

According to the surveys conducted by the European Association of Hospital Pharmacists (EAHP) oncology medicines were among the most affected by shortages in 2019. Compared to 2018, the percentage of respondents who reported shortages of oncology medicines increased from 39% to 47% in 2019. Healthcare professionals consider delays in care as the main consequence of medication shortages. The satisfaction with reporting systems for medicine shortages, intended for managing shortages more efficiently, decreased from 56% in 2018 to 48% in 2019 for hospital pharmacists, while they remain low for physicians (36%).

Healthcare professionals must act quickly and responsibly when faced with medicine shortages in order to prevent any adverse consequences and continue to provide safe and optimal care to patients. However, delivering reliably safe care must be carried out pro-actively. Guidelines/toolkits therefore must be put into place in order to meet the challenges when facing a shortage as to be able to account for providing care continuously. Moreover, these guidelines must take into account any regulations and existing legislation stipulating policies in clinical practice. A variety of good practices in risk assessment including prospective health risk assessment methods, need to be implemented in healthcare settings, in a process-driven manner.

Drug shortages: how to restore the European independence?

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Drug shortage, especially for products of major interest such as anticancer, antibiotics or intensive care unit drugs, remains a critical worldwide problem. During the last ten years, the number of failures to obtain these drugs has been multiplied by about 20 in numerous European countries. The main cause of this shortages is the abandon by pharmaceutical industries of old (but always essentials) drugs, considered to furnish lower benefits as compared to so-called innovative drugs that can cost more than 50 000 € per month. This purely financial cause, regardless of the interest for the patients, led to a very large delocalization of the production of active pharmaceutical ingredients to China or India. The Covid-19 crisis clearly demonstrated that Europe was unacceptably dependant of outside for the furniture of these strategic products including medical devices.

It is thus essential that Europe develops a re-localization strategy and that a non-profit structure defines the needs in essential drugs and coordinates their production. The model of US non-profit CIVICA organization is surely a good example to follow. The creation of HERA should be an interesting start but it is essential that priorities be defined only by the interested of public health and not by the profits.