

Access to medicines - meeting the needs of patients



Hospital pharmacists across the world are working every day for

their patients to ensure that they receive the medication they need to improve their health and to prevent and cure diseases. However, sometimes the medicine that is suited for an individual patient is not accessible. Growing healthcare expenditure has become a problem for many European countries. Innovative drugs, in particular, place an additional strain on already tight hospital budgets. Patients are directly affected and increasingly faced with avoidable accessibility and affordability issues. Besides the constraints faced by public health budgets, there are other barriers to treatment access. These include the growing problem of medicines shortages, delayed market access for new treatments in some European regions or increased out of pocket costs for patients.

EAHP's Position Paper on Access to Medicines advocates for affordable medicines of good quality that are provided in a timely manner to patients. To achieve this goal barriers to treatment access need to be broken down and the uptake of enablers that promote and safeguard the access of patients to both new life-saving medicines and older, essential medicines must be increased.

Barriers to treatment access

- Lack of purposeful procurement practices
- National pricing and reimbursement policy choices jeopardising patients' adequate access
- Medicine shortages
- Unavailability in certain markets, leading to inequity between Member States

Enablers to treatment access

- Health Technology Assessments (HTAs), including common reports at EU level
- Collaboration and best practice sharing on pricing and reimbursement
- Increasing the use of prevention measures
- Fostering innovation and research

To achieve an equilibrium between the barriers and the enablers to treatment access, EAHP

- recommends that the expertise of the hospital pharmacist in pharmacoeconomics and the assessment of drug effectiveness be leveraged and well utilised within value-based evaluation approaches. Additionally, the implementation of the forthcoming HTA Regulation should be used for the expansion of healthcare professional input in HTAs at both European and national level.
- supports the view of EURIPID and strongly recommends that this tool is not applied on its own but in conjunction with other policy measures, including transparency;
- calls on hospital managers and its members to work together to increase the uptake of risk assessments in hospitals; and,
- urges increased investment to support the development of innovative proposals and the encouragement of practice-based research projects to investigate new fields of infectious disease control such as immunotherapy and to optimise the cost-effectiveness of systems for surveillance on antibiotic use and resistance.

In striving for a European Health Union aided by the implementation of the Pharmaceutical Strategy, EAHP is committed to working together with the European institutions and other stakeholders by giving a voice to access issues that otherwise might be forgotten.

Read EAHP's Position Paper on Access to Medicines [HERE](#) ^[1]

Being unable to access quality care when needed is oftentimes categorised as having an unmet healthcare need. Another type of unmet need relates to an existing medicinal product that might not meet the specific demand of an individual patient and thus does not offer a major therapeutic advantage to him or her. Yet another condition that could be classified as unmet would be the lack of a satisfactory method of diagnosis, prevention, or treatment. Based on these different types of unmet medical and healthcare needs it can be concluded that no uniform concept exists. Consequently, some needs of patients cannot be adequately addressed by hospital pharmacists.

For the European Association of Hospital Pharmacists (EAHP) it is of utmost importance that a clear pathway to address unmet healthcare needs is devised.

The unmet need definition proposed by the European Commission in its revision of the general pharmaceutical legislation is in the view of EAHP sufficient to fully address the entire problem in the EU. For EAHP it would be important to not only focus on unmet medical needs but to widen the definition also to healthcare needs which are not always met equally in all Member States.

Read the EAHP Board opinion on Unmet Medical Healthcare needs [HERE](#) ^[2].

Last update: 15 January 2024

Links

[1] https://www.eahp.eu/sites/default/files/eahp_position_paper_on_access_to_medicines.pdf [2]
https://www.eahp.eu/sites/default/files/eahp_opinion_on_unmet_healthcare_needs_0.pdf