

Analysis of changes in market characteristics of Essential Medicines within the frames of state program of increasing availability of medicines in Ukraine

Oleh Samborskyi¹, Mykola Slobodyanyuk², Hanna Panfilova^{3*}, Viacheslav Lebedynets⁴, Natalia Bogdan⁵

¹ Department of Organization and Economy of Pharmacy and Drug Technology, Faculty of Pharmacy, Ivano-Frankivsk National Medical University, Ivano-Frankivsk, Ukraine,

² Department of Pharmaceutical Marketing and Management, Faculty of Pharmacy, National University of Pharmacy, Kharkiv, Ukraine,

³ Department of Organization and Economics of Pharmacy, Faculty of Pharmacy, National University of Pharmacy, Kharkiv, Ukraine,

⁴ Department of Quality Management, Faculty of Pharmaceutical Technologies and Management, National University of Pharmacy, Kharkiv, Ukraine,

⁵ Department of Pharmacy, Faculty of Pharmacy, Bukovinian State Medical University, Chernivtsi, Ukraine

Abstract

The article contains results of analysis of organizational economic and market characteristics of essential medicines, which were amended to the 3rd edition of the National List of Essential Medicines (215 medicines in 2009) in Ukraine during 2017. Within the frames of State program of increasing availability of medicines in Ukraine during 2017 the 3rd edition of National List of Essential Medicines was reviewed twice. The first revision (March 2017) was taking place according to the 19th WHO Model List of Essential Medicines (EM), which was not valid at that time. Only the second revision of the third edition of National List of EM (December 2017) in Ukraine was updated taking into account the 20th WHO Model List of EM. Despite of a significant increase of EM in March 2017 by 152 medicines, and in December – by 60 positions (up to 427 names), at the end of 2017 specific weight (%) of sales of the above-indicated medicines at the market increased by 6.0% (from 19.4% to 25.4%). Herewith, at the end of 2017 each third medicine, which was sold at the market in natural indicator, belonged to EM. A significant domination of native medicines is an important characteristic of the dynamic of EM realization at the market. Specific weight of their sales fluctuated in natural indicator from 79.8% to 85.4%, and from 44.2% to 46.2% – in value indicator. At the end of 2017, as compared to 2016, there was an increase of an average cost of one conventional package of EM of foreign and domestic production. One should mention that the growth rate was typical for the range of domestic EM. Average cost of specific weight of essential medicines for hospitals amounted to 55.43% in natural indicator and 46.07% - in value indicator. By the results of allocation of pharmacological therapeutic groups of EM by the specific weight of their purchases for hospitals the following fact was found out. Six pharmacological therapeutic groups by natural indicator were included to the 1st category of groups (75.0% and more hospital purchases fall on EM – “High level of meeting the need in EM”), and by the value indicator – only one (P-Antiparasitic products, insecticides, and repellents). One of the disadvantages is availability in the list of the 1st and 2nd groups (from 50.0% to 75.0% – “Average level of meeting the need in EM”) of EM out of socially-important groups of medicines. They are groups of J-Anti-infectives for systemic use and L-Antineoplastic and immunomodulating agents. Herewith, the availability of EM out of C-Cardiovascular system in the list of the fourth (less than 25.0% of hospital purchases (“Low level of meeting the need in EM”) by value indicator and the third (from 25.0% to 50.0% of hospital purchases (“Average level of meeting the need in EM”) of the category by natural indicator seems to be problematic.

Keyword: National Drug Policy, National list of Essential Medicines of Ukraine, Model list of Essential Medicines, state program “Available medicines”, Ukraine, World Health Organization.

INTRODUCTION

For the recent decades, enormous changes in all spheres of social life have taken place. Significant changes were observed in social way of thinking by the following basic categories: “health” and “human life”, and “social equity”. A year after (1977) the implementation of the first edition of WHO Model List of Essential Medicines (EML) at the Alma-Ata conference (1978) in practical health care and pharmacy, the following strategic trends of development of world society regarding the formation of basic values of the country, despite of the level of its political and social economic development, have been defined. Thus, it was mentioned that health and life of the human being have the highest social value, and equal access of the population to efficient medical sanitary aid and essential medicines is the most important social goal of national systems of health

care and the country in general [1,2]. Principles of social equity and equal access of people, despite of their social status in the society, to efficient medical and pharmaceutical aid, which were declared at the Alma-Ata conference (1978), determined the main principles of development of the world sector of health care a century ahead [3,4]. For more than 40 years’ international organizations have efficiently developed and used numerous projects and programs, their key goal was to increase the level of availability of medicines and pharmaceutical services for the population in different countries [4-6]. Despite of great efforts of the World Health Organization (WHO) and other authorized international organizations of most developing countries, the level of availability of the so-called “Essential medicines” (EM) still remains unsatisfactory [5,7-9]. In special references it