

NEXUS BETWEEN DOCTORS AND DRUG COS FORCES PATIENTS TO PAY MORE FOR MEDICAL EXPENSES

Generic Vs branded debate is more than just costs



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he Union health ministry on Friday asked the medical community to follow a 2016 notification of Medical Council of India (MCI) that mandates doctors to prescribe medicines by generic names.

The World Health Organisation (WHO) defines "generic" as a bioequivalent to a branded drug.

The proposal is seen as an attempt to bring expensive drugs to poor Indians, and also as a not-so

subtle swipe to regulate the nexus between doctors and drug companies considered to be one of the reasons which force patients to pay more for their medical expenses.

"There is already a code in MCI that states that doctors should prescribe generic medicines as much as possible. So, this proposal does not ban use of brand name," said DG Shah, secretary general of Indian Pharmaceutical Alliance

Industry associations, who have reached out to health ministry and hope to be able to approach PMO to prevent the law from being passed, are opposed to the proposal on the grounds that the onus of what patients should

consume will shift from doctors to chemists. Chemists are unregulated and have no obligation, ethical or commercial. After seeking approval from the central government, the MCI, which registers doctors to ensure proper standards of medical practice, had on September 21 last year, notified an amendment in Clause 1.5 of Indian Medical Council (Professional Conduct, Etiquette and Ethics) Regulations, 2002.

This clause now reads: "Every physician should prescribe drugs with generic names legibly and preferably in capital letters and he/she shall ensure that there is a rational prescription and use of drugs". The words "legibly and preferably in capital letters" were

not there originally. Also, the UPA government had from time to time, issued circulars and instructions to government hospitals and Central Government Health Scheme (CGHS) dispensaries to prescribe generic medicines to the maximum extent possible. In December 2012, UPA government had issued a statutory direction to state governments to grant/renew licenses to manufacture for sale or for distribution of drugs in proper/generic names only. This was intended to build a mechanism for wider use of generic drugs. Most recently, a countrywide campaign has been under way to ensure availability of generic medicines under the Pradhan Mantri Bharatiya

Janaushadhi Pariyojana. A total 861 such kendras are functional in 28 states at which 99 private manufacturing firms have been empanelled to supply generic drugs. Experts say the government's priority should be to bring a legal framework to ensure quality in generic drug testing. Generic drugs should work therapeutically and the government should ensure uniform quality, only then doctors can prescribe them with confidence.

Also, the government has to clarify how it will ensure that once a doctor prescribes the generic drug, detailing its medical composition, the pharmacist or chemist will give the most appropriate drug to the patient.