

We cannot expect government action until a patient dies

Article

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The All Party Pharmacy Group has been grappling with medicines shortages which it accepts are the result of exporting.

It is simple to state the law: manufacturers and wholesalers have a legal duty to ensure the continuity of supplies for patients in the UK. This duty is based on an EC directive, so it seems strange to me that the Government says it is constrained by EU law from restricting the export of medicines. A targeted solution might be to ban exports of particular medicines, but the APPG says that the MHRA “does not even know which products are in shortage”. I find that a shocking revelation. The PSNC has a list of 30 or 40 scarce products, but this list is anecdotal and could not be used as the basis for legislation. Even if the MHRA knew what medicines are in short supply, a targeted ban on exports might result in similar action elsewhere in Europe when the exchange rate for sterling improves, preventing UK pharmacists from acquiring cheap imports.

The Department of Health told the APPG that it had no hard evidence of patient harm. That suggests to me that apart from uttering platitudes, we can't expect Government action unless a patient dies. Any response at that time will not be considered, based on knowledge, but a knee-jerk reaction to appease the tabloids.

Manufacturers' quotas have turned out to be a blunt instrument. We might have expected that a combination of Direct to Purchaser arrangements and the ability to impose quotas would give manufacturers the ability to avoid stock shortages, but according to the APPG, this is not the case.

I don't claim to have a legal solution to avoid shortages: pharmacy owners are in business and exporting is not unlawful. Of course, pharmacists have to put the welfare of patients first, but it would be very hard to prove that the export of a particular medicine on a specific occasion had resulted in a patient somewhere in the UK not receiving their medication. The GPhC cannot prohibit exporting, so even if it took action in cases where there is evidence of specific misconduct, this will not resolve the problem of shortages.

I can't escape the thought that the Department of Health is waiting for the exchange rate to alter, so that the problem will move somewhere else. Will we care as much when patients in Greece can't obtain prescribed medicines?

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