

October 10, 2007

ESGAP's RESPONSE TO THE EUROPEAN COMMISSION'S CONSULTATION
on

"The Future of Pharmaceuticals for Human Use in Europe"

Version 19 July 2007

Reaction on Key question 2: *"Do you see other areas than those already targeted by the Commission where regulatory action should be taken?"*

The ESCMID Study Group for Antibiotic Policies ESGAP is a Scientific Study group of the European Society for Medical Microbiology and Infectious Diseases. ESGAP has 209 members in 45 EU countries. Objectives of the study group are to provide a uniting European forum for those medical personnel and scientists actively involved in antibiotic stewardship at local, national and international levels, to provide opportunities for improved cooperation and to establish links between existing networks of similar programmes and those concerned with antibiotic resistance. For more information, please visit: http://www.escmid.org/sites/index_f.aspx?par=2.5

ESGAP would like to draw the attention of the Commission to the urgent problem of **drug shortages** in the different EU member states and beyond. The problem of drug shortages has been increasing during the last five years. It was practically absent in the 1990's, but for the last few years, hospital pharmacists have spent an ever increasing amount of time and efforts in managing drug supply bottlenecks [1-8].

There are different reasons for these shortages of medicines:

- Production problems that lead to unexpected delays in drug deliveries to the consumers. As companies reduce the number of production plants, an increasing number of clients are dependent from one plant and therefore, a problem in one plant affects many more clients and cannot be eased by products from another plant.
- Selling of licences from one company to another, leading to unexpected interruption in continuous supply of drugs. The new license holder needs to find a production unit to take over the production process. This has to be approved by authorities and can create unexpected new requirements leading to delay in taking up production.
- Marketing discontinuation of mainly older drugs due to economic reasons.

Often, the abovementioned reasons are not EU-wide measures taken by companies, but affect individual countries differently. Companies advise pharmacies to import their products from other countries to solve the problem. But then a conflict of legal and clinical requirements arises. The rules of free market are conflicting with national implementation of health regulations such as national marketing authorisations and legislation on import and stock of drugs.

The example of antibiotic shortages

We have recently shown that shortages of commonly used antibiotic agents jeopardize medical care [see appendix]. In a recently conducted survey among participants from 55 hospitals in 23 European countries, 69% reported antibiotic shortages within the last 12 months. The most frequently affected agents were cefepime (n=15); meropenem (n=13); piperacillin/tazobactam or piperacillin alone (n=15); semi-synthetic penicillins (n=7); and 1st- or 2nd-generation cephalosporins (n=5). Thus, antibiotic shortages are now widespread throughout Europe, affecting also the care of critically ill patients and leading to the use of more expensive and broad-spectrum or less efficacious substitute agents. These substitutes may further accelerate the emergence and selection of antibiotic resistance. For instance, replacing piperacillin by piperacillin/tazobactam for susceptible *Pseudomonas* spp, minocycline by tigecycline for methicillin-resistant *Staphylococcus aureus* or penicillin by ceftriaxone for streptococcal infections broadens the spectrum of therapy unnecessarily and increase healthcare costs.

What is needed in the case of drug shortages:

- Companies should give full transparency on the marketing, distribution and dispensing of medicines in all EU countries. In case of shortages, full transparency of the dimension of the problem is required; including:
 - Timely announcement
 - Information about the scope; expected duration and reasons for the unexpected shortage of a specific drug.
 - In certain cases; advice and support should be offered for potential replacement or alternative suppliers
- In case of withdrawal of a drug in an individual EU country because of economic reasons, companies should make all possible efforts to guarantee the availability in case of urgent medical needs
- There is a role for the European Federation of Pharmaceutical Industries (EFPIA) and Associations, representing the pharmaceutical industry in Europe in coordinating and stimulating these actions by individual companies
- We need an early and adequate warning and information system in Europe to notify national pharmacy societies; hospital pharmacists; clinicians and other concerned parties on possible shortage problems at an early stage. For example the American Society of Health-System Pharmacists (ASHP) launched a Drug Shortage Resource Center (www.ashp.org/shortage) since 2003, offering comprehensive information (in collaboration with FDA) on drug shortages in the USA. In Europe, the situation is far more complex. Some national societies offer a similar service [8], but in most EU countries, no national information systems are available.
- There is a role for the European Society of Hospital Pharmacists in setting up a similar web-based drug shortage information center.
- In case of temporary shortages, non-bureaucratic shipping of medicines throughout the EU must be facilitated. Requirements for country-specific adaptation of products like labelling and packaging should be reduced to a minimum and handled uniformly by all member states without lengthy administrative procedures of approval by health authorities and unnecessary restrictions on stocks.
- There is a role for EMEA in adapting regulations accordingly

- In our opinion, EU policy makers are well-advised to guarantee the availability of old and generic antibiotics and other drugs which are essential for medical care, beyond market-driven agendas.

In conclusion, ESGAP urges the European Commission to put the drug shortage problem in Europe on their agenda and bring all acting parties together: the EFPIA, the EMEA, the European Pharmacist and Medical associations to provide solutions to the drug shortage problem that is compromising the healthcare of European citizens.

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Appendix

Poster P-1105 presented at the 16th ECCMID conference, Munich April 2007.

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