

3rd Asia-Pacific Regional Consultation on 'Undergraduate Medical & Pharmacy Education'

24th-26th August 2009, Browns Beach Hotel, Negombo, Sri Lanka



Setting up of an Informal Network of *Educators for Rational Drug Use*

Three vice chancellors, four deans, 20 professors and nine senior lecturers from faculties of medicine and pharmacy in 20 universities in 12 countries in the Asia-Pacific region are among the 50 participants who will be attending the 3rd Asia-Pacific Regional Consultation on 'Undergraduate Medical and Pharmacy Education'.

The Regional Consultation is convened by Health Action International Asia-Pacific (HAIAP) in collaboration with the World Health Organisation Southeast-Asian Regional Office (WHO-SEARO), New Delhi and the Faculty of Medicine, University of Kelaniya and takes place in Negombo at Brown's Beach Hotel between 24th-26th August 2009.

The objective of the consultation is to explore a long-term strategy to promote the rational and economic use of medicines.

There is documented evidence from the World Health Organisation (WHO) and international health journals that,

- ▶ worldwide over half of all medicines are prescribed and dispensed irrationally;
- ▶ the irrational use of medicines is widespread in teaching hospitals;
- ▶ a very few countries monitor the irrational use of medicines;
- ▶ the irrational use of medicines has become a major public health problem;
- ▶ studies have clearly demonstrated that physicians possess the ultimate degree of market power as demonstrated by their ability to induce demands for profitable services such as the use of expensive and profitable technology and drugs. This market failure results in high income for physicians and the over use of expensive technology and drugs;
- ▶ the over-use of expensive drugs in Sri Lanka is illustrated by comparing the costs of medicines supplied to all out-patients in government and private hospitals in 2002, the latest year for which data is available.
- ▶ in both the public and private sectors, equal numbers of patients demonstrated the same patterns of illnesses and the same consultants saw the patients in both sectors and prescribed drugs. However, in spite of the similarities between the public and private sectors, the cost of drugs supplied in government hospitals was Rs 516 million whereas the patients paid out-of-pocket Rs 16,882 million in private hospitals. The main reason for this being that in private hospitals expensive brand-name drugs were prescribed, whereas in government hospitals therapeutically equivalent but much cheaper SPC generics were supplied. **The health outcomes were the same.**

The World Health Organisation described irrational prescribing as '*a disease which is difficult to treat, but prevention is possible.*'

This is the objective of the consultation. The medical and pharmacy educators will collectively interact to explore ways and means to improve the teaching of pharmacotherapy to undergraduates on the concepts of essential drugs and their rational and economic use. This will enable future doctors and pharmacists to prescribe and dispense drugs rationally and economically.

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