

Keynote Address

by

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Keynote Address by Dr Samlee Plianbangchang, Regional Director, WHO South-East Asia Region at the Second International Conference on Improving Use of Medicines, Chiang Mai, Thailand, 30 March - 2 April 2004.

Mr Chairman, Excellencies, distinguished participants, ladies and gentlemen.

Greetings from WHO to all of the attendants. RUD is one of high priority areas in WHO Drug Strategy.

I am deeply honored to be invited to attend this important conference on a subject of vital importance to health care. I would like to take this opportunity of sharing some of my thoughts with you, with particular attention to the topic of Medicines in Society: Economics, Efficiency, Effectiveness and Ethics.

Colleagues, the last century has witnessed significant advances in health care. Public health measures such as clean water and sanitation have been among the main factors contributing to an increase in life expectancy, and a quality of life that was previously unimaginable. Medicines certainly have made an important contribution. Nevertheless, the disparity between the developed and developing world is still enormous. The general measures of sanitation and clean water have lagged behind and preventable diseases are still widespread in the developing part of the world. Though, medicines are available for effective treatment of these diseases, it is estimated that one-third of the world's population do not have access to basic essential drugs.

The WHO Medicines Strategy recognizes that improving the use of available medicines rather than new medicines is one of the key factors in improving health. The strategy's mission is to *"...help save lives and improve health by closing the*

huge gap between the potential that essential medicines can offer and the reality that for millions of people, particularly the poor and disadvantaged, medicines are unavailable, unaffordable, unsafe or improperly used.”

Drugs, as we are well aware, are basically used in three ways. The vast majority are used to cure patients. Others are for symptomatic treatment and for prevention of disease. Misuse of drugs occurs across all these three categories, but it may be more serious in curative use.

What are the reasons for the misuse of medicines? We have the potential to make a very significant impact on the health of the people by the rational and proper use of medicines. This may be done without new scientific discoveries. What we need is the science of rational use of the existing drugs, thereby transferring the benefits of modern medicines to the people who really need them. However, this is proving to be a most difficult task. There are many reasons for this, and I would like to dwell on some of them.

Medicines, powerful tools for dealing with illness and disease, exist in a commercial environment which, at times prevents the full potential of these tools being realized. The problem is not only limited to the developing, but also affects the developed world. Simple thiazide diuretics have been proven to be the drugs of choice in the treatment of hypertension. However, recent studies in the United States have shown that most of the patients with hypertension are treated with far more expensive drugs such as ACE-Inhibitors and AT2 antagonists. Marketing and promotion help accelerate the use of expensive drugs. There are hardly any promoters of inexpensive drugs which are proven to be effective. Medicines are now primarily

seen as marketed commodities rather than health technologies for human well-being. This is especially during the period of globalization of economy. Greater emphasis is put on the economic productivity of public and private investments in medicines, rather than on social productivity.

A drug should not be seen simply as a chemical but a chemical plus the information for its correct use. Often, prescribers do not always have unbiased information such as formularies or standard treatment guidelines. On this issue, one important factor may be that health care systems do not always provide for effective education, either for health personnel or to the public. The point in this regard is on supplying drugs with little or no emphasis on ensuring their rational use. Providing the right information should be an essential part of the drug supply system to fully ensure the rational use, but unfortunately this is rarely done. The drug information that is readily available is from the pharmaceutical companies. These are primarily aimed at promoting the use of specific products, but not necessarily the health benefit of people.

Ladies and gentlemen, as you are aware, in health care, in most situations, a wrong intervention will lead to a poor result. But, in medicines, this is not necessarily so. If an antibiotic is used for a simple viral infection, although the antibiotic will have no effect on the illness, the inevitable natural cure that follows will be claimed to be due to the antibiotic. Prescribers may need to understand that events which follow administering a medicine are not necessarily due to the effect of the medicine. Standard treatment guidelines for common conditions will promote rational use of

drugs, but must be accompanied with monitoring, assessment, feedback and improvement; to ensure full effectiveness of guidelines.

Consciously or unconsciously, the self-interest of the practitioners might also coincide with the inappropriate use of drugs. Dispensing of drugs by health practitioners is common in our part of the world. At times, this practice also brings them financial benefits. Hence, they may prefer prescribing drugs for non-drug solutions. Anxiety will be treated with a sedative rather than a discussion of its causes and reassurance. It may be easy for the doctor to convince himself that three drugs may be better than two, and that the expensive drugs are better than the cheaper ones. Studies have repeatedly shown that dispensing practitioners prescribe a greater number of drugs than those who do not dispense. Facing with ethical issue, this is a real dilemma for medical practitioners.

Pharmaceuticals are a business; even the most ethical pharmaceutical company needs to make a profit as otherwise it would cease to exist. However, profits and providing the most appropriate drug do not always go together. The previous example of the use of more expensive anti-hypertensive drug rather than the cheaper alternatives was a clear illustration. It is up to society to demand from the pharmaceutical companies through appropriate regulatory bodies, that other social priorities are also addressed in the process of their business.

Governments and pharmaceutical industry acknowledge that such regulation is essential. WHO has developed the "Ethical Criteria for Medicinal Drug Promotion". Some industry associations have their own codes for regulating advertisement and

promotion. In the developed world, these are used effectively. If there are misleading advertisements for drugs, governments require that corrective measures be issued by the pharmaceutical companies. However, in the developing world these regulations are rarely enforced; if they are, the enforcement is inadequate or ineffective. Some countries do not have any regulation at all.

One of the most visible contrasts between the developed and developing world is the extent of government responsibility for health care and within that, promoting rational drug use. It may be said generally that in the developed world, the patients get more appropriate medicines, prescribed more correctly, and at prices that are more reasonable. This is not because the prescribers are intrinsically aware of their ethical responsibility, but because the government is also closely involved in the process of consumers' protection. In addition, the public is an active partner in health care debates. The voice of the "user" of health care is clearly heard and taken seriously.

Governments in the developed world, either as providers of health care or as sponsors/ regulators of social and/or health insurance schemes (which virtually cover the entire population), ensure equity and a reasonable quality of service. The government or the insurance companies are "bulk purchasers" of health care products and services. They are pitted against powerful commercial providers of such products and services, resulting in a contest which eventually benefits society. However, for this process to be really effective, it has to be with transparency and accountability.

In developing countries, the government is very much involved in providing health care services, but the extent of consumers' protection is still very limited. In most cases, the government limits itself to providing such services through its institutions with inadequate regulation of the private sector. This inadequacy means an unequal contest between the powerful providers and the isolated patient or individual, with predictable unsatisfactory consequences for the latter. Drug prices in some of the poorest countries being higher than the prices in some developed countries is one example of this. Being primarily responsible for all its citizens, governments in the developing world should ensure the provision of appropriate health care services and effective protection of consumers. They also need to educate their citizens on health care issues and actively involve them in the discussions and debate.

At present, in the South-East Asia Region, one country has attempted a comprehensive health care for all its citizens. This is the 30 Baht scheme that is being implemented in Thailand. It is an ambitious scheme that has raised many issues, but has the sound underlying principle of the government's responsibility for the health care for all of its people.

Ladies and gentlemen, it is quite clear that no amount of regulation or control will succeed, if the prescribers do not recognize that their sole responsibility is towards the individual patients and the society at large. It is only when prescribers base their prescribing on this ethical responsibility and obligation that economics, efficiency and cost-effectiveness will follow. The primary motive to prescribe rationally must come from the prescriber. Only with this motive can other factors such as drug information, formularies and standard treatment guidelines, have their full effect.

The ethical basis is the reason for the existence of our profession. Another very important area of improper use of drugs is self-medication without adequate knowledge or understanding. The problem is much more difficult to control with the advancement in information and communication technology, whereby advertising and ordering of drugs can be done through the internet. The issue used to be discussed several times by the World Health Assembly and a series of resolutions had been passed. This is another area that needs government intervention in a big way. Without it, we become mere suppliers of medicines for health problems, similar to a shop keeper supplying products to a customer based on self interest. A shopkeeper will provide what is best (e.g. the most profitable) to him. As a member of the medical profession, the doctor's duty is to take nothing else into consideration but what is the best for his patients' health and well being. Health of the individuals and of the public must be the overriding consideration of health profession.

What are the consequences of the misuse of medicines? The impact on health is enormous. There is a vast amount of unnecessary mortality and morbidity. A breadwinner unable to work due to badly managed illness, drags his family into poverty. Even when the breadwinner works but a family member's illness is managed badly, poverty may result from unnecessary expenditure on ineffective and costly medicines. Let us look at the contrast between a world pharmaceutical market approaching USD 500 billion, and WHO estimating that an average expenditure of 1-2 USD per person per year is sufficient for basic essential medicines, this indicates the enormous gap between what is needed and what exists.

There are several examples of the consequences of the misuse of medicines. The number of children who die due to improper treatment of malaria runs into the thousands. Misuse of drugs in the treatment of tuberculosis will not only lead to the patient not being cured, but also to the emergence of Multi Drug Resistant Tuberculosis. When this Multi Drug Resistance TB infects other patients, there will be costly consequences to society as well. For example, second-line treatment of tuberculosis could be fifty times more expensive than first-line treatment. Misuse of antibiotics has resulted in widespread antimicrobial resistance. The gains made in the treatment of infectious diseases today may be reversed in future as a result of this. The HIV/AIDS epidemic that threatens us has the potential of being magnified many times if resistance arises due to improper treatment.

While in a majority of cases, misuse is due to overuse, there are examples of underuse as well. WHO has repeatedly highlighted the inadequate use of analgesics such as morphine in treating the pain of terminal cancer. The drugs are available and effective but due to regulations and an unnecessary fear of dependence, patients with terminal cancer are unable to be pain-free in the last days of their life.

Distinguished participants, ladies and gentlemen, improving the use of medicines requires action by all stakeholders. Action is required by governments through the Drug Regulatory Authorities and other institutions involved in medicines. Action is also required by health care providers whether in the private or public sector, prescribers, pharmaceutical companies, and last, but not the least, the consumers and patients themselves. Effective regulation is the key in some situations, whereas

discussion and consensus is required in others. In all situations, education of all concerned, including the patients and the public, is the key element.

To expand a little on the role of the stakeholders, I would stress that the government has the major responsibility of spelling out the incentives and disincentives to ensure the industry provides medicines required for health. Essential medicines should provide a sufficient return for the manufacturer, but yet be affordable by the patients. Health care providers through the lists of effective medicines, active promotion of formularies and standard treatment guidelines, should ensure the correct use of medicines. Prescribers must realize and fulfill their responsibility and obligation to patients. In this context, effective self-regulation by the profession is an important aspect. Pharmaceutical companies should adequately abide by the regulations and the laws. Transparent, fair and accountable regulation by the government that penalizes the offenders, and encourages companies that adhere to regulations must be emphasized. The most difficult, but really necessary is the education of the consumers, the patients and the public. This eventually will be the most effective and sustainable intervention. Health education as a part of general education is important. Nongovernmental organizations, professional bodies and civil society are usually eager partners in health development and in educating consumers on health issues. They also provide a good counterbalance to the market forces in health. Governments should willingly encourage NGOs, professional bodies and civil society as close partners in their health care efforts.

To conclude, I would like to stress that the economics of rational drug use are clear. The world has resources enough to produce medicines drugs that are required for

the use by its total population. There are efficient health care systems in the world and it is possible to deliver these medicines efficiently and effectively. Unfortunately, one-third of the world population still does not have the drugs they need. The medicines are effective and can treat a large majority of the illnesses. A vast amount of illness, however, still remains untreated. The ethical principle of ensuring that patients get the appropriate drugs are enshrined in professional responsibility and obligation. Problem of improper use of drugs is enormous, complex and complicated. It really needs multidisciplinary and multisectoral approach in its control. At the same time, we have seen a lot of untiring efforts to do something with this intractable problem. We will hear more during the course of this conference. We should gratefully thank those who try to find solutions to the problem. Particularly for this conference, I really wish its course of deliberations a grand success for human health. The challenge, ladies and gentlemen, of improving drug use, is to urgently address these issues by all concerned; governments, health professions, drug industry, health consumers and the public at large. The reward will be the gift of health, the most precious gift that one can give, as well as receive.

I began this address with the focus on Economics, Efficiency, Effectiveness and Ethics in Medicines. I would, however, like to conclude by saying that medicines are basically about Healing, Health and Humanity.

Thank you