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21 JUNE 2023 – EUROPE: GSK's RSV vaccine shows long-term efficacy in late-stage trial

June 21 (Reuters) - GSK (GSK.L) on Wednesday said its vaccine for the respiratory syncytial virus (RSV), which recently won EU approval, showed strong long-term protection in older adults in a late-stage trial. The British medicine maker said a 'Phase III' trial showed vaccine efficacy against RSV-lower respiratory tract disease and severe disease over two full RSV seasons, including in participants with underlying medical conditions.

GSK's jab, called Arexvy is designed to protect people aged 60 and over from RSV, which typically causes cold-like symptoms, but is a leading cause of pneumonia in toddlers and the elderly. European regulators approved the shot earlier this month for the disease which causes thousands of hospitalisations and deaths annually.

Author: Eva Mathews

19 JUNE 2023 – FINLAND: The parent company of Tamro, PHOENIX group, aims to achieve CO2 neutrality by 2030

PHOENIX group, the parent company of Tamro, has approved a climate strategy that applies to the entire group. One of the key objectives of this strategy is to become CO2-neutral in its own business operations by the year 2030 PHOENIX group operates in a total of 29 European countries, and each operating country takes responsibility for achieving the target. The carbon neutrality target guides Tamro's systematic environmental work and provides a clear framework for measures aimed at reducing carbon dioxide emissions, says Katja Toivonen, Tamro's Quality and Sustainability Business Partner.

A significant portion of Tamro's emissions are related to the maintenance of our facilities and the operation of production, as the products we handle require regulated conditions. It is therefore natural for us to start reducing emissions from the heating and electricity energy we use.

With its climate target, PHOENIX group aims to underline its commitment to creating added value not only for the healthcare sector but also for society and the environment. "As part of society and as the leading healthcare provider in Europe, it is our duty to contribute to greater climate protection and help especially in minimizing the health risks related to rising temperatures", says Leon Jankelevitsh, Member of the Executive Board Healthcare Logistics & Sustainable Supply Chain.

"We are convinced that the economic success of our company is inseparably linked with social and environmental responsibility. The expectations of our customers, employees and investors are growing – as are regulatory requirements". In addition to focusing on emissions in PHOENIX' own business unit, the healthcare provider is working in parallel to optimise data collection for its emissions along the supply chain.

Author: TAMRO

20 JUNE 2023 – FRANCE: Full-service healthcare distribution model under pressure

The vast majority of reimbursable medicines in France's 21,000 pharmacies are supplied by full-service healthcare distributors, who deliver them several times a day. This logistics operation, which requires them to travel 180 million kilometers a year, has lost its economic model since inflation, warns the French Chamber of Pharmaceutical Distribution (CSRP).

The seven full-service healthcare distributors in France are collectively in the red and one of them even "presented a job-saving plan at the end of March, with around a hundred jobs affected", warns the CSRP in a letter sent to Elisabeth Borne on June 8, requesting a meeting. Current medicines shortages "would be incomparably more serious in the event of a failure in the profession" the letter stresses. Full-service healthcare distributors calling for financial support.

Three types of supplier
Under the French Public Health Code, full-service healthcare distributors are required to maintain a 15-day safety stock of their 24,000 products and to deliver orders within 24 hours. However, they are not the only ones to supply pharmacies. "We distribute 71% of the volume of reimbursable medicines, and the rest is delivered by other players," stresses Laurent Bendavid, Chairman of the CSRP. Pharmacies can also place orders directly with laboratories or stockists, a type of intermediary that can offer better discounts than full-service healthcare distributors, as they do not have to finance safety stocks.

In the end, a pharmacy may receive deliveries 7 or 8 times a day, "but often only twice a day for emergencies", assures Laurent Bendavid. The rest comes from laboratories and stockists. Each has its own vehicle, and logistics are not pooled, not even for the last mile in the city center. And for the time being, fleet electrification is marginal in medicines logistics, which is therefore denounced as hyper carbonized.

"A pharmacist is free to make an unlimited number of deliveries per day. Free delivery encourages the multiplication of suppliers and orders", and does not encourage the pharmacist to stock the medicines, as pointed out recently in the "JDD" by Serge Orru, President of the French Climate Academy, and Pascal Perez, an economist.

In addition to the carbon footprint, critics of the current system point to its high cost. For whoever delivers reimbursable medicines, whether wholesaler or not, Social Security pays 7% of the medicine's value (with a minimum of 30 cents and a maximum of 32.50 euros). In total, "full-service healthcare distributors generate sales of 20.4 billion euros in sales and receive a regulated margin of 1.3 billion euros", explains Laurent Bendavid.

Social Security pays
Full-service healthcare distributors regularly denounce the fact that Social Security pays the same amount to stockists, even though they have no safety stock to finance. For the CSRP, rising fuel prices and inflation mean that the regulated margin is no longer sufficient to cover costs.

"The sector has gone from an operating profit of 200 million in 2008 to an operating loss expected to widen this year to 50 million euros", says Laurent Bendavid. Full-service healthcare distributors are calling for the ceiling on their regulated margin to be raised from 32.50 to 40 euros on the most expensive innovative medicines, and for the tax on their sales to be reduced from 1.5% to 1.20%.

Critics of the system, on the other hand, are astonished that savings on transport costs have not been exploited by full-service healthcare distributors. They point out that the largest wholesalers are also active as depositaries and call on public authorities to rationalize pharmacy logistics. The office of the Minister of Health, for its part, does not get ahead of itself. It assures us that it is "aware of the issues raised by the full-service healthcare distributors" and that "the matter is currently under investigation."

Author: Myriam Chauvot
Translated by DeepL from French to English.

19 JUNE 2023 – FRANCE: French medicine regulator to fine companies that failed to meet stock obligations for antibiotics

PARIS, 19 June (APM) - French medicine regulator ANSM is preparing to give fines to pharma companies that did not meet their medicine stock obligations at the end of 2022, notably for antibiotics, the director general told the country's Senate. ANSM director-general Christelle Ratignier-Carbonneil spoke to the Senate's inquiry commission on medicine shortages for the second time and was asked about "the very few fines" the regulator has given to companies not meeting their obligations. ANSM's "guidelines" on giving this type of fine were updated in August 2022.

This is the second time Ratignier-Carbonneil has spoken to the Senate. The first time, in mid February, she said three fines were being issued. CSP has since been fined almost €35,000 for having declared at the last moment that stocks of its Valium 1% (diazepam) painkiller were at risk of running out, in a decision published in March. Ratignier-Carbonneil told the Senate on Thursday the "criterion and high level of the fines" have "clearly" been reinforced. She added ANSM has a "certain number" of procedures ongoing "concerning medicines which underwent significant supply tensions over the winter period, I am notably thinking of antibiotics, and thus with fines to come".

She also recognised the benefit of "advertising" and increasing "knowledge" of the sanctions, saying she is limited on this point by the public health code which stipulates a decision taken by ANSM can be published for a month maximum or until the situation has been resolved. "It is quite a restrictive aspect. There is perhaps something to look at on broadcasting information," she said, finding this aspect is "even more important than the sum paid itself". When one senator noted there were gaps in the risk management plans draw up by pharma companies and submitted to ANSM, Ratignier-Carbonneil said "given [ANSM's] funds" it dos not have enough staff to "check all 6,000 risk management plans" on medicines of major therapeutic benefit in France.

"However, when there is a significant shortage or stockout, then we can check the risk management plans," she said, adding that ANSM also looks at the plans when it carries out inspection visits. Ratignier-Carbonneil said the subject must be prioritised and added that the 450 essential medicine list published on Wednesday by the French health ministry would help. She also highlighted the need to increase ANSM's staff numbers and skills, given the "extremely significant" increase in shortage warnings, citing the areas of data analysis, risk management and "flow management".

Ratignier-Carbonneil said work is ongoing with doctor reps on the information gap on medicine shortages and stockouts between pharmacists and doctors. The aim is for doctors' prescribing software to show a medicine is

experiencing shortages when it is selected. "We are working to try and see how we can 'push' all the information ANSM has" on to prescribing software, she said, adding that the issue is getting the software and ANSM's databases to interact and that it is not impossible. It will allow doctors to change prescriptions and mean patients avoid having to go to several pharmacies to get their treatment, she continued. It is a "realistic ambition" she said and ANSM wants to trial It with some software providers before rolling it out at the end of 2023.

Author: editorial@apmnews.com

21 JUNE 2023 – GERMANY: Manufacturers cannot fulfill mandatory six-months stockpiling rule.

BERLIN, 21 June (APM) - Generic manufacturers have no capacity to produce and store six-months worth of stock of medicines, the industry's trade body Pro Generika has said. "Whoever believes that the medicine shortage problem will become less acute through this measure, is wrong," said Pro Generika's managing director Bork Bretthauer in a Tuesday statement on the latest set of amendments to the bill on medicine shortage prevention ('ALBVVG').

The ruling three-party coalition members have agreed to introduce mandatory six months of stockpiling into all discount agreements between payers and manufacturers, as the Green Member of Parliament (MP) Paula Piechotta announced on Tuesday.

"We are already running out of capacity to manufacture some of the medicines. Where do they expect to find the manufacturers that would produce these immense stocks? How can you ramp up production at a factory that is already working at full capacity? And how can we build more storage if nobody is going to pay for it?" Bretthauer said.

According to Pro Generika, this measure which is supposed to apply to all discount agreements for all medicines will only further reduce the offer of medicines, because the manufacturers that remain on the German market can barely satisfy the demand. The new rule will further increase the pressure on the manufacturers, which will have to incur additional costs for extra storage facilities. It contradicts the original idea of this law, which was supposed to make the German market more attractive to generic manufacturers by reducing medicine pricing, said Bretthauer.

"We will see more medicine shortages, and stockpiling cannot prevent it. The Health Ministry and the coalition knew it, and have still decided to go ahead. This is not just short-sighted, it is endangering access to medicines," said the Pro Generika director.

The new law can potentially lead to €5 billion in extra costs for statutory payers thanks to the weakened discount agreement rules as well as the limitation of the so-called "retaxation": the rule when the pharmacist does not get reimbursed by the payer if he cannot prove that a cheaper version of the medicine was not available, said Ulrike Elsner, the chair of payer group vdek.

The bill and its amendments were passed by the Healthcare committee of the German Bundestag on Wednesday. It is expected to be passed by the Bundestag on second and third reading on Thursday evening, and by the Bundesrat, the upper house of the German Parliament, on 7 July. The bill also excludes paediatric formulations of medicines from discount agreements and capped reimbursement, as well as introduces a free pricing period of seven years for reserve antibiotics. The first measures are expected to come into force in August.

Author: daria.sukharchuk@apmnews.com

20 JUNE 2023 – GERMANY: German Health Ministry to run warning system to prevent shortages, instead of medicine regulator

BERLIN, 20 June (APM) - Germany's Health Ministry will be tasked with creating and running the warning system aimed at preventing critical medicine shortages, instead of the medicine regulator BfArM as initially planned, a Green Member of parliament (MP) said on Tuesday.

The MPs have decided to empower the Health Ministry, instead of the BfArM advisory committee, to build a warning system aimed at preventing generic medicine shortages, "in order to avoid serious clashes of interest", said Paula Piechotta presenting the amendments to the bill on prevention of generic medicine shortages ('ALBVVG') at an online press conference.

According to the original version of the bill to prevent generic medicine shortages, the BfArM advisory committee was to advise the Health Ministry on price changes - suspending capped reimbursement and/or raising the generic medicine's price by up to 50% - when the shortage advisory board recognised an imminent medicine shortage. The amendments were agreed on Tuesday between the three parties of the ruling coalition: the Greens, Social Democrats (SPD) and Liberal Democrats (FDP). The bill is expected to be passed by the Bundestag by Friday and by the upper Parliament chamber, Bundesrat, on 7 July. The first measures will come into effect in August, Piechotta said.

"The original goal of the BfArM advisory committee as it was created in 2019, involving both physicians and the industry, is to give its expert opinions on medicines that can replace those affected by shortages, regardless of the reimbursement. It was designed to solve this specific kind of medical problem," Piechotta said. The BfArM advisory committee currently includes representatives of the industry, pharmacies, patients, physicians and payers, as well as the Health Ministry itself.

"But now, it is supposed to set up a warning system and take decisions that are relevant for the reimbursement... To put it in other words, it would be like creating a second G-BA" said Piechotta, referring to the higher health technology assessment (HTA) body, which is a multi-stakeholder body including medical professionals, manufacturers, payers and patient representatives.

According to Piechotta, the G-BA is affected by clashes between various interest groups. "We heard many objections from the industry, claiming that for such a system to function they would need to share so much information that it could even infringe on their company secrets." Were this information to be shared within a BfArM advisory committee, it could potentially become available to competitors, as well as payers, Piechotta said.

"Therefore, we have removed this mandate from the BfArM advisory committee and given it to the Health Ministry. It will now be tasked with designing this warning system, free from the possible interest conflicts that can take place within the BfArM committee," she said. Several manufacturers' associations have highlighted the need to ensure the safety of their sensitive data if Germany were to set up a shortage warning system based on mandatory stockpile reporting.

To date, there is no detailed information on the criteria used to determine a shortage and the exact scope of the Heath Ministry's new mandate.

Author: daria.sukharchuk@apmnews.com

22 JUNE 2023 – GERMANY: Germany to offer unlimited free pricing for reserve antibiotics launched before 2031

BERLIN, 22 June (APM) - Germany will offer unlimited free pricing to companies that launch reserve antibiotics before 2031, according to the amendments accepted on Wednesday by the Health Committee of the German Bundestag.

"The privileged position of reserve antibiotics in terms of pricing" will be limited to the reserve antibiotics that enter the market before the year 2031, according to amendments to the bill on medicine shortage prevention ('ALBVVG') seen by APM. "This privilege will not apply to reserve antibiotics that are launched on the German market after 1 January 2031," it added. The bill and its amendments were passed by the healthcare committee of the German Bundestag on Wednesday. Its text and over 30 amendments were agreed upon on Tuesday by the three-party ruling coalition, which includes Greens, Social Democrats (SPD) and Liberal Democrats (FDP).

The bill is expected to be passed by the Bundestag on second and third reading on Thursday evening, and by the Bundesrat, the upper house of the German Parliament, on 7 July. The first measures are expected to come into force in August.

"The long-term limitation of this measure creates a stimulus for the research-based industry to develop and bring to the market reserve antibiotics." At the same time, this measure is transparent, clear, and allows for long-term planning, the amendment said. "The EU pharmaceutical regulation that is currently under discussion also contains measures to stimulate the development of reserve antibiotics." The time limitation is introduced to harmonise the German and European laws, according to the amendment.

Reserve antibiotics are already exempt from the usual health technology assessment (HTA) in Germany since 2020. Companies do not provide comparative data while the medicines are automatically assumed to have a positive added benefit once their status is acknowledged.

Currently, there are five antibiotics with the reserve status recognised in Germany. They are subject to a so-called 'antibiotic stewardship' policy "to prevent new resistances from developing against this antibiotic and the loss of the reserve status". According to the Green Member of Parliament (MP) Paula Piechotta, the seven-year limit was introduced "to avoid an exponential growth of costs for the statutory payers." The measures proposed by the EU Commission for reserve antibiotic developers, such as transferable exclusivity vouchers (TEV) are "more powerful", she said.

The developments are in the context of growing resistance to existing antibiotics. This antimicrobial resistance (AMR) is widely seen as a major public health threat, with governments and health authorities looking at ways to simulate the development of new antibiotics.

Author: daria.sukharchuk@apmnews.com

12 JUNE 2023 – ITALY: ADF applauds government's national pharmaceutical supply chain plan

Walter Farris, President of ADF, the National Association of Full-Service Healthcare Distributors, said, "We welcome with the utmost satisfaction the statements made by the Minister of Enterprise, Adolfo Urso, the Minister of Health, Orazio Schillaci, and the Undersecretary for Health, Marcello Gemmato, who during the 'Pharma&Life Sciences Summit' event of the Sole 24 Ore newspaper announced the implementation of a national pharmaceutical supply chain plan by the end of 2023. We can affirm the strategic value that the pharmaceutical sector holds in our country, in all its components (Producers, Intermediary Distributors, and Pharmacies) both in the social and health context and in services to citizens, and for its fundamental contribution to the national economy, is once again being recognized.

"Undersecretary Gemmato has stated that the Government is considering a new governance of the pharmaceutical sector that will have to improve the performance of the supply chain and involve all players, including full-service healthcare distributors and pharmacies. We are therefore confident that the time has come to reconsider the fundamental role of intermediary distribution, the central link in the supply chain, within the NHS and the regional health institutions," the ADF President states: "Our companies are continually being asked to cope with new service requirements and huge investments in order to respond to both regulatory updates (think, for example, of the adaptation by next February of operating structures and facilities according to European anti-counterfeiting regulations) and the needs required by the implementation of the new service pharmacy".

"The sustainability of the essential public service that intermediate distribution performs to protect citizens must also be guaranteed by reviewing the margins of our companies according to a logic of fair compensation based on the analysis and recognition of operating costs. It should be remembered, in fact, that law no. It must be remembered, in fact, that law no. 122 of 2010 drastically cut the wholesalers' share (reduced from 6.65% to 3%), so much so that the 'Table on market regulation and industrial strategies in the pharmaceutical sector', promoted by the MISE (now MIMIT) led to the photograph of a situation that underlined how the 'strong compression of intermediate distributors' margins leads to the provision of services of public interest to the NHS at below cost' and university studies quantify a loss of 0.26 euro for each packet of class A SSN medicine delivered".

"Together with the other players in the sector, we are today facing a multifactorial crisis: health emergencies, medicine shortages, rising costs, in addition to the economic and financial crisis with inflation and rising rates. This government is responding to the demands of the sector with a global approach and vision, which intends to involve all the players in the supply chain each in their specific and interconnected role, which is fundamental and indispensable to the Italian system. We are confident that these important and significant announcements will be followed, as soon as possible, by concrete measures and interventions that can give our companies breathing space,' President Farris concludes.

Author: ADF

Translated by DeepL from Italian to English.

21 JUNE 2023 – THE NETHERLANDS: Brocacef Group and Ceban Pharmaceuticals take over activities from each other.

Brocacef Group and Ceban Pharmaceuticals have agreed to acquire each other's activities, subject to customary approvals from the NZa and ACM. The agreement was signed on June 14. Ceban Compounding, part of Ceban Pharmaceuticals, is taking over the compounding activities of Brocacef Hospital Pharmacy, part of Brocacef Group. BENU, part of Brocacef Group, is taking over 19 of the 43 Medsen pharmacies, part of Ceban Pharmaceuticals.

Peter de Jong, Chairman of the Brocacef Group group management: "With the acquisition of 19 Medsen pharmacies, we can expand our national network of BENU pharmacies. We are pleased that a BENU pharmacy is now being opened in a number of areas for the first time. In addition to our online services, people from those regions can now also use our physical services in the pharmacy."

Jeroen van der Hamsvoort, CEO of Ceban Pharmaceuticals: "With the acquisition of the compounding activities of Brocacef Hospital Pharmacy, Ceban Compounding strengthens its position on the Dutch market for medicine compounding, both extramural and intramural. The acquisition contributes to the growth of Ceban Pharmaceuticals and its ambition to become a leader in compounding in Europe."

The 19 Medsen pharmacies have a total of 160 employees. They will be employed by BENU pharmacies. The 19 Medsen pharmacies will eventually be called BENU. The BENU chain currently comprises 327 owned pharmacies and 16 franchised pharmacies. The preparations activity of Brocacef Hospital Pharmacy employs 72 people. They will be employed by Ceban Compounding.

The approval process by the NZa has now started and approval is expected to be achieved within a few weeks. After that, Brocacef Group will start the approval process for the acquisition of the Medsen pharmacies at ACM. The entire process is expected to take approximately four months, so that the actual transfers can take place in the last quarter of this year.

Author: Brocacef

20 JUNE 2023 – SWEDEN: Oriola achieves gold in EcoVadis sustainability rating.

EcoVadis sustainability rating assesses companies in the areas of environment, labour and human rights, ethics, and sustainable procurement. Oriola has improved its result from the silver medal in the previous assessment in 2021. "We are extremely proud of this recognition of our long-term sustainability work. Sustainability is integrated in our strategy and business, and as part of the healthcare value chain we have a responsible role in society. Today, companies are increasingly interested in their partners' environmental and social performance, and this achievement demonstrates our strong commitment to sustainability," says Tua Stenius-Örnhjelm, Investor Relations and Sustainability Manager.

The EcoVadis assessment covers 21 sustainability criteria that are grouped into four themes: environment, labour and human rights, ethics, and sustainable procurement. The assessment is based on international sustainability standards such as the Global Reporting Initiative (GRI), United Nations Global Compact, and ISO 26000.

Author: Oriola

19 JUNE 2023 – SWEDEN: ORIOLA: GDP in our DNA – what the European guideline for pharmaceutical distribution stands for.

Compared with many other consumer goods, handling pharmaceuticals involves unique challenges and complexities, starting from strict regulatory environment and condition control. In the European Union, the key guideline and prerequisite for holding a wholesale distribution authorisation license is compliance with Good Distribution Practice (GDP). As a part of quality assurance, GDP ensures that the quality of medicinal products is maintained throughout all stages of the supply chain from the manufacturer to a pharmacy or a person entitled to supply medicinal products to the public.

In practice, GDP ensures all medicines in the supply chain are authorised in accordance with EU legislation; medicines are always stored in the right conditions; contamination by or of other products is avoided; an adequate turnover of stored medicines takes place; and the right products reach the right addressee within a satisfactory time period.[1]

These principles are the backbone of our distribution operations. Maintaining product integrity, temperature control, traceability and security is integrated in our processes and ways of working within Oriola and with our partners. Ensuring product safety starts from the moment a delivery enters our warehouse, and for example all products requiring storage in cold temperatures are handled separately. Additionally, we make sure that counterfeit medicines do not enter the legal distribution chain by dealing directly with pharmaceutical companies and by complying with the EU's Falsified Medicines Directive which entered into force a few years back. This means we verify one product package from each incoming batch as part of normal inspection.

One of the critical elements in handling pharmaceuticals is maintaining appropriate external conditions. If pharmaceuticals are exposed to temperature deviations, product quality might be jeopardised. Most medicines require room temperature between 15 and 25 °C, but some products, such as many vaccines and biomedicines, require cold or even freezer temperature. Due to increased customer needs for special temperatures, we have in recent years invested in modern and sustainable cold chain technology in our distribution centres in both Finland and Sweden.

Reliable and on-time pharmaceutical distribution is essential for healthcare systems and patient care. For most occasions, Oriola delivers pharmaceuticals within 24 hours from ordering. With cold products, it is crucial to make sure that the cold chain is unbroken during storage and transport. Cold products to pharmacy customers are delivered in special cold transport boxes, which are validated to maintain correct temperature for at least 30 hours. To ensure safe and sustainable deliveries to healthcare operators, we in general only use GDP compliant transport partners. This means for example that their fleet is equipped with temperature monitoring

and tracking technology for safety reasons, and that their drivers are trained in GDP. Close collaboration with our transport partners is essential, as external transport partners manage Oriola's entire transport network.

We are continuously reviewing our own processes to enhance the quality of our operations. However, maintaining safe and reliable pharmaceutical distribution is not just about GDP compliant processes but much about people. It is crucial that our employees understand the requirements of our sector and take pride in being part of the healthcare chain to provide people with safe and timely access to medicines. Building this awareness starts from onboarding that includes GDP training, but also from our common values and ambition towards patient safety. This is why we have GDP in our DNA.

Aino Kylmänen works at Oriola as Quality Director. She has years of experience from various responsibility areas at Oriola, most recently from the Quality team for more than 10 years.

Author: Oriola

21 JUNE 2023 – UNITED KINGDOM: Anti-epileptic shortages are "concerning", patient support organisations.

Some dosages of an anti-epileptic drug are set to be "out of stock" in the UK until mid-July 2023, with other dosages and formulations insufficient to meet the shortfall, a Department of Health and Social Care notice has warned.

The medicine supply notification, published on 14 June 2023, said that the stock issues will affect oxcarbazepine (Trileptal; Novartis Pharmaceuticals) 300mg and 600mg tablets from "late June 2023". Some 7,516 items of Trileptal 300mg and 600mg tablets were dispensed in 2022/2023 according to data published by NHS Business Services Authority on 8 June 2023.

Alternative dosages (150mg tablets) and formulations (60mg/mL oral suspension) of Trileptal will be available "but cannot meet an increase in demand", the notification said. It added that prescribers should identify patients taking the affected tablets "and prioritise this group of patients for any remaining stock when issuing prescriptions, liaising with community pharmacy to establish availability". Generic oxcarbazepine 300mg and 600mg tablets will remain available for patients, which the DHSC said could meet increased demand.

However, David Thornton, advice team leader at Epilepsy Action, said: "It's concerning to see that multiple formulations of Trileptal have been unavailable, oral suspension being one of these. Many people rely on Trileptal oral suspension with no generic alternative oral suspension. "We're also concerned that 300mg and 600mg Trileptal tablets are out of stock and 150mg tablets can't support an increased demand. "Oxcarbazepine is a category 2 medicine, so for many people it will have been decided by them and their doctor that they should stay on Trileptal where possible.

"If anyone has concerns about supply of their medicine or taking a different version, they can speak to their doctor or pharmacist for advice. While not ideal, for most people it's safer to take a different version of their medicine than to run out and stop taking medicine completely".

On 1 June 2023, The Pharmaceutical Journal's 2023 salary and job satisfaction survey of more than 1,500 UK pharmacists revealed that 57% of respondents thought that shortages have put their patients at risk in the past six months, despite government efforts to try and mitigate problems. Of 1,578 (57%) pharmacists working in all sectors of the profession, 902 answered 'Yes' when asked if medicines shortages have put patients at risk "in the past six months". The DHSC has attempted to mitigate the impact of shortages on patients. In the year to May 2023, it issued 23 serious shortage protocols for medicines facing supply problems.

However, The Pharmaceutical Journal's survey also revealed, despite these measures, 15% of respondents are spending more than five hours per week on activities related to shortages, while 33% are still unable to supply prescribed medicines to more than ten patients per week owing to shortages.

Author: Liz Perkins.

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