

**DRUGS AND MONEY****Prices, Affordability and Cost Containment****M. Salah Eldin Abdel Baky**

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The U.S. Food and Drug Administration on 6<sup>th</sup> of Dec approved Sovaldi (sofosbuvir) to treat chronic hepatitis C virus (HCV) infection. Approval represents a significant shift in the treatment paradigm for patients with chronic hepatitis C. Sovaldi is a nucleotide analog inhibitor that blocks a specific protein needed by the hepatitis C virus to replicate. Sovaldi is to be used as a component of a combination antiviral treatment regimen for chronic HCV infection. Depending on the genotype of HCV infection a patient has, the treatment regimen could include Sovaldi and ribavirin or Sovaldi, ribavirin and peginterferon-alfa. In clinical studies, Sovaldi in combination with other agents achieved very high cure rates while shortening the duration of treatment to as little as 12 weeks and reducing or completely eliminating the need for interferon injections, depending on the viral genotype.<sup>(1)</sup> These are the good news but the bad news that daily pill costs 1000 \$ = 7000 LE, a 24-week supply of the drug will cost 168000 \$ = 1,176,000 LE??? What a price !!!

Hepatitis C virus is a major health problem in Egypt with estimates of about 14 millions patients with active infection at time being, the highest world prevalence.<sup>(2)</sup> This means that we need more than 250 billion \$ to treat our patients, what a price!!!

Extensive research over the past 2 decades has led to the development of a new and exciting group of biologic therapies. These agents have begun to revolutionize the treatment of rheumatoid arthritis and other forms of immune mediated inflammatory rheumatic diseases. They are clearly very effective medications and may significantly change the course of these diseases.<sup>(3)</sup> Biologics may induce remission in various inflammatory rheumatic diseases, thereafter allowing maintenance with less expensive medications

There are seven biologic agents available now in Egypt, but there is no data base available to know the exact number of patients on biologics and the indications for prescribing a particular biologic as there is no biologic

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registry. The biologic therapies are not covered by governmental health insurance or governmental university hospitals due to stressed limited health budget, so most of biologic therapies are prescribed in private practice.

As there are no national guidelines for biologic use in Egypt, the prescribing is dependent on expert opinion and most importantly on absence or presence economic barriers. I feel helpless when I am faced with a patients with a severe active RA on triple DMARDs combination or a patient with active axial spondyloarthritis on NSAIDs for long time with poor response, I cannot prescribe a biologic simply because of economic barriers. On the other hand you may be faced with a patient on biologic therapy without any reasonable indication just he has no economic barrier!

Biologic therapies are not a luxury, they should be made available by health authorities for those who are in bad need to them through national respectable guidelines and to be prescribed by the experts in that field, by that time a biologic registry could be established.

Egypt invests a smaller proportion of its Gross Domestic Product (GDP) on health care. In 2007/08, Egypt spent 4.75 percent of GDP on health. Public spending comprises only one-third of total health spending and has remained at practically the same level between 1994/95 and 2007/08. Out-of-pocket spending remains the single largest source of health care financing, accounting for 60 percent of total health spending<sup>(4)</sup>

The reasons why the overall costs of pharmaceutical care tend to rise continuously have been well summarized by the National Institute on Health Care Management<sup>(5)</sup>. They are:

1. The replacement of older, cheaper medicines by newer, higher priced medicines.
2. Increases in the use of medicines
3. The introduction of new medicines for diseases for which hitherto no treatment (or at best a less effective treatment) has been available.
4. Increases in the price of existing medicines

In providing universal access to health care, a sound basis for the structural financing of national health care systems is of utmost importance. Cost containment can be seen as an ongoing series of attempts by governments to spend their limited financial resources as efficiently as possible.

The challenge for governments of developing countries is to find a balance between the need to attain national health objectives, the effort to respond to the health needs of the population, the political climate, the capacities existing in the public and private health and pharmaceutical sectors, and the economic realities of these countries.

As the governments of developing countries seek to achieve their public health goals they will find it necessary to ensure equitable access to “old” and “new” essential medicines, probably using innovative approaches with which successful experience has been gained elsewhere<sup>(6)</sup>.

## REFERENCES

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