

## 10 TAKE-AWAY MESSAGES

### ACCESS TO MEDICINES: HOW TO BRIDGE THE EAST-WEST GAP

Ensuring easy, affordable and equitable access to good quality healthcare is a challenge for policy-makers in all countries. However, economic development and healthcare spending are significantly lower in Central, Eastern and South-Eastern European (CESEE) countries compared to the Western EU members. This impacts the access to medicines for consumers in these countries, especially when it comes to more innovative treatments.

During the event organised by The European Consumer organisation (BEUC) and the Alliance of the Lithuanian Consumer Organisations (Lietuvos vartotojų organizacijų aljansas), participants exchanged on four main issues:

#### WEST



#### EAST

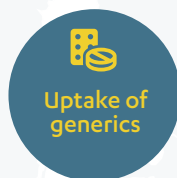
In recent years, CESEE countries spent on average nearly five times less on health than in the West (or nearly 3 times less after adjusting for purchasing power).<sup>1</sup>

It just takes one year for medicines to enter Western markets after approval.<sup>2</sup>



New medicines are introduced on average 3 years after they were approved to enter the market.<sup>3</sup>

In Germany and the United Kingdom, generics accounted for more than 75% of the volume of medicines bought.<sup>4</sup>



Over the last years, of all medicines sold, generics accounted for only 35% in Estonia and 50% in Slovenia, leading to more spending on the originals.<sup>5</sup>

Consumer and patient communities have been established for longer and benefit from more support.



Consumer and patient communities lack financial and societal support, when it comes to health policies. They often end up being excluded from decision-making.

<sup>1</sup> Calculated using data from 'Government expenditure on health', Eurostat, March 2018.

<sup>2</sup> Maini L, Pammolli F. 'Reference Pricing as a Deterrent to Entry: Evidence from the European Pharmaceutical Market'. Open Scholar Harvard, December 2017

<sup>3</sup> Ibid

<sup>4</sup> 'Health at a Glance: Europe 2018. State of Health in the EU Cycle', OECD Publishing, 2018.

<sup>5</sup> Ibid

# WHAT SOLUTIONS?

## INCREASED SPENDING ON HEALTH

**Member States must prioritise health.** The EU Council needs to assume a stronger, proactive role in developing an EU-wide approach to health policy that promotes equitable access to quality healthcare in all Member States. One element to this is that European and national governments must increase their health budgets to promote economic development and focus on prevention. A healthy population is indeed more productive, earns higher incomes, works and lives longer.

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## FASTER ACCESS TO NEWER MEDICINES FOR ALL

**2 A robust cooperation on health technology assessment is necessary to increase access to promising treatments and avoid wasteful spending.** This would help prevent the approval of new medicines which are often more expensive and not necessarily more efficient and cost-effective.

**3 There is a need to thoroughly understand big data in health to secure patients' protection, especially in CESEE countries.** This is paramount to safely tap big data's great potential to improve benefit-risk assessments of medicinal products through their entire lifecycle.

**4 Medicine prices in negotiations between payers and industry must be transparent, to improve medicines affordability and availability.** Options include formal joint procurements, rules to impose disclosure of actual prices and informal agreements among purchasers to share the costs of selected medicines..

**5 Joining forces with neighbouring countries to negotiate medicine prices** can help make smaller EU markets with less purchasing power more attractive to industry.

## HIGHER UPTAKE OF GENERICS

**6 It is necessary to bust the myths on generics in the CESEE countries.** To do so, education campaigns should target consumers, patients, healthcare professionals and pharmacists on the safety and efficiency of generic medicines.

**Incentives to prescribe generics** should be given to healthcare professionals and pharmacists.

**8 Biosimilars – which are highly similar to the original medicine – can also contribute to medicines accessibility and decrease overall spending.** Therefore, it is important to increase public confidence in such medicines.

## STRONGER CIVIL SOCIETY ENGAGEMENT

**9 Diversity must be preserved and encouraged in the debate on access to medicines.** While patient organisations play an important role in shaping health policies, consumer representatives across the EU are adding their unique perspectives on health issues (e.g. by launching competition court cases<sup>6</sup>).

**10 CESEE civil society needs greater support** – including financial resources – to ensure consumers and patients build their capacity to meaningfully and independently engage in a political dialogue.

<sup>6</sup> In 2014, Italian consumer organisation Altroconsumo filed a [complaint](#) to the Antitrust Authority over the consistent price increase – from 250% up to 1,500% – applied to three anticancer drugs belonging to Aspen Pharma. The Italian investigation led to a 5 million euro fine imposed by the national Competition Authority and further obligations to the company. The EU competition authorities are currently investigating similar practices in other countries.