

Innovation, costs, and sustainability: what the National Observatory on the Use of Medicines (OsMed) 2024 data reveal about Italy's Pharmaceutical System

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The Italian Medicines Agency (AIFA) has published, on November 10, 2025, the 2024 report of the National Observatory on the Use of Medicines (OsMed)¹, which provides crucial data on pharmaceutical consumption and expenditure in Italy.

In 2024, total pharmaceutical expenditure reached € 37.2 billion (+2.8% compared to 2023), 72% of which was covered by the National Health Service (SSN). Public spending increased by 7.7%, while private expenditure exceeded € 10 billion². Italian citizens consumed 1,895 doses of medicines per 1,000 inhabitants per day – nearly two doses per person. On average, each citizen received 18 medication packs per year.

Expenditure on medicines purchased by public healthcare facilities amounted to € 17.8 billion, a 10% increase compared to 2023, driven by rising consumption (+4.7%) and an increase in the average cost of therapies (+4.8%). Hospital pharmaceutical spending per capita reached € 301.8. Public outpatient pharmaceutical expenditure totalled € 13.7 billion (+5.1%).

Anticancer and immunomodulatory medicines represent the largest category, accounting for 47.3% and 49.6% of hospital pharmaceutical expenditure and € 8.2 billion in total spending. Cardiovascular drugs rank second with € 3.7 billion, but they lead in consumption volumes, with 523 defined daily doses (DDD) per 1,000 inhabitants per day. Conversely, the use of systemic antibiotics decreased by 1.3% compared with 2023, reflecting antimicrobial stewardship initiatives.

In 2024, public spending on antidiabetic medicines reached € 1.642 billion, marking a 13.2% increase from the previous year. This rise was driven by both growing consumption (+4.3%) and higher average cost per dose (+8.3%), along with a clear shift toward more recently introduced drugs such as GLP-1 analogues, gliflozins, and their combinations. In particular, GLP-1 analogues (a class that includes semaglutide) showed a 1.8% reduction in average cost, yet recorded an 11.5% increase in total expenditure and a 13.3% rise in consumption. Semaglutide itself displayed exceptional growth, with spending up by 58.4% and consumption up by 59.8%. This therapeutic class, alone or combined with insulins,

represented in 2024 the category with the highest annual cost per user: € 722.5 for GLP-1 analogues alone and € 736.1 when combined with insulins³.

Significant gender disparities persist: 72% of women receive pharmacological prescriptions compared with 63% of men. The gap is especially marked in the 20-59 age group, where higher use of antibiotics, antidepressants, and medicines for conditions specific to women is observed⁴.

Generic medicines account for only 23.5% of public pharmaceutical spending and 31.6% of consumption, showing steady yet limited growth over the past five years. AIFA's analysis estimated approximately € 5.3 billion in savings from 2017 to 2024 in the expenditure on Class A medicines reimbursed by the SSN, thanks to the use of generics.

The OsMed 2024 data highlight the growing influence of innovative, high-cost medicines on national pharmaceutical spending and reinforce the need for careful resource management. Strengthening governance, promoting broader adoption of generics, and supporting clinically appropriate prescribing will be essential to maintain equitable access. These coordinated actions are crucial to ensuring long-term sustainability, improving system resilience, and preserving the overall quality and efficiency of Italy's pharmaceutical landscape.

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