

Most Medicated States

Where you live has an impact on what's in your medicine cabinet.

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You probably never stopped to think if where you live has anything to do with the number of prescription medications you're taking. But if you live in the American South, chances are you take more medications than you would if you lived on the other side of the Mason-Dixon Line.

In fact, when it comes to residents popping the largest numbers of pills, Southern states beat the average by a long shot. States filled an average 11.1 retail prescriptions per capita in 2006, according to the latest figures compiled by the non-profit Kaiser Family Foundation's statehealthfacts.org and Vector One: National, data provider Verispan's national-level prescription and patient tracking service.

Well above that average is West Virginia, which came in first with 17.2 retail prescriptions filled per capita, followed by Missouri, 15.9; Tennessee, 15.8; Alabama, 15.7; and Kentucky, 15.4.

[In Pictures: The 10 Most Medicated States](#)

At the bottom of the list were Alaska, 6.5; California, 7.4; and Hawaii, 7.7.

Behind The Numbers

Verispan collected the 2006 data from a panel of retail pharmacies (including independent and chain pharmacies, food stores and mass merchandisers found in more than 800 regional zones), third-party payers and other data providers. Prescriptions may have been new or refills of both brand name and generic drugs. The numbers exclude mail-order purchases, which have been reported to make up just under 7% of total prescriptions filled in 2006.

While it may seem strange that states and regions have such disparities in terms of their residents' use of prescription drugs, other research bears out similar findings. Studies in 2000 and 2006, conducted by pharmacy benefit manager Express Scripts on millions of patients enrolled in a commercial plan, show that Kentucky and Louisiana were among the top five states in both years with the highest overall prevalence of seven major drug therapy classes, including anti-hyperlipidemics (drugs that lower lipid levels in the blood), anti-diabetics, anti-hypertensives, gastrointestinal medications, antidepressants, analgesics/anti-inflammatories and estrogen.

West Virginia, Tennessee, Alabama and Mississippi also commonly appeared among the top five states with the highest usages of these types of drugs in 2006. The trend does not come without a price tag. Express Script's research suggests that many Southern states, where prevalence of certain prescription drugs and prevalence increases were often greater, had spending increases of up to \$200 per commercially insured resident. Those costs affect businesses that subsidize health care, not to mention the individuals battling the health problems that drive their needs for prescription meds.

A Weighty Matter

So why is use of prescription drugs highest in the South? Experts say a major reason is high obesity rates in the region. About 32.6% of adults in Mississippi were considered obese in 2007, according to the latest statistics from the Centers for Disease Control and Prevention (CDC). Alabama, Louisiana, Tennessee and West Virginia rounded out the top five heavyweights, all registering rates over 30%.

"Obesity is just a known risk factor for chronic conditions, such as diabetes and hypertension," says Emily Cox, senior director of research for Express Scripts. "If you have one of those conditions, the primary mode of care in many cases is going to be drug therapy."

Disease prevalence in the South may be tied to demographics, too, says Dr. Catherine DuBeau, a professor of medicine for the University of Chicago and member of the American Geriatrics Society.

Southern states such as Mississippi, Alabama, Georgia, Louisiana and South Carolina have some of the nation's largest black populations, according to the CDC. The American Diabetes Association estimates that black Americans are 1.6 times more likely to have diabetes than non-Latino whites. The group also experiences higher rates of some of the condition's serious complications, including cardiovascular disease.

The Unknowns

And then there are differences that are harder to quantify. The penetration of health plans and the prescription drugs they cover in a particular state may affect what's being prescribed, says Mitch Rothholz, chief of staff of the American Pharmacists Association.

Likewise, certain states may have more health screenings than others or a greater number of doctors who initiate drug treatment early, Cox adds. Some physicians also may have a greater propensity to prescribe drug treatment than their counterparts across the country. That may be influenced by doctors' training, peers, literature they read and their experiences in prescribing particular drug treatments as well as patients' preferences.

Take for instance, the use of estrogen to treat the symptoms of menopause. In 2002, researchers halted a Women's Health Initiative trial, which examined the risks and benefits of continuous estrogen and progestin hormone-replacement therapy, after reporting that healthy, post-menopausal women taking the combination had an increased risk of breast cancer.

In 2004, a trial involving the use of estrogen alone was stopped early because the therapy increased the risk of stroke. The trials' findings were highly publicized; as a result, the U.S. Food and Drug Administration requested that manufacturers of all post-menopausal hormone therapies place a black-box warning on their labels.

But while use of estrogen dropped in every state between 2000 and 2006, according to Express Scripts, the highest prevalence of use continued to be in Southern states, including Arkansas and Louisiana.

Regardless of where you live, however, if you're concerned about the number of prescription drugs you're taking, health experts recommend talking to your physician or pharmacist. They can help you figure out if all of the medications you're taking are appropriate for you and are effectively treating your health problems.