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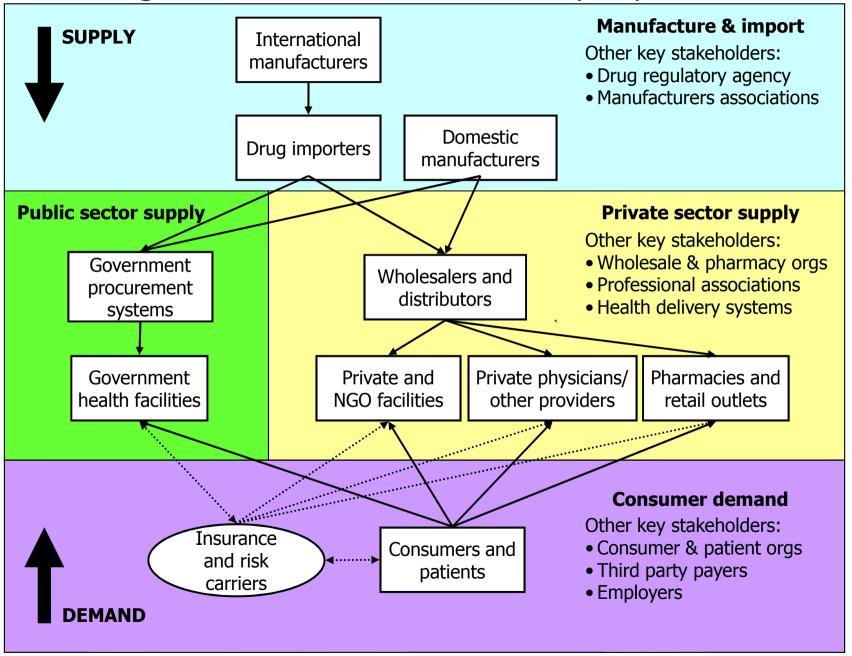
Harvard Medical School and Harvard Pilgrim Health Care Institute WHO Collaborating Center on Pharmaceutical Policy, Boston

Pharmaceutical Policies and Evaluation Indicators in the Region of the Americas Pan American Health Organization, Dec 10, 2009

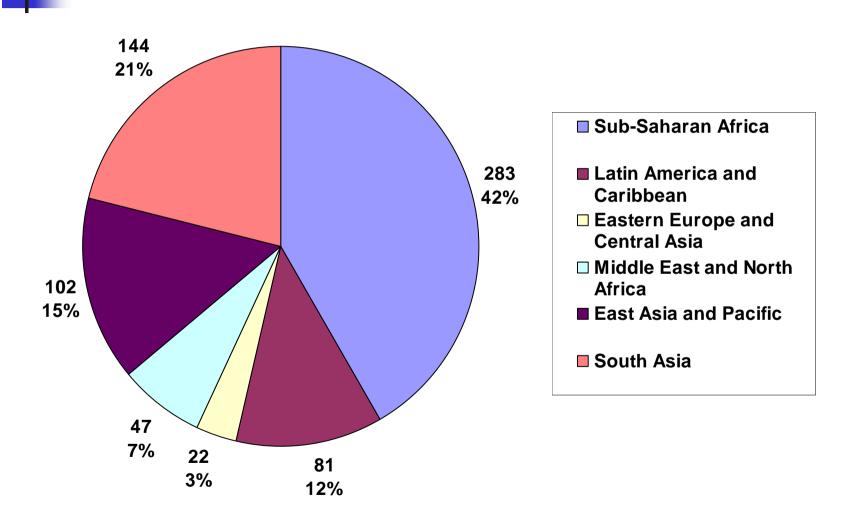
Overview

- Medicine use indicators
 - WHO/INRUD indicators
 - Disease specific indicators
 - Intervention effectiveness
- Pharmaceutical sector indicators
 - MeTA baseline surveys
 - Future developments in WHO monitoring
 - WHO-MeTA Community assessment
- Need for pharmaceutical sector observatory for the Americas?

Leverage Points for Pharmaceutical Policy Implementation

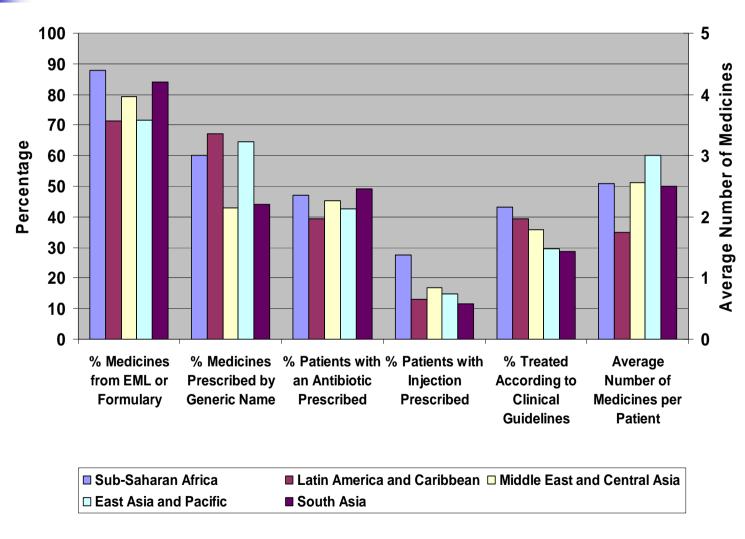






Source: Medicine use in primary care (WHO/EMP/MAR/2009.3)

WHO/INRUD Core Prescribing Indicators, by region, 1990-2006



Source: Medicine use in primary care (WHO/EMP/MAR/2009.3)

Additional WHO-INRUD Medicine Use Indicators

- Patient care indicators
 - Average consultation time
 - Average dispensing time
 - Percentage of medicines actually dispensed
 - Percentage of medicines adequately labeled
 - Percentage of patients with knowledge of correct dose
- Facility indicators
 - Availability of EML or formulary to practitioners
 - Availability of clinical guidelines
 - Percentage of key medicines available in a facility
- Complementary medicine use indicators
 - Average medicine cost per encounter
 - Percentage of prescriptions in accordance with clinical guidelines
- Illness-specific indicators

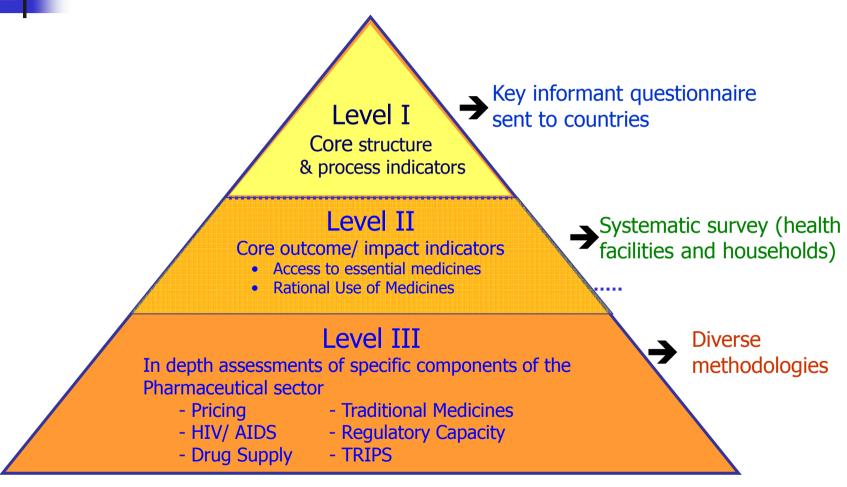
Quality of Interventions to Improve Medicines Use, by Region, 1990-2006

	Acceptable quality	Poor quality	All studies	
Number of studies	82	235	317	
Sub-Saharan Africa	28	103	131	
	34%	44%	41%	
Europe and Central Asia	2	6	8	
	2%	3%	3%	
Latin America and Caribbean	6	38	44	
	7%	16%	14%	
Middle East and North Africa	3	17	20	
	4%	7%	6%	
South Asia	27	34	61	
	33%	14%	19%	
East Asia and Pacific	16	37	53	
	20%	16%	17%	

Source: Medicine use in primary care (WHO/EMP/MAR/2009.3)



WHO Indicator-based Approaches to Monitor National Medicine Policy



MeTA Baseline Sector Scan

- Part of broad-based assessment of:
 - Pharmaceutical sector structure, process, outcomes
 - Disclosure status of key areas of data
 - Household access to medicines
 - Stakeholder engagement
- Integrates other sector scan approaches
 - WHO Level 1, 2
 - World Bank country profiles
 - MSH pharmaceutical system assessment



1. Country Profile: Demographic and Socioeconomic Indicators
2. Country Profile: Mortality and Causes of Death
3. Country Profile: Health Care Expenditures
4. Country Profile: Health Personnel, Infrastructure, and Primary Health Care
5. Medicines Policy and Regulatory Framework
6. Medicines Market at Retail Price
7. Medicines Financing: Government Expenditures and Health Insurance
8. Medicines Financing: Public Programs Providing Free Medicines
9. Medicines Financing: Patient Fees and Copayments
10. Medicines Trade: Intellectual Property Laws
11. Medicines Trade: Registration
12. Medicines Trade: Manufacturing
13. Medicines Trade: Quality Assurance
14. Medicines Trade: Price Control and Transparency



15. Medicines Trade: Price Comparison in the Private-for-Profit Sector
16. Medicines Trade: Consumer Prices of Medicines (HAI Global List)
17. Medicines Trade: Promotion and Advertising - Legal and Regulatory Provisions
18. Medicines Trade: Promotion and Advertising - Code of Conduct and Spending .
19. Medicines Supply System: Selection
20. Medicines Supply System: Procurement in the Public Sector
21. Medicines Supply System: Procurement Price of Medicines (HAI Global List)
22. Medicines Supply System: Distribution
23. Medicines Access
24. Medicines Use: National Structures
25. Medicines Use: Prescribing
26. Medicines Use: Dispensing
27. Medicines Use: Pharmacovigilance



Example of Data Collection Process for MeTA Assessment

Medicines Market at Retail Price

In this se	ction, "medicines market" refers to public, private, and not-for-profit markets.				
6.1. Possible sources: National legislative proceedings, MoH, Medicines Regulatory Agency, Ministry of Trade, National Bureau of Statistics, Manufacturer associations, Importer or wholesaler records, WHO Level I Survey 2003¹¹ and 2007, IMS country reports¹⁴, WHO World Medicines Situation¹⁵					
6.3. Total annu	al market for medicines by value (local cur.)6				
6.4. Market sha	re of generic medicines [branded and INN] by value (%)				
6.5. Market sha value (%)	Document source of each item and year collected:				
6.6. List of top 2	Item Number(s) Source, Location, & Year Comments				
6.7. Annual gro					
6.8. Annual gro					
&: If yes, obtain	i.				



WHO Indicator-based Sector Assessment Activities Planned for 2010

- Consolidate indicator approaches
 - Glossary and definitions
 - Expert consensus on indicators
 - Prioritization of key indicators
 - Develop country profile formats
- Develop web-based interface
 - Data collection and updating
 - Reporting
- Pilot testing
 - Two countries per region
 - Final revision of indicator process



WHO(-MeTA) Community Assessment Survey Samples

- Sample: 30(-36) primary care facilities, 30(-72) retail outlets, & 900(-1080) households
- Topics in facility/outlet survey
 - Availability, quality, affordability, appropriate use
- > Topics in household survey
 - Expenditures and assets (permanent income)
 - Care seeking, treatment, and reasons for nontreatment of acute and chronic illness
 - Household supply of medicines
 - Perceptions about access, affordability, and quality



Equity-oriented Indicators from WHO-MeTA Household Survey

- Illustrative indicators
 - Average HH medicine expenditures as percent of non-food expenditures
 - % of HHs with insurance coverage for medicines to treat a reported illness (acute, chronic, by illness)
 - % of respondents who agree that distance from source of medicines is a reason for not taking a medicine as prescribed for a reported illness
 - % of respondents who agree that medicines are available at point of distribution (public facility, private pharmacy, drug seller)
 - % of respondents who agree that locally made medicines are of lesser quality
- All can be examined by expenditure quintile or in defined low SES group

Need for Pharmaceutical Sector Observatory for the Americas?

