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HOW CAN DUTCH UNIVERSITY HOSPITALS CONTRIBUTE TO AFFORDABLE MEDICINES AND COST CONTAINMENT OF TOTAL HOSPITAL DRUG EXPENDITURE: A DELPHI STUDY

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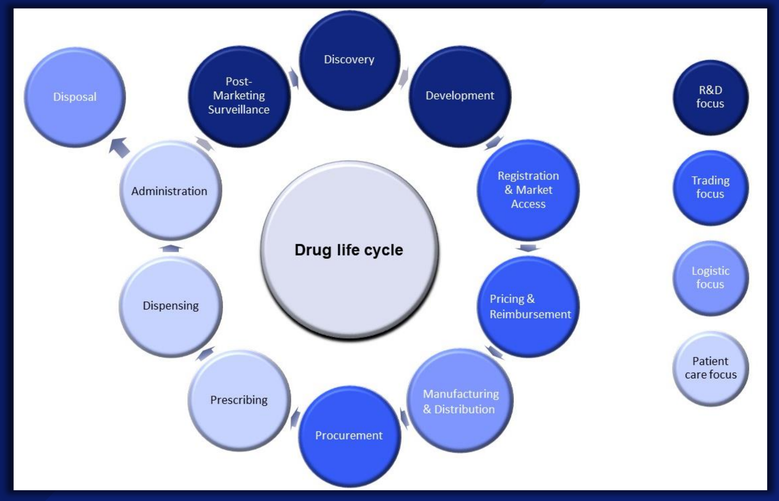


Background and importance

- Increasing expenditure on pharmaceuticals is of growing concern to the affordability of healthcare systems across Europe.
- The European Commission has stated in its Pharmaceutical Strategy for Europe [1] that all stakeholders should be involved in tackling this problem.
- Moreover, for a more comprehensive and integrated approach solutions along the whole drug life cycle should be considered.
- University hospitals are one of the stakeholders engaged in multiple phases of the drug life cycle; (pre-)clinical research, market authorization, pricing & reimbursement, manufacturing, procurement, prescribing, dispensing and monitoring real-world effectiveness.

Aim and objectives

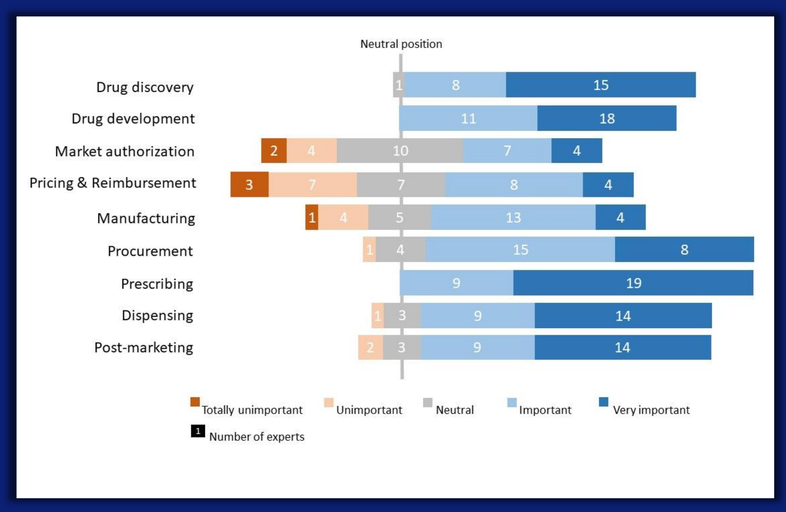
- Our aim was to explore which activities university hospitals perform or should perform to contribute to cost containment of innovative medicines.

Materials and methods

- We assembled an expert panel of 31 Dutch pharmaceutical experts consisted of doctors, researchers, hospital pharmacists, directors and technology transfer experts of university hospitals, health insurers and policy advisors from governmental authorities.
- To collect data we used a Delphi technique which comprised of three subsequent rounds.
- First round: to explore activities university hospitals currently perform or should perform throughout the drug life cycle and what barriers they encounter.
- Second round: to indicate on a 5-point Likert scale (dis)agreement with all mentioned activities and barriers.
- Third round: to reach consensus on activities and barriers which were (dis)agreed upon less than 50%.

Results

- Considering (pre-)clinical research, the expert panel agreed that university hospitals should increase involvement in drug repurposing and monitoring of real-world effectiveness of medicines.
- While prescribing medicines is reserved for medical specialists university hospitals should raise awareness on cost-effective prescribing by doctors via:
  - more active involvement of hospital pharmacists;
  - adjustment of national prescribing guidelines;
  - extending pharmacotherapy education.
- According to the expert panel, cost containment could be improved by reducing spillage such as precision and efficient dosing.
- Controversy remained on the notion of university hospitals building knowledge on regulatory affairs for marketing authorization and increasing their effort on self-manufacturing of medicines.



- Agreed upon barriers restricting university hospitals to expand their activities were insufficient financial resources and legal and entrepreneurial expertise.

Conclusion and relevance

- University hospitals should increase their efforts to reduce costs of medicines throughout the drug life cycle, especially on activities regarding drug repurposing, collecting real-world evidence and cost-effective prescribing.

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References

[1] European Commission. Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the regions: Pharmaceutical Strategy for Europe. Brussels, 2020