

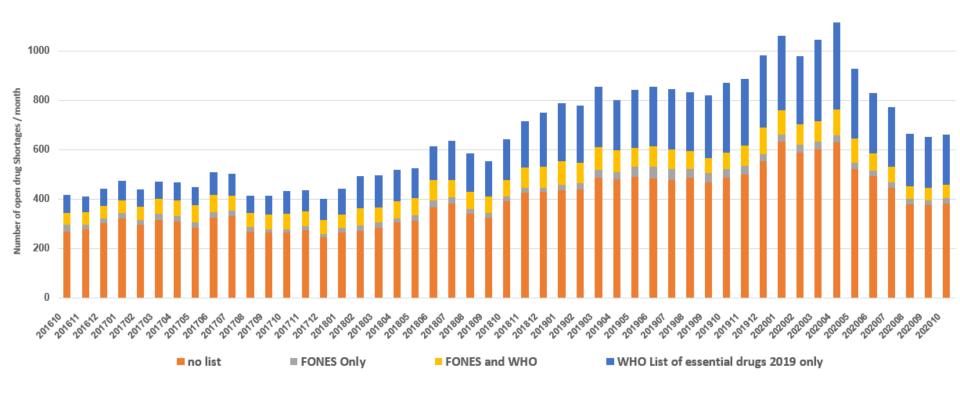


Stock-Outs in Switzerland; Developments and possible ways out

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1

Assignment of drug shortages to official supply lists of essential medicines (FONES / WHO) Oct 2016 – Oct 2020



Example ATC-Group N (nervous system)

ATC-group	Bezeichnung	Total number of active pharmaceutical ingrediants (API) on FONES List	Number of API in short supply on Drugshortage.ch 6.8.2019	Number of items in short supply on Drugshortage.ch 6.8.2019	Number of items on short supply on FONES List (gem. Drugshortage.ch am 6.8.2019)
N01	Anaestetics	8	4	22	4
N02	Analgetics	7	15	36	23
N03	Antiepileptics	1 (Lacosamid)	6	21	0
N04	Anti-Parkinson Drugs	0	5	9	0
N05	Psycholeptics	2	9	17	1
N06	Psychoanaleptics	0	10	22	0
N07	Other nervous system drugs	1	3	3	0

Especially in this group, drugs shortages have rapid and directly noticeable consequences for patients

- Epileptic seizures
- Mental disorders
- Rapid deterioration of the general condition (e.g. Parkinson's disease).

The awareness by authorities/politicians

- The swiss system of drug supply is not resilient. Especially in the case of special drugs/dosages/forms for the treatment of vulnerable patient groups.
- Unclear responsibility between the federal government and the cantons also leads to the displacement of the problem.
 People prefer to talk about prices.....
- Swiss politicians that are aware of the problem are a rare species... despite corona. Switzerland used to be the land of milk and honey for pharmaceuticals.

A way out

- Clarify roles: it is a federal duty to assure the access to essential medicines.
- Clarify «medical neccessity» (Because of the jurisdiction defined in the Constitution, the federal government's role stops at live saving drugs)
- Define classes of drugs/drug- and dosageforms and define the rules – also for prices.

Canadian Example

More drug shortages are inevitable unless we act now

MINA TADROUS

CONTRIBUTED TO THE GLOBE AND MAIL PUBLISHED 2 DAYS AGO

https://www.theglobeandmail.com/opinion/article-more-drug-shortages-are-inevitable-unless-we-act-now/

Imagine a risk-based tier system. Green would indicate drugs that are okay to be manufactured anywhere. Yellow would be for drugs that require production in more than one country to mitigate risk. Red would be for drugs where ensuring Canadian production capacity is key. For example, an allergy medication, although important, may not have the same urgency as an antibiotic. This will require investment in our own manufacturing capacity but will ensure we have the capacity to make critical medications and optimize our current capacity.

Conclusion

- We need to clarify the roles and define the duties of federal and cantonal authorities regarding drug supply and access.
- We need to define medical necessity of drugs / drugforms and dosages.
- We need to constantly redefine the list regarding developpement of science and market.
- We need to monitor drugshortages, analyse the root causes and define actions to take.
- -> to achieve this we need to change the constitution....

thanks for your attention!





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