



Utilization of sartans in children and adolescents in Norway

Sartans are recommended first-line antihypertensives in pediatric hypertension. Real-world use of sartans in children and adolescents is not well described. The aim of this DARWIN EU® drug utilization study aimed to quantify sartan prescribing in childhood hypertension (CHT). Here, we highlight the results for Norway.

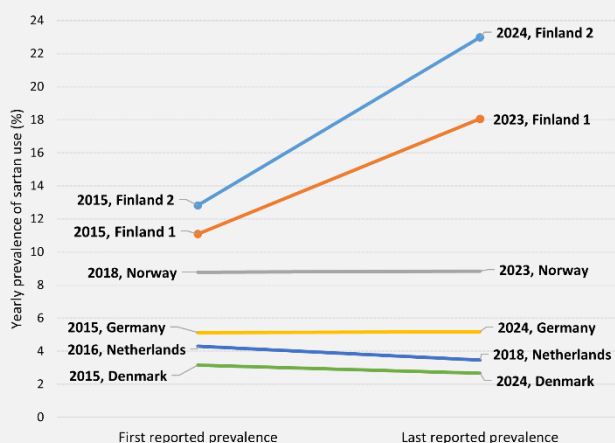
Study overview

- **Design:** Population-level drug utilization study in databases across Croatia, Denmark, Finland, France, Germany, Hungary, the Netherlands, Norway, and Spain.
- **Population:** Individuals in Norway (2018–2023) aged ≤18 years diagnosed with CHT (N = 4,254).
- **Medication:** Dispensation of sartans and non-sartan antihypertensive medication (AHT).
- **Outcomes:** Prevalence of CHT, prevalence of use of sartans and non-sartan AHT.

Sartan and non-sartan AHT utilization among children with CHT in Norway

- Prevalence of single-agent sartan use in Norway between 2018–2023 was stable at 8.8%–8.9%.
- Use of sartan combinations was rare.

Cross-country comparison of sartan prevalence (C09CA)

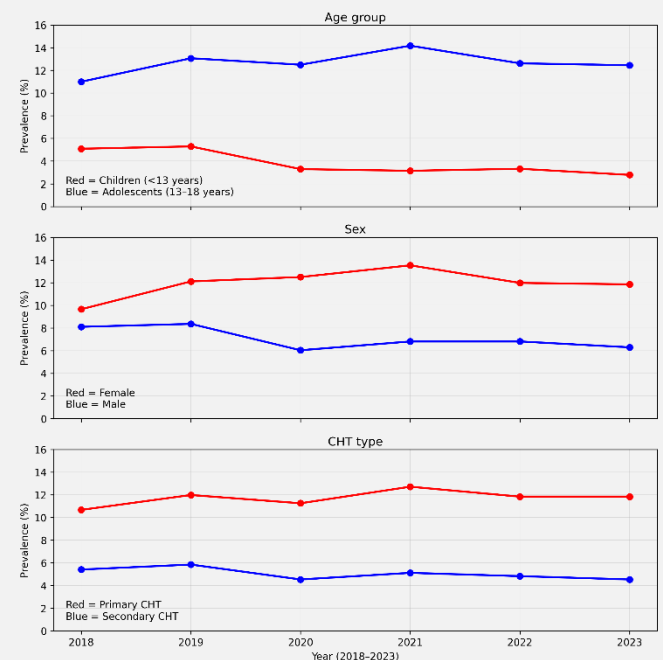


- Use of non-sartan renin-angiotensin system (RAS) agents (17.3%–12.2%), beta blockers (9.8%–6.9%), and calcium channel blockers (12.0%–10.4%) decreased from 2018 to 2023.
- Diuretics prevalence was stable at 1.9%–2.3%.
- In Norway, non-sartan AHT use (diuretics, calcium channel blockers, and non-sartan RAS agents) was greater in children vs adolescents.

Patient characteristics and sartan use in Norway

- In Norway, CHT was rare, with prevalence increasing from 0.08% in 2015 to 0.20% in 2023.
- Across datasets, CHT prevalence ranged from 0.03% (the Netherlands) to 1.51% (Hungary), placing Norway in the mid-range.
- In Norway, CHT prevalence showed no clear sex difference, whereas sartan use differed by sex.

Single-agent sartan use in Norway by age group, sex and CHT type



- In Norway, sartan prevalence was higher in primary than secondary CHT, unlike most other countries where use in secondary CHT was higher.

Data & Methods notes

- Blood pressure-based sensitivity analyses could not be applied to Norway, as data on blood pressure measurements were not available.
- In Norway, drug exposure is based on dispensations, whereas some other databases use prescriptions.

How was this useful?

This study characterizes real-world antihypertensive treatment in children and adolescents with CHT, focusing on sartan use. Norway showed mid-range CHT prevalence in cross-database comparisons and higher sartan use in primary versus secondary CHT. Single-agent sartan use remained stable at ~8.8% from 2018–2023, while sartan combination therapy was rare. Future work should explore sex differences in sartan use despite similar CHT prevalence, in Norway.

Access to the full report

[DARWIN EU® - RR Childhood hypertension and sartans prescribing in children](#)

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