
<td>12%</td>
<td>15 to 19 years</td>
</tr>
</tbody>
</table>
Knowledge Management
For more information, contact Linda L. Barrett, Ph.D. at 202-434-6197