
SUMMARY REPORT ON JORDAN PHARMACEUTICAL SECTOR

Based on Pharmaceutical Sector Scan June 2010

Medicines Transparency Alliance

19th September 2010

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September 2010

This is a draft report, the final version pending Jordan MeTA Council members' review.

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Objective of this Report:

To summarize the findings reported in the Pharmaceutical Sector Scan conducted in June 2010 in Jordan, the methodology was set by the WHO Harvard Collaborating Center in Pharmaceutical Policy, conducted on behalf of the Medicines Transparency Alliance; the other objective is to highlight key issues.

Summary Findings

Sections 1-4: Country Profile

The indicators identified in the Sector Scan suggest that in general Jordan is in keeping with other countries in the region, in terms of expenditures, resources and mortality. Life expectancy for example is reported at 73 years. Mortality rates are reasonable for the region; with maternal mortality of 19.1/100,000 and infant mortality of 23/1000 live births.

Issue 1

Private out of pocket expenditure at 35.8% of total health expenditure is relatively high and raises the possibility that care may not be available in an equitable manner throughout the population. An associated issue is that a significant percentage of the population may not be adequately covered for health care, with only 86% of the population covered by the national health insurance or social health insurance schemes (no significant SHI scheme).

Section 5: Medicines Policy and Regulatory Framework

The key policy and regulatory elements appear to be in place with the following exception:

Issue 2

It is essential that the National Drug/ Medicine Policy is regularly reviewed and updated and that there is an implementation plan developed and implemented. This appears not to have taken place in Jordan

Section 6: Medicines Market

There is a general lack of information available on the various markets, with little in the way of publically available information.

Issue 3

It is difficult for a government agency to make appropriate policy decisions in the absence of high quality information.

Sections 7-9: Medicines Financing

The Scan report does not identify any significant issues here except the lack of a social health insurance program and the relatively low percentage of the population covered by national insurance schemes (see Issue 1), and the issue of co-payments.

Issue 4

The Scan reports that registration fees/consultation fees are common in public primary care facilities. Assuming that these are in the form of informal payments then this raises the matter of whether health care is being provided in an equitable manner across all the population

Sections 10-18: Medicines Trade

The Scan report suggests that the key elements for intellectual property, registration, manufacturing, quality assurance, price control, price comparison and promotion are in place. Issues however include:

Issue 5

No publically available list of registered drugs (originator, branded generics and generics)

Issue 6

No publically available list of consumer price on the top 20 medicines

Issue 7

Prices for drugs provided in the private and public sector was not provided in the Scan report

Issue 8

There is no regulatory committee for controlling medicines advertising and promotion, there isn't any formal process for complaints and sanctions within the manufacturers' national code of conduct, nor is there a routine publically available report on complaints on promotional practices

Sections 19-22: Medicines Supply

Again, the key elements are reported to be in place. Issues however include:

Issue 9

There is a lack of standard treatment guidelines for common illnesses

Issue 10

In regards to public sector procurement there is no publically available list of prequalified suppliers, nor are results of quality testing conducted during the procurement process publically available.

Issue 11

List of GDP complaint distributors is not available

Issue 12

Software is not available for planning, quantification of needs and procurement processes

Section 23: Medicines Access

Issue 13

There is apparently no information available on geographic access, affordability, availability of equity of access to medicines *Pending receiving results of the WHO Level II survey*

Sections 24-26: Medicines Use

Many of the regulatory processes are in place to monitor and influence medicines use, however there are some issues:

Issue 14

There is no national strategy to manage antimicrobial resistance, nor is there a national reference laboratory to coordinate epidemiological surveillance on antimicrobial resistance

Issue 15

Data on prescribing and dispensing indicators was not available

Issue 16

The status of generic substitution was not described in the Scan report

Issue 17

Dispensing of antibiotics and injections is allowed without a prescription

Prioritizing the Issues

All these issues are important however it may be useful to prioritize them. This section attempts to prioritize the identified issues

Issue	Description	Impact Rating (1-5)	Priority (High, Medium, Low)
1	Out of pocket costs/ uninsured/no SHI	*****	H
2	Updating National Drug Policy	**	L/M
3&7&15	Data collection on price/usage	****	H
4	Informal fees being charged	**	L/M
5	List of registered drugs available publically	*	L
6	Top 20 medicines price to public made available	*	L
8	Advertising controls	**	L/M
9	Standard Treatment Guidelines	***	M
10	Public Procurement prequalified supplier list published	*	L
11	Good Distribution Practices distributor list published	*	L
12	Procurement planning software available	****	H
13	Data available for access to medicines	***	M
14	Antimicrobial strategy developed	****	H
16	Generic substitution strategy clarified	**	L/M
17	Antibiotics not to be dispensed without script	***	M