

OCD

(Obsessive-Compulsive Disorder)

MEDICATIONS

BY CANDELARIA ZIZZI



CONTEXT & PURPOSE

ABOUT THE DATA

Data on 1500 OCD-diagnosed individuals, covering diverse parameters, offering detailed demographic and clinical profiles.

Title: 'OCD Patient Dataset: Demographics & Clinical Data'

Date: November 2023

Source: [Kaggle](#)

ANALYSIS FOR MARKET ACCESS PROJECT



Provide insights into prevalent OCD medications by examining prescription trends and demographic patterns.



Get a sense of market needs and areas where a new medication can excel.

QUESTIONS TO ANALYSE

1

COMPETITORS ANALYSIS

Determine the most frequently prescribed medications for OCD within the dataset.

2

PATIENT PROFILING

Identify and analyse specific patient groups based on factors such as demographic, clinical, and socioeconomic information, to understand potential benefits within each group.

3

PREDISPOSITION FOR MEDICATION USE

Explore any specific conditions or factors within the OCD cases that might significantly influence the need for medication, guiding potential directions for a new medication's market positioning.

COMMONLY PRESCRIBTED MEDICATIONS

BENZODIAZEPINE

26%

SNRI

25%

SSRI

23%

Not medicated people 26%

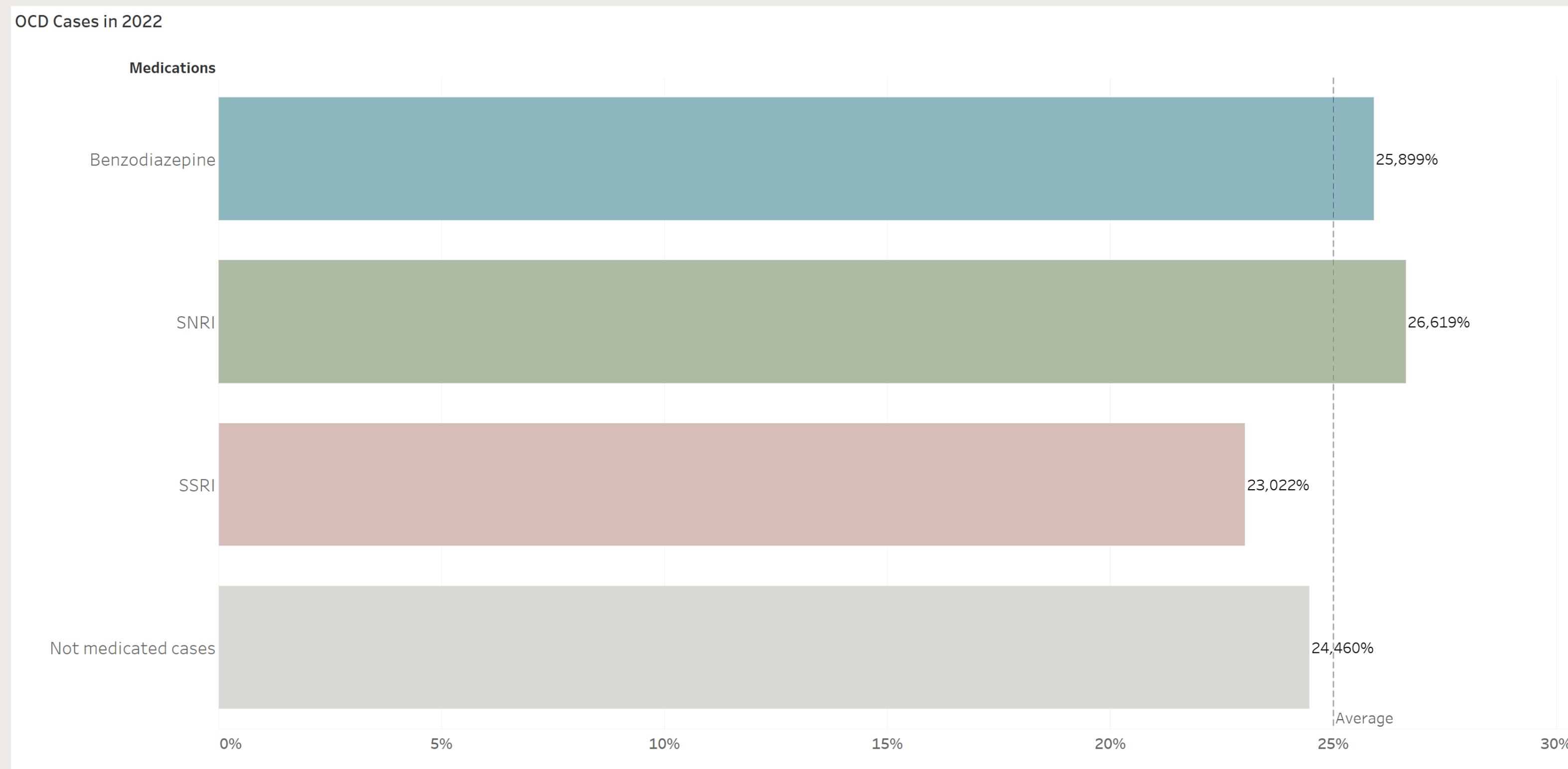
****Benzodiazepines** are a class of medications primarily used to treat conditions like anxiety, insomnia, and seizures. They work by enhancing the effect of a neurotransmitter called gamma-aminobutyric acid (GABA) in the brain, which helps to calm or sedate the individual. Some common benzodiazepines include diazepam (Valium), alprazolam (Xanax), lorazepam (Ativan), clonazepam (Klonopin), and others. These medications are known for their calming effects and are often prescribed for short-term relief of anxiety symptoms.

****SNRI** stands for Serotonin-Norepinephrine Reuptake Inhibitors. Medications falling under this category include drugs like venlafaxine (Effexor XR), duloxetine (Cymbalta), and desvenlafaxine (Pristiq). SNRIs not only affect serotonin levels but also norepinephrine, another neurotransmitter linked to mood regulation and stress response. By inhibiting the reuptake of both serotonin and norepinephrine, SNRIs can have a broader impact on brain chemistry, potentially providing relief for a wider range of symptoms related to depression and anxiety.

****SSRI** stands for Selective Serotonin Reuptake Inhibitors. Medications in this group include fluoxetine (Prozac), sertraline (Zoloft), citalopram (Celexa), escitalopram (Lexapro), and paroxetine (Paxil), among others. SSRIs specifically target serotonin, a neurotransmitter involved in regulating mood, emotions, and behavior. They block the reabsorption (reuptake) of serotonin in the brain, making more of this neurotransmitter available to improve communication between brain cells, which can alleviate symptoms of depression and anxiety.

COMPETITORS ANALYSIS

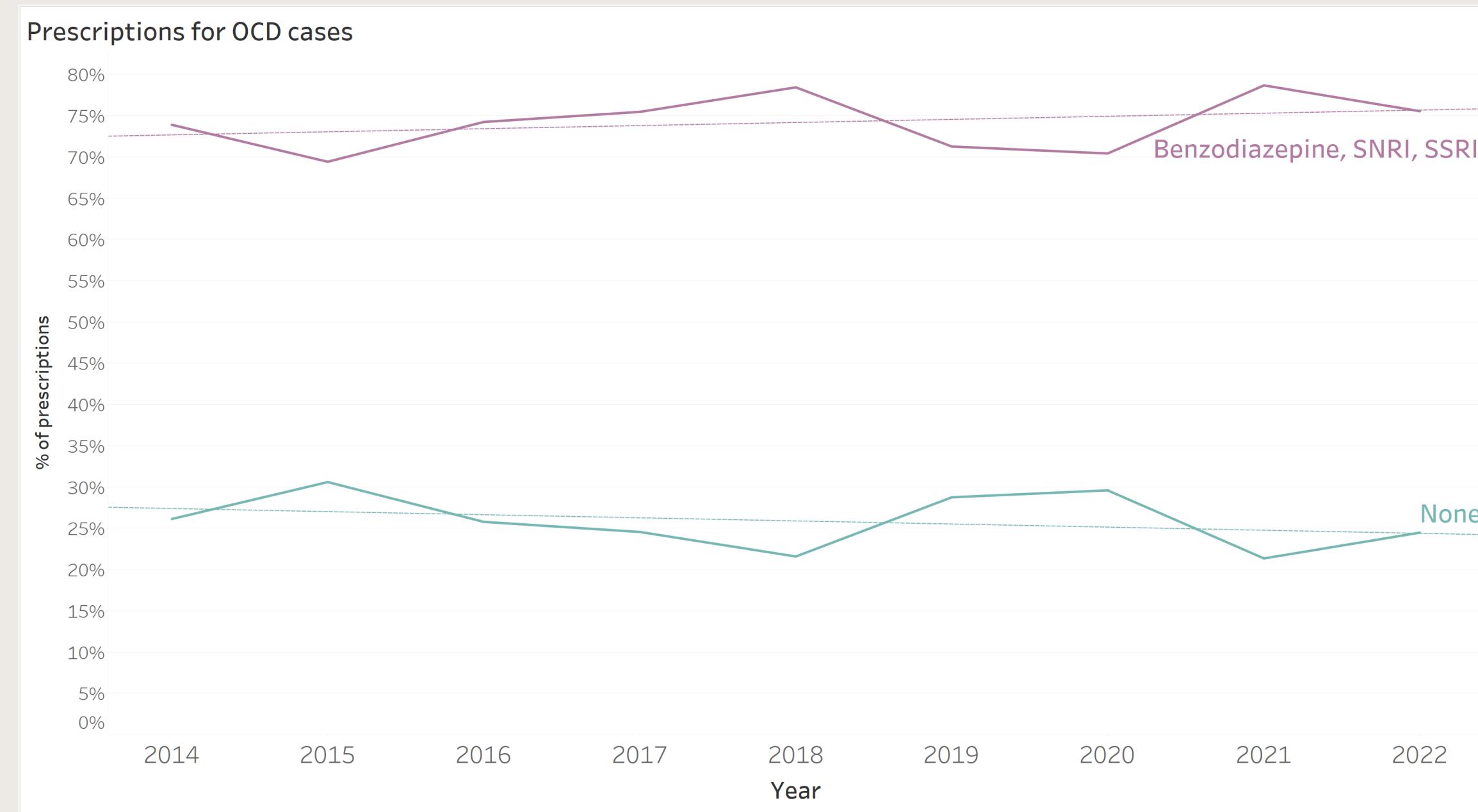
COMMONLY PRESCRIBED MEDICATIONS



*Last registered year information

COMPETITORS ANALYSIS

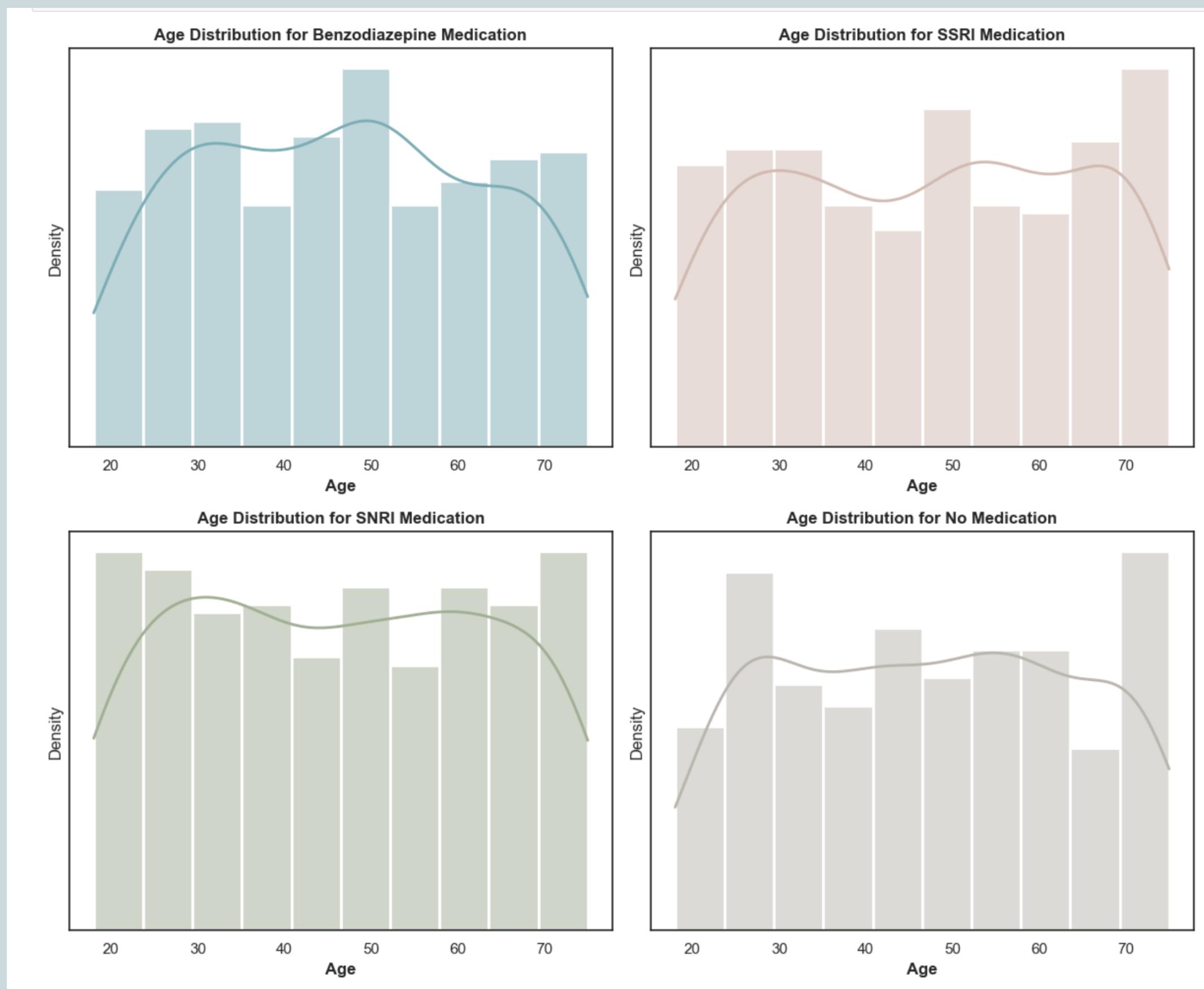
COMMONLY PRESCRIBTED MEDICATIONS



The trendline depicts a slight increase in the percentage of OCD patients receiving medication compared to those who are not.

PATIENT PROFILING

AGE DISTRIBUTION



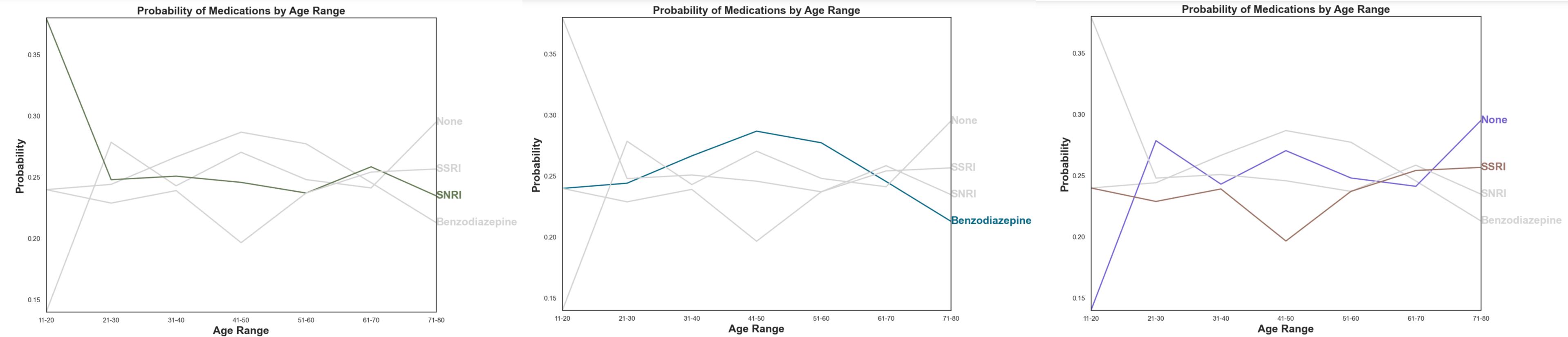
Representation of age distribution for each type of medication in the market, showing which age groups are more targeted by Benzodiazepine, SNRI and SSRI.

- Benzodiazepine: predominantly used by patients approximately 50 years old.
- SNRI: primarily prescribed for patients aged between 20 and 30 years, or senior patients.
- SSRI: more commonly prescribed for patients over 70 years old.

PATIENT PROFILING

AGE DISTRIBUTION

Probability of being medicated for OCD with Benzodiazepine, SNRI or SSRI given certain age.



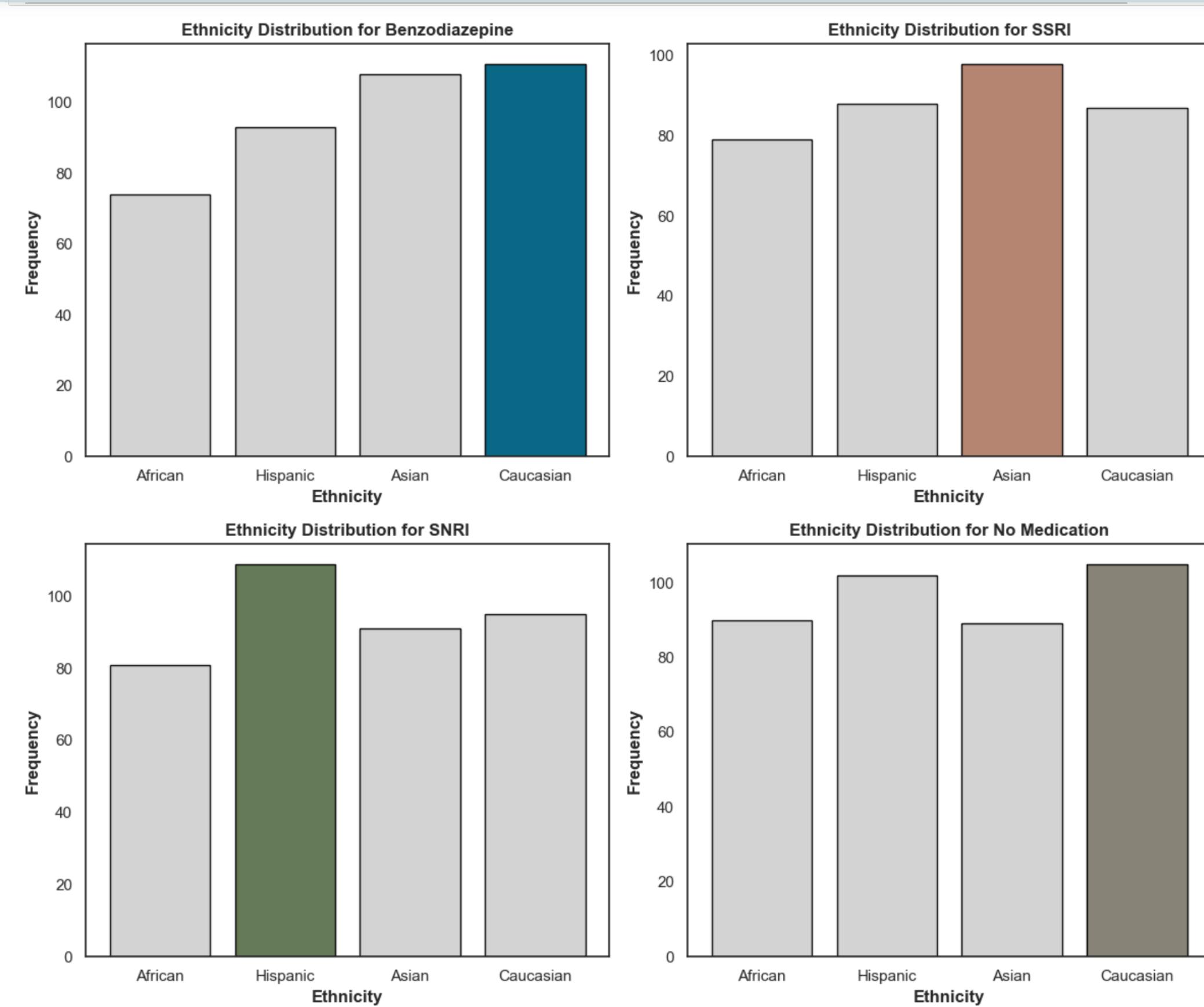
YOUTH: SNRI

ADULT: BENZODIAZEPINE

SENIOR: SSRI / NONE

PATIENT PROFILING

ETHNICITY DISTRIBUTION



Representation of ethnic distribution for each type of medication in the market, indicating which ethnic groups are more targeted by Benzodiazepine, SNRI, and SSRI.

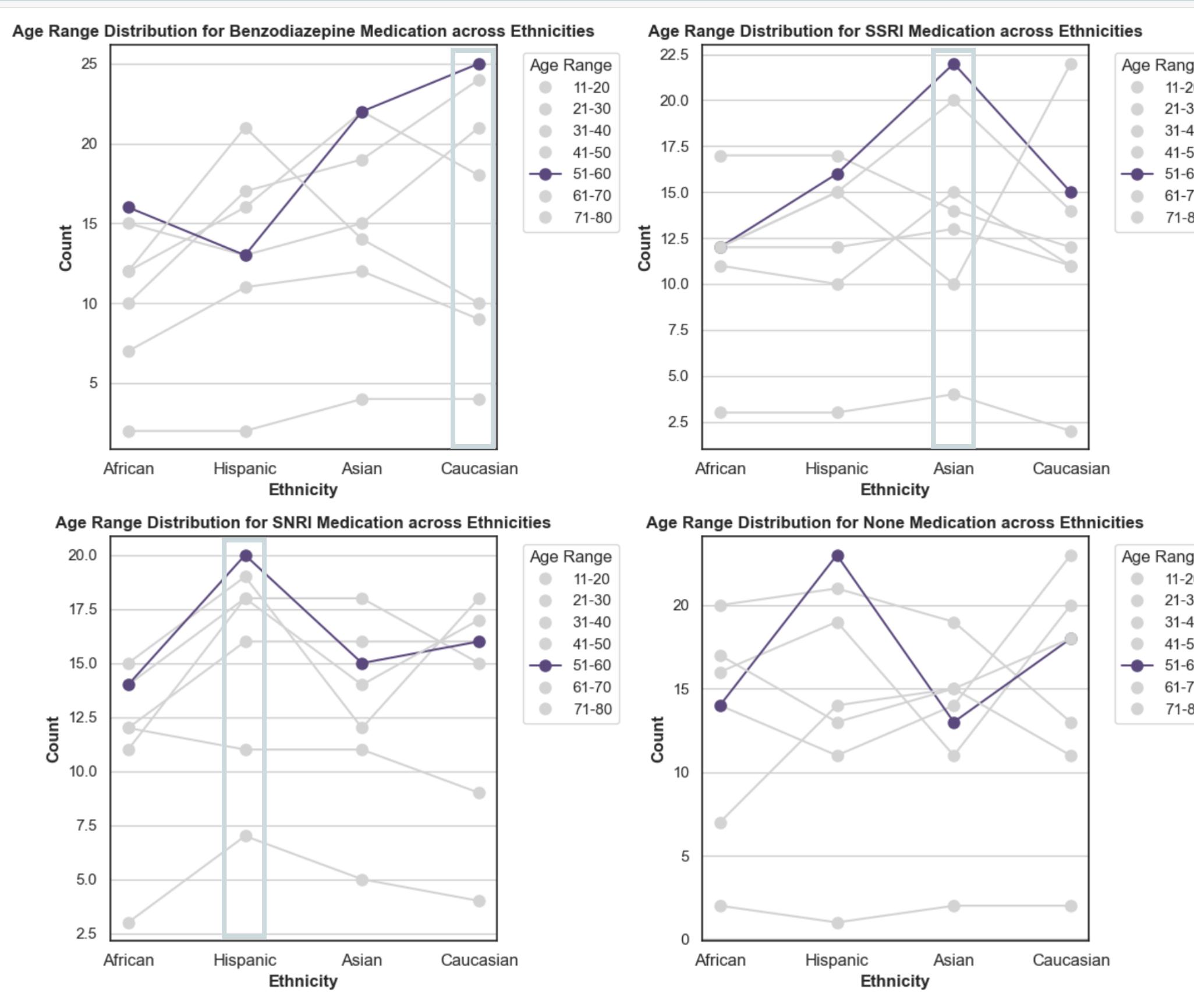
- Benzodiazepine: predominantly used by Caucasian patients.
- SNRI: primarily prescribed for Hispanic patients.
- SSRI: more commonly prescribed for Asian patients.

Given the lack of specific information about the territories where each diagnosis was made, we emphasize the necessity of developing a regional analysis. This analysis would help determine whether these trends reflect doctors' preferences in prescribing certain medications in different continents, market sizes, or if it pertains to treatment efficacy, among other potential reasons.

PATIENT PROFILING

ETHNICITY & AGE

A

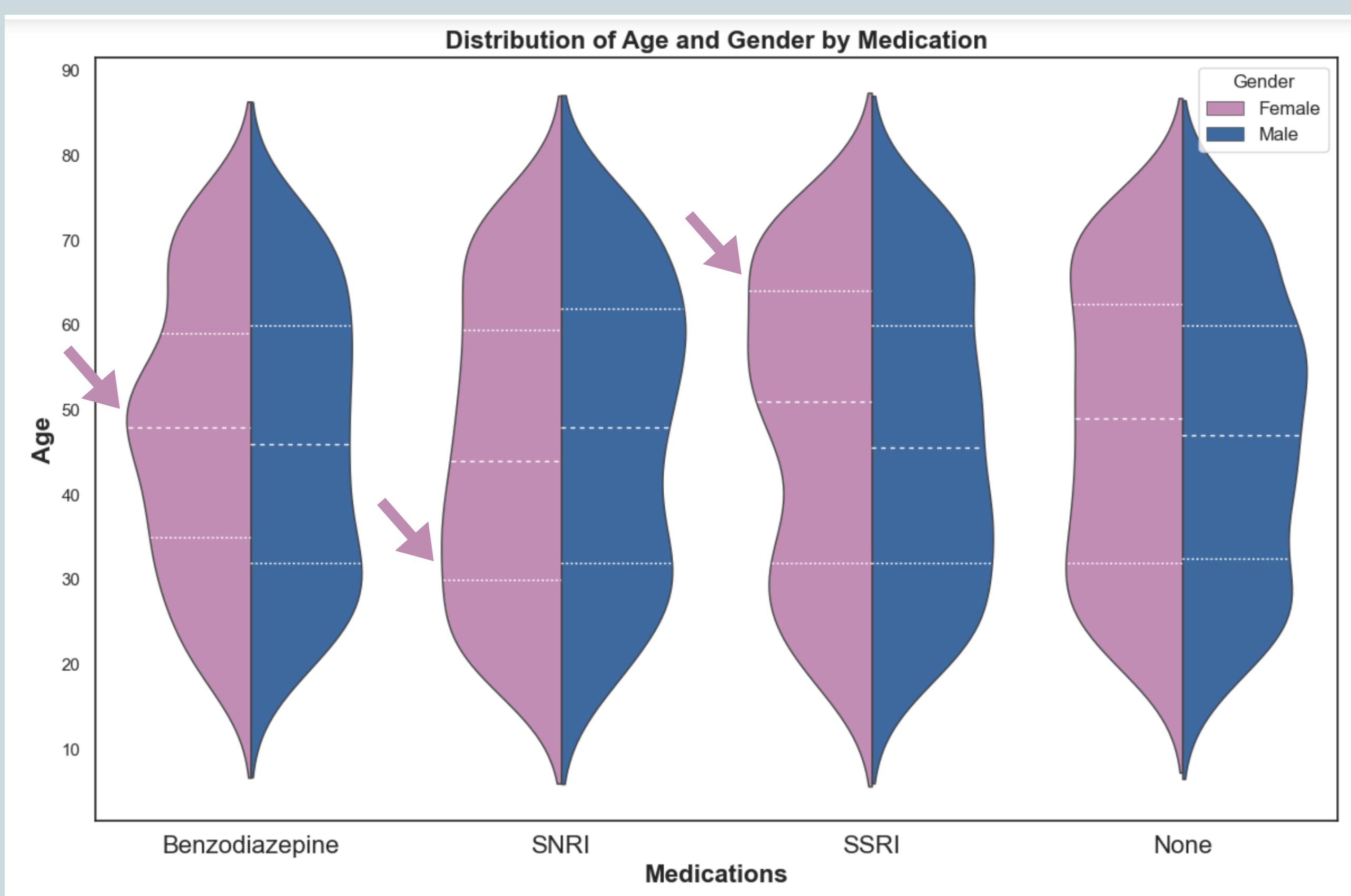


C

The representation combines ethnic groups and age ranges, indicating that across various ethnicities, patients between 51 and 60 years old are the most targeted group.

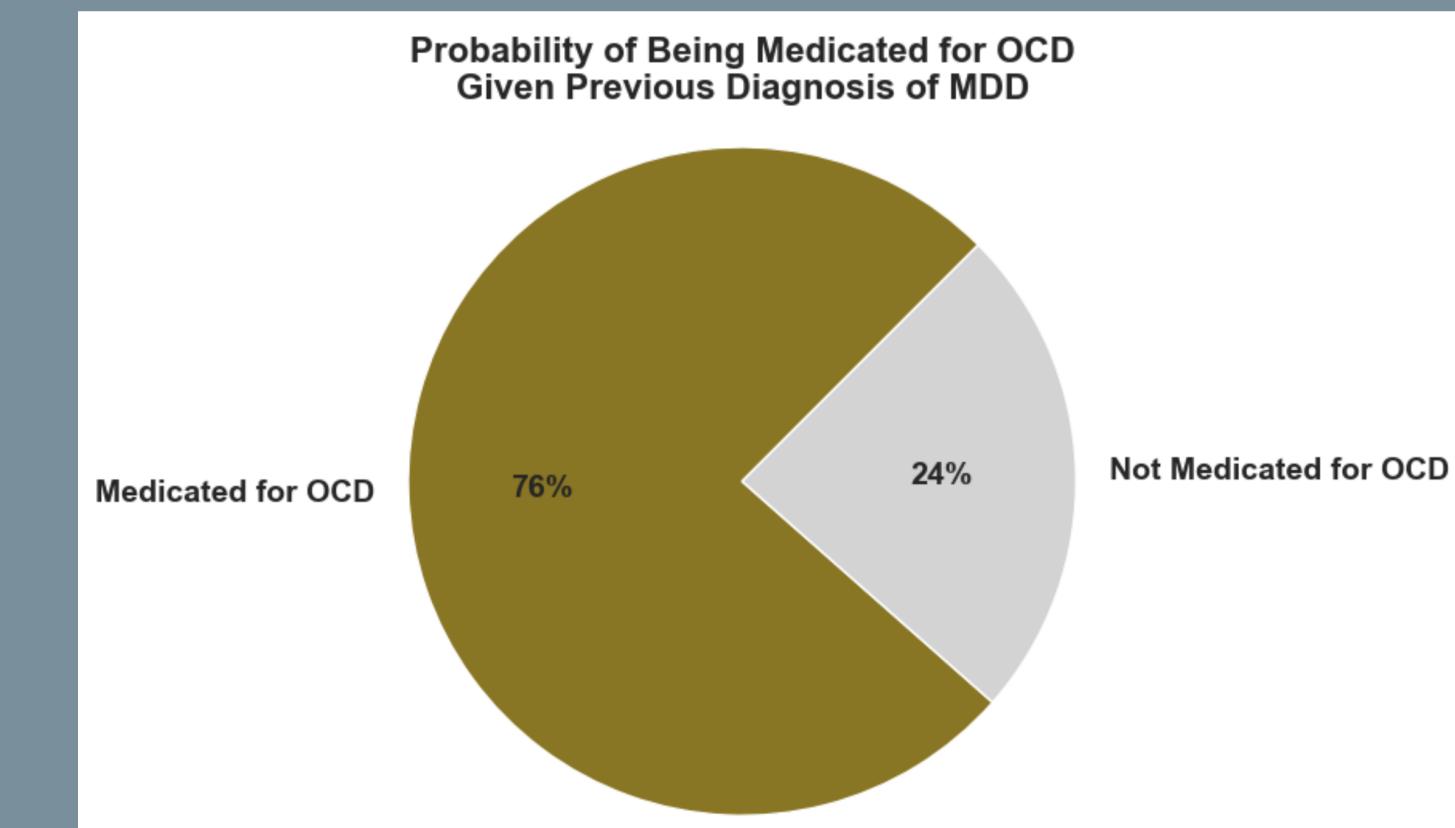
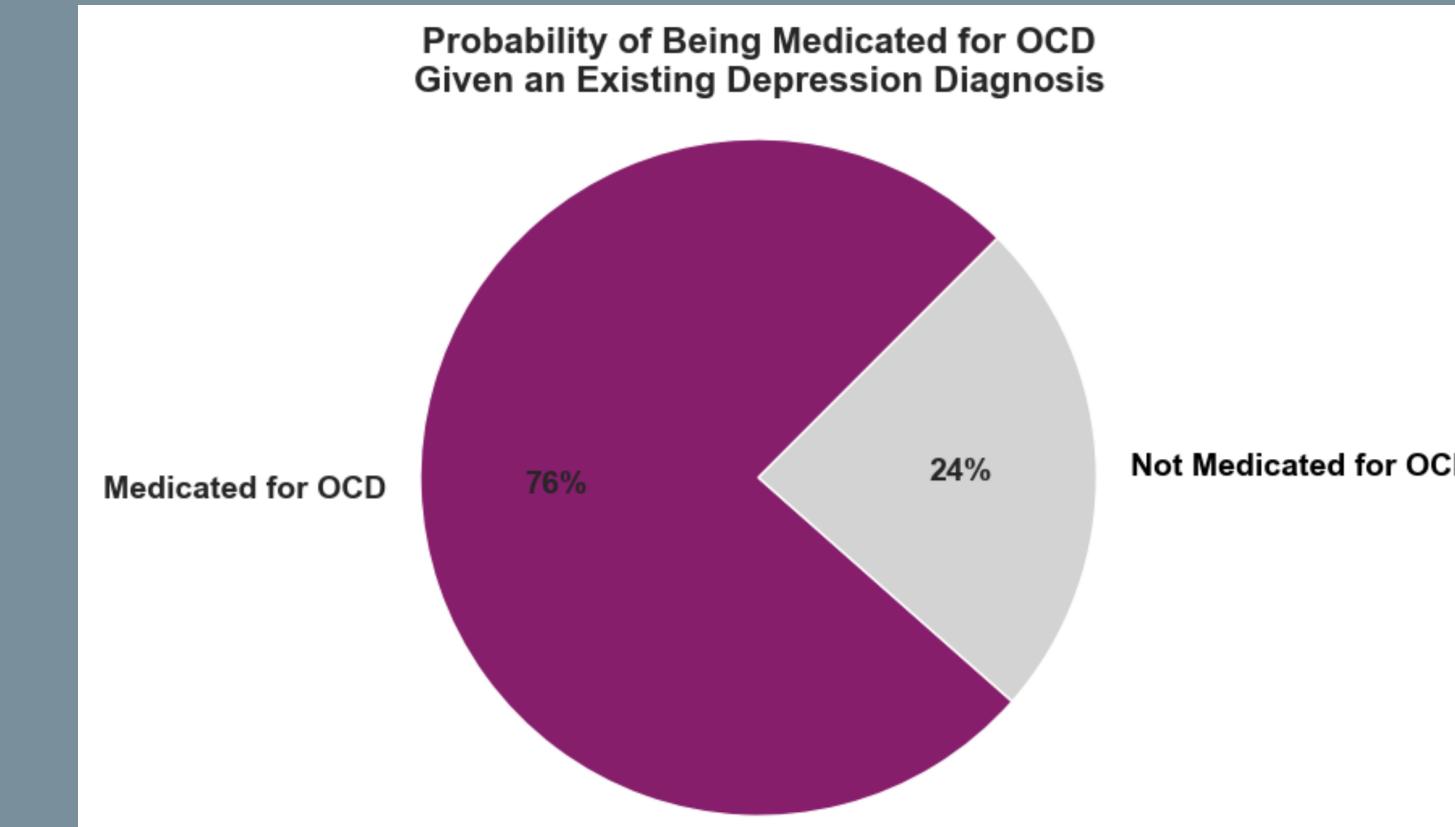
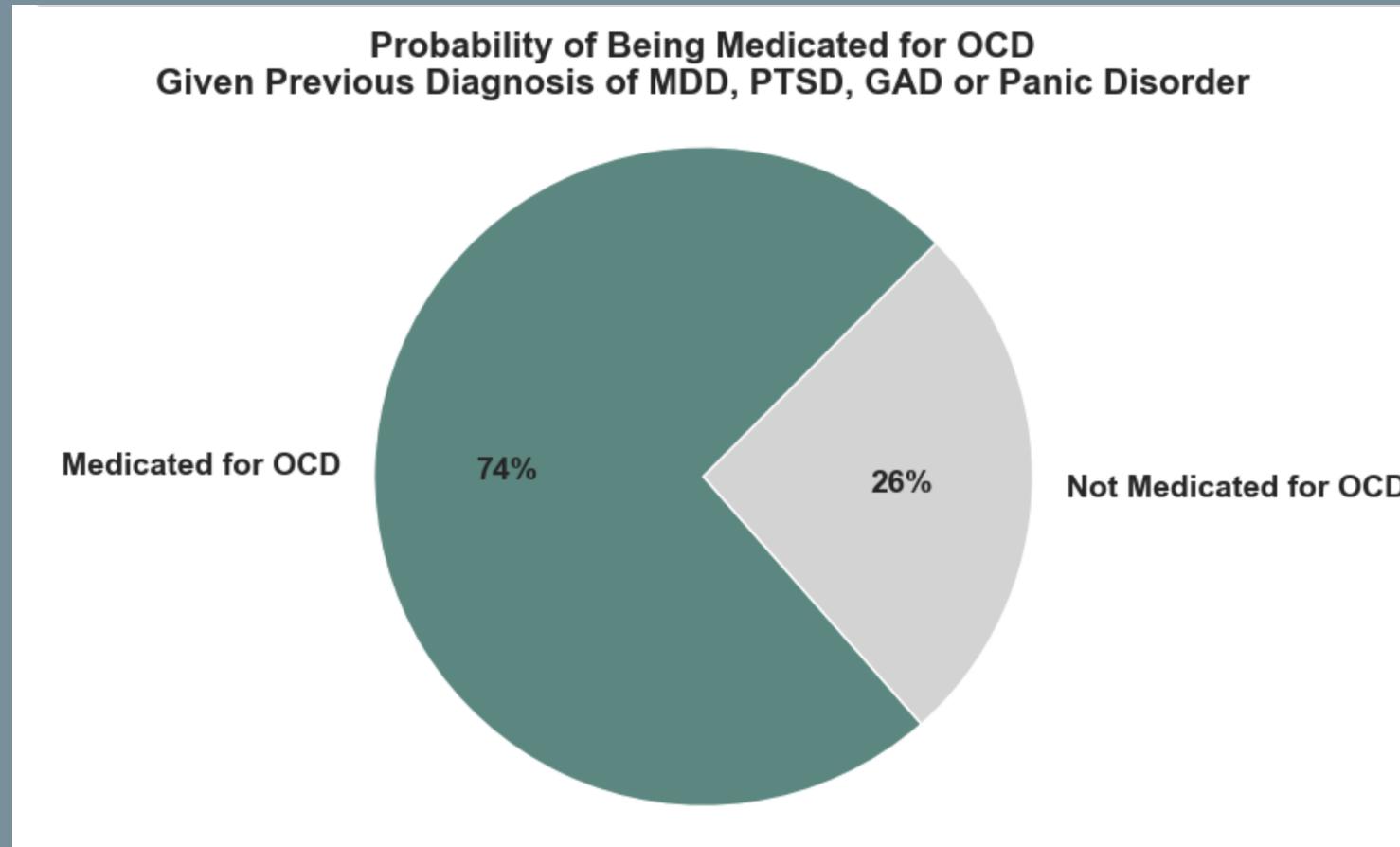
B

D



The representation displays the gender distribution for each type of medication. At the age where the highest number of patients receive each prescription, females outnumber males. This gender discrepancy may suggest a certain predisposition for medication need.

PREDISPOSITION FOR MEDICATION USE



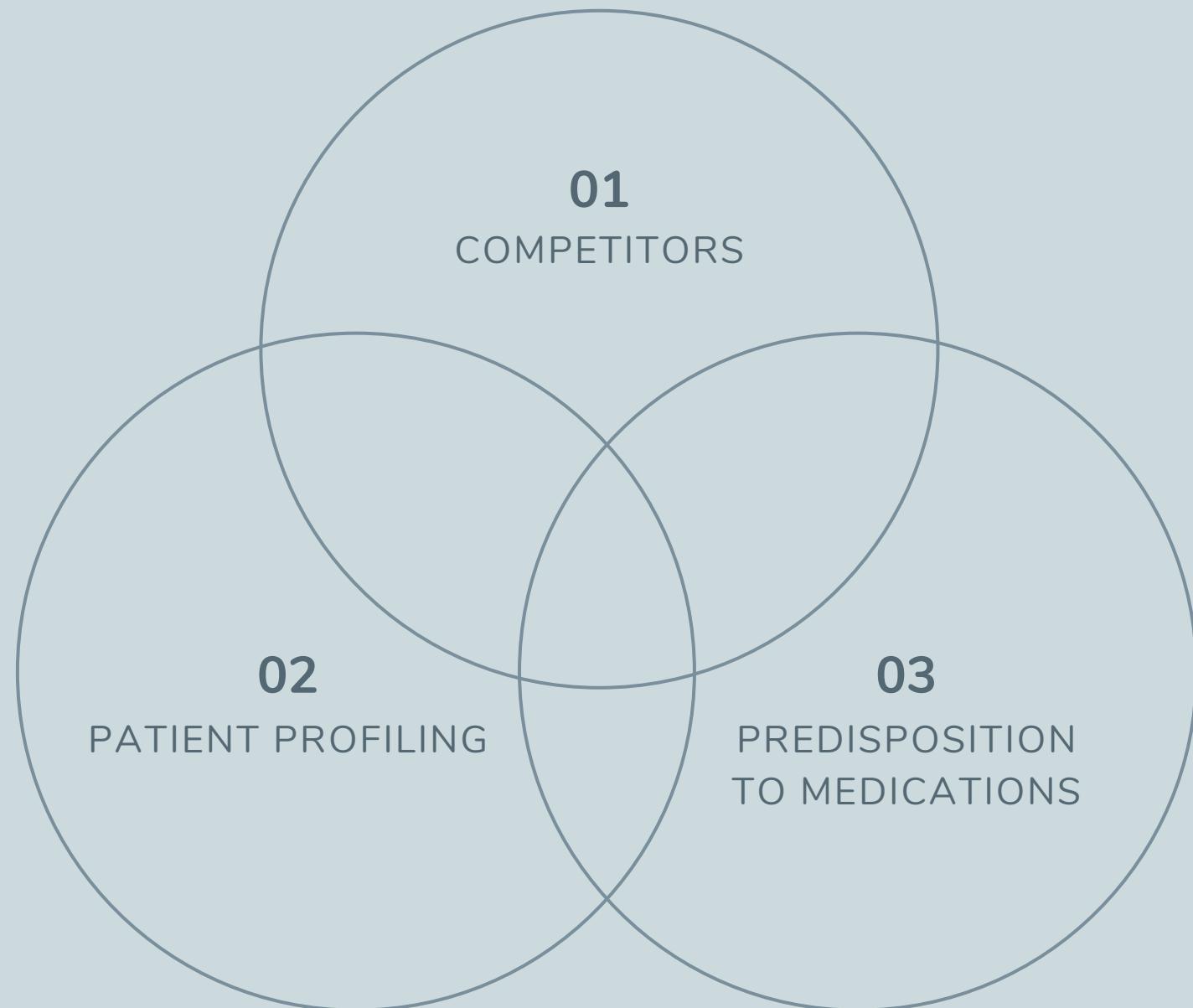
**MDD stands for Major Depressive Disorder

**PTSD stands for Post-Traumatic Stress Disorder

**GAD stands for Generalized Anxiety Disorder

An important factor influencing the need for medication in OCD cases is the previous diagnosis of other mental health conditions such as MDD (Major Depressive Disorder), PTSD (Post-Traumatic Stress Disorder), GAD (Generalized Anxiety Disorder), or Panic Disorder. Most notably, depression disorders play a significant role.

CONCLUSIONS



Shifting Prescription Trends

SNRI is increasing its sales in the last registered year.

Age Prescription Variances

Benzodiazepine is prevalent among aged 50-60, while SNRI is prescribed for younger individuals and SSRI is popular among older demographics.

Importance of regional analysis

There might be variability in doctors' prescription habits and prescription rates among continents.

Predisposition Insights

Being female and having a previous diagnose of other mental health conditions, mainly depression, are factors increasing the probability of needing medication for OCD.

WHAT'S NEXT?

To complete the analysis, it will be necessary to explore:



Market Acceptance Potential

Treatment response, reported effectiveness, adverse effects, patient feedback and long-term efficacy.



Cost and Insurance Coverage

Investigate the cost and insurance coverage, and assess if there's a gap in terms of affordability or coverage in different demographic and socioeconomic groups.



Economic Burden Analysis

Healthcare Expenditure:
Evaluate OCD treatment costs for healthcare systems, seeking cost-saving medication solutions.

ANALYSIS FOR OCD MEDICATIONS
MARKET ACCESS PROJECT

CANDELARIA ZIZZI

Final Project
Data Analytics Bootcamp 2023
allWomen.tech Academy

Thank you for your attention

QUESTIONS?