



# Pharmaceutical Sector Scan

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Part of Component 1 of MeTA Baseline Assessments

Part II - Data Forms

Country:

Data Collected By:

Data Collection Start Date:

Data Collection End Date:

WHO Harvard Collaborating Center in Pharmaceutical Policy  
On behalf of  
The Medicines Transparency Alliance

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**1. Country Profile: Demographic and Socioeconomic Indicators**

Item	Value
<b>Population, mortality, fertility</b>	
1.1 → Population, total (millions)	5,3
1.2 Population < 15 years (% of total population)	32,1
1.3 Population > 60 years (% of total population)	0,4
1.4 Urban population (% of total population)	34,0
1.5 Birth rate (births per 1,000 population)	23,9
1.6 Death rate (deaths per 1,000 population)	7,1
1.7 Fertility rate, total (births per woman)	2,81
<b>Economic status</b>	
1.8 GNI per capita (local cur.)	34908.2
1.9 GDP growth (annual %)	23,7
1.10 Population living < PPP int. \$1.25 a day (%)	3
1.11 Income share held by lowest 20% (%)	6,8
<b>Education and literacy</b>	
1.12 Adult literacy rate, 15+ years (% of total population)	98,7
1.13 Primary school enrollment rate, males (% of male population)	No data by gender
1.14 Primary school enrollment rate, females (% of female population)	

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### 2. Country Profile: Mortality and Causes of Death

Item	Value
<b><i>Life expectancy and mortality</i></b>	
2.1. Life expectancy at birth (years)	68,4
2.2. Adult mortality rate [15 to 60 years] (/1,000 population)	6,9
2.3. Maternal mortality ratio (/100,000 live births)	58,9
2.4. Neonatal mortality rate (/1,000 live births)	19,9
2.5. Infant mortality rate (/1,000 live births)	27,1
2.6. Under 5 mortality rate (/1,000 live births)	31,5
2.7. Age-standardized mortality rate by non-communicable diseases (/ 100,000 population)	692,2
2.8. Age-standardized mortality rate by cardiovascular diseases (/ 100,000 population)	349,0
2.9. Age-standardized mortality rate by cancer (/ 100,000 population)	58,2
2.10. Mortality rate by HIV/AIDS (/ 100,000 population)	0,5
2.11. Mortality rate by tuberculosis regardless of HIV status (/ 100,000 population)	9,9
<b><i>Causes of death among children &lt;5 years</i></b>	
2.12. Neonatal (% of deaths)	65,2
2.13. Pneumonia (% of deaths)	12,6
2.14. Diarrhea (% of deaths)	4,7
2.15. Measles (% of deaths)	0
2.16. Malaria (% of deaths)	0
2.17. HIV/AIDS (% of deaths)	0,1
2.18. Other (% of deaths)	17,4

3. Country Profile: Health Care Expenditures

Item	Value
<b>Overall health expenditures</b>	
3.1. ➡ Total annual per capita expenditure on health (local cur.)	2,234,3
3.2. Health expenditures as percent of Gross Domestic Product (GDP)	2,4
3.3. ➡ Percent of Ministry of Health budget to total government budget (% of total government budget)	11,8
<b>Health expenditures by source</b>	
3.4. ➡ Annual per capita government expenditure on health (local cur.)	756,3
3.5. ➡ Government annual expenditure on health as percent of total (% of total expenditure on health)	46,2
3.6. Social security expenditure as percent of government on health (% of government expenditure on health)	1,0:1,0
3.7. ➡ Annual per capita private expenditures on health (local cur.)	1,244,7
3.8. Private expenditures as percent of total health expenditures (% of total expenditure on health)	53,8
3.9. ➡ Private out-of-pocket expenditures as percent of total health expenditure (% of total expenditure on health)	53,8
3.10. Premiums for private prepaid health plans as percent of total private health expenditures (% of private expenditure on health)	3,2
3.11. ➡ Population covered by national, social, or private health insurance or other sickness funds (% of total population)	77,6

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### 4. Country Profile: Health Personnel, Infrastructure, and Primary Health Care

Item	Value
<b>Personnel</b>	
4.1. ⇨ Physicians (/10,000 population)	23,7
4.2. Nursing and midwifery personnel (/10,000 population)	53,5
4.3. ⇨ Licensed pharmacists (/10,000 population)	<b>6,3</b>
4.4. Other non-pharmacist pharmaceutical personnel (/10,000 population)	<b>0,91</b>
4.5. Community health workers (/10,000 population)	1135
<b>Facilities</b>	
4.6. Hospitals (/10,000 population)	3,7
4.7. Hospital beds (/10,000 population)	53
4.8. ⇨ Licensed pharmacies (/10,000 population)	<b>4,29</b>
<b>Primary Health Care</b>	
4.9. Primary health care units and centers (/10,000 population)	3,3
4.10. Neonates protected at birth against neonatal tetanus [PAB] (% neonates)	
4.11. One-year olds immunized against MCV (% one-year old)	95.8

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### 5. Medicines Policy and Regulatory Framework

Item	Value
<b>Policy framework</b>	
5.1. National Health Policy exists	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
a. If yes, year updated	2006
5.2. <input checked="" type="checkbox"/> National Medicines Policy official document exists	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
a. <input checked="" type="checkbox"/> If yes, year updated	2007
b. <input checked="" type="checkbox"/> If no, draft NMP document exists	<input type="checkbox"/> Yes <input type="checkbox"/> No
5.3. <input checked="" type="checkbox"/> National Medicines Policy Implementation Plan exists	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
a. <input checked="" type="checkbox"/> If yes, year updated	2007
<b>Regulatory framework</b>	
5.4. <input checked="" type="checkbox"/> Legal provisions exist establishing the powers and responsibility of a medicines regulatory agency	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5.5. <input checked="" type="checkbox"/> Legal provisions exist for market authorization	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5.6. WHO certification scheme is required as part of the marketing authorization process	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
5.7. <input checked="" type="checkbox"/> Formal medicines regulatory agency exists	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
a. <input checked="" type="checkbox"/> If yes, number of regulatory staff	59
5.8. <input checked="" type="checkbox"/> Legal provisions exist requiring transparency and accountability and promoting a code of conduct in regulatory work	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5.9. <input checked="" type="checkbox"/> Formal code of conduct exists that applies to public officials and staff involved in pharmaceutical-related activities	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5.10. <input checked="" type="checkbox"/> Medicines regulatory agency is actively involved in regional / international harmonization initiatives	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
5.11. <input checked="" type="checkbox"/> Regulatory agency has website	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
a. If yes, URL address is:	

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### 6. Medicines Market at Retail Price

In this section, “medicines market” refers to public, private, and not-for-profit markets.

Item	Value
6.1. ⇒ Number of pharmaceutical products registered	4,016
6.2. ⇒ List of registered pharmaceutical products by therapeutic class, patent status, patent expiry and registration dates is publicly available	<input checked="" type="checkbox"/> Yes <sup>&amp;</sup> <input type="checkbox"/> No
6.3. Total annual market for medicines by value (local cur.)	4,732,866,344.8
6.4. ⇒ Market share of generic medicines [branded and INN] by value (%)	59,47
6.5. ⇒ Market share of medicines produced by local manufacturers by value (%)	4,37
6.6. ⇒ List of top 20 medicines by value is publicly available	<input type="checkbox"/> Yes <sup>&amp;</sup> <input checked="" type="checkbox"/> No
6.7. Annual growth rate of total medicines market value (%)	26,25
6.8. Annual growth rate of generic market value (%)	No data

<sup>&</sup>: If yes, obtain list and append to report

### 7. Medicines Financing: Government Expenditures and Health Insurance

Item	Value
<b>Medicines expenditures</b>	
7.1. ⇒ MOH budget for medicines (local cur.)	5,529,4 mil
7.2. ⇒ Percent MOH health budget for medicines (%)	15,2
7.3. ⇒ Total medicines expenditures (local cur.)	842,4 mil
7.4. ⇒ Total medicines expenditures per capita (local cur.)	159,0
7.5. ⇒ Percent government medicines expenditures (% of total medicines expenditures)	44,3
<b>Health insurance</b>	
7.6. ⇒ National Health Insurance (NHI) exists	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7.7. ⇒ If yes, NHI provides at least partial medicines coverage	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7.8. ⇒ Social Health Insurance (SHI) exists	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7.9. ⇒ If yes, SHI provides at least partial medicines coverage	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
7.10. ⇒ Proportion of the population covered by NHI or SHI (% of population)	77,6
7.11. ⇒ List of medicines reimbursed by NHI or SHI and structure of reimbursement is available	<input checked="" type="checkbox"/> Yes <sup>&amp;</sup> <input type="checkbox"/> No

<sup>&</sup>: If yes, obtain list and append to report

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### 8. Medicines Financing: Public Programs Providing Free Medicines

Item	Value
8.1. <input checked="" type="checkbox"/> There is a official government program for obtaining free medicines	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8.2. <input checked="" type="checkbox"/> If yes to 8.1, medicines are available free-of-charge for:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
a. <input checked="" type="checkbox"/> Patients who cannot afford them	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
b. <input checked="" type="checkbox"/> Children under 5	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
c. <input checked="" type="checkbox"/> Pregnant women	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
d. <input checked="" type="checkbox"/> Elderly persons	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8.3. <input checked="" type="checkbox"/> If yes to 8.1, the following types of medicines are free:	<input type="checkbox"/> Yes <input type="checkbox"/> No
a. <input checked="" type="checkbox"/> All	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. Malaria medicines	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
c. Tuberculosis medicines	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
d. Sexually transmitted diseases medicines	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
e. HIV/AIDS medicines	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8.4. <input checked="" type="checkbox"/> If yes to 8.1, medicines are free	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
a. <input checked="" type="checkbox"/> At public health care facilities	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. <input checked="" type="checkbox"/> Through insurance program membership	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

### 9. Medicines Financing: Patient Fees and Copayments

Item	Value
9.1. <input checked="" type="checkbox"/> Inpatients pay a fee for medicines in public hospitals	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9.2. <input checked="" type="checkbox"/> Registration/consultation fees are common in public primary care facilities	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
9.3. <input checked="" type="checkbox"/> Dispensing fees are common in public primary care facilities	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
9.4. <input checked="" type="checkbox"/> Medicines are free in public primary care facilities	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9.5. <input checked="" type="checkbox"/> If not, medicines copayments are used to pay salaries of public health care workers	<input type="checkbox"/> Yes <input type="checkbox"/> No
9.6. <input checked="" type="checkbox"/> Public sector medicines copayments are flat fees	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
a. If yes, fee amount (local cur.)	690-1200
9.7. <input checked="" type="checkbox"/> Public sector medicines copayments are percent copayment	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
a. If yes, percent (%)	

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### 10. Medicines Trade: Intellectual Property Laws

Item	Value
10.1. Country has signed international Intellectual Property agreements	<input checked="" type="checkbox"/> Yes <sup>&amp;</sup> <input type="checkbox"/> No

<sup>&</sup>: If yes, obtain list and append to report






### 11. Medicines Trade: Registration

Item	Value
11.1. <input checked="" type="checkbox"/> An explicit and transparent process exists for assessing applications for registration of pharmaceutical products	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
11.2. <input checked="" type="checkbox"/> Functional formal committee exists responsible for assessing applications for registration of products	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
11.3. <input checked="" type="checkbox"/> Conflict of interest declarations required for individuals responsible for approval of registration applications	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
11.4. INN names are used to register medicines	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
11.5. <input checked="" type="checkbox"/> Medicines registration fees exist	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
11.6. If yes, amount per application of a patented product (local cur.)	68,700
11.7. If yes, amount per application of a generic product (local cur.)	45,800
11.8. <input checked="" type="checkbox"/> A transparent process exists to appeal medicines registration decisions	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
11.9. <input checked="" type="checkbox"/> Medicine samples are tested as part of the registration process	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
11.10. <input checked="" type="checkbox"/> List of registered products is publicly available, identifying originator brands, branded generics, and generics	<input checked="" type="checkbox"/> Yes <sup>&amp;</sup> <input type="checkbox"/> No
11.11. <input checked="" type="checkbox"/> List and application status of products submitted for registration are publicly available	<input type="checkbox"/> Yes <sup>&amp;</sup> <input checked="" type="checkbox"/> No
11.12. Average length of time from submission of a patented product application to decision (average number of days)	180
11.13. Average length of time from submission of a generic product application to decision (average number of days)	45

<sup>&</sup>: If yes, obtain list and append to report

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### 12. Medicines Trade: Manufacturing

Item	Value
<b>All manufacturers</b>	
12.1.  List of GMP compliant manufacturing plants with date and results of the latest inspection is available	<input checked="" type="checkbox"/> Yes <sup>&amp;</sup> <input type="checkbox"/> No
12.2.  List of type and number of sanctions following inspections is available	<input checked="" type="checkbox"/> Yes <sup>&amp;</sup> <input type="checkbox"/> No
<b>Domestic manufacturers</b>	
12.3.  Legal provisions exist for licensing domestic manufacturers	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
12.4. Number and list of domestic manufacturers is available	<input checked="" type="checkbox"/> Yes <sup>&amp;</sup> <input type="checkbox"/> No
12.5. Number of domestic manufacturers involved in:	
a. R&D to discover new active substances	3
b. Production of pharmaceutical starting material	0
c. Formulation from pharmaceutical starting material	33
d. Repackaging of finished dosage forms	1
12.6. Percentage of market share <b>by volume</b> produced by domestic manufacturers (%)	4,37
12.7. Percentage of market share <b>by value</b> produced by domestic manufacturers (%)	210 mil KGS
<b>Multinational manufacturers</b>	
12.8.  Legal provisions exist for licensing multinational manufacturers that produce medicines locally	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
12.9.  Legal provisions exist for licensing importers	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
12.10. Number of and list of multinational pharmaceutical companies with a local subsidiary is available	<input type="checkbox"/> Yes <sup>&amp;</sup> <input checked="" type="checkbox"/> No
12.11. Number and list of multinational pharmaceutical companies producing medicines locally is available	<input type="checkbox"/> Yes <sup>&amp;</sup> <input checked="" type="checkbox"/> No

**&**: If yes, obtain list and append to report

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### 13. Medicines Trade: Quality Assurance

Item	Value
13.1. <input checked="" type="checkbox"/> Legal provisions exist to inspect premises and collect samples	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
13.2. <input checked="" type="checkbox"/> Legal provisions exist for detecting and combating counterfeit medicines	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
13.3. <input checked="" type="checkbox"/> Legal provisions exist to ensure quality control of imported medicines	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
13.4. <input checked="" type="checkbox"/> Legal provisions exist to ensure quality control of locally produced medicines	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
13.5. <input checked="" type="checkbox"/> Total number of samples tested for quality in past year, [including samples tested at importation, for registration, or sampled from market]	12,219
13.6. <input checked="" type="checkbox"/> Total number of above samples that failed quality testing in past year	18
13.7. <input checked="" type="checkbox"/> List is publicly available giving detailed results of quality testing in past year	<input type="checkbox"/> Yes & <input checked="" type="checkbox"/> No

**&** If yes, obtain list and append to report

### 14. Medicines Trade: Price Control and Transparency

Item	Value
<b>Legal or regulatory provisions for medicines price control</b>	
14.1. <input checked="" type="checkbox"/> Legal or regulatory provisions exist for setting	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
a. <input checked="" type="checkbox"/> Manufacturer selling price	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
b. <input checked="" type="checkbox"/> Maximum wholesale markup	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
c. <input checked="" type="checkbox"/> Maximum retail markup	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
d. <input checked="" type="checkbox"/> Duty on imported raw materials	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
e. <input checked="" type="checkbox"/> Duty on imported finished products	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
f. <input checked="" type="checkbox"/> VAT or other taxes on medicines	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
14.2. Legal or regulatory provisions for controlling medicines prices vary for different types of medicines	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Medicines price transparency</b>	
14.3. <input checked="" type="checkbox"/> Government runs an active national medicine price monitoring system for retail prices	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
14.4. <input checked="" type="checkbox"/> Regulations exist mandating that retail medicine price information should be publicly accessible	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
14.5. <input checked="" type="checkbox"/> Consumer price of medicines on the list of top 20 medicines is publicly available	<input type="checkbox"/> Yes & <input checked="" type="checkbox"/> No

**&**: If yes, obtain list and append to report

**15. Medicines Trade: Price Comparison in the Private-for-Profit Sector**

Item	Value
<b>Medicines price comparison in the private for-profit sector (i.e. retail pharmacies)</b>	
15.1. For a basket of 14 medicines on the global core list of WHO-HAI Pricing Survey, ratio of median MPR to international procurement reference prices for: a. Originator brand products (Median MPR)	15,07
b. Lowest price generics (Median MPR)	3,54
15.2. Median manufacturer selling price (CIF) as percent of retail price for a basket of key medicines (%)	75
15.3. Median wholesaler selling price as percent of retail price for a basket of key medicines (%)	90
15.4. Median pharmacist mark-up or dispensing fee as percent of retail price for a basket of key medicines (%)	
15.5. Median VAT and other taxes and duties as percent of retail price for a basket of key medicines (%)	3,15

16. Medicines Trade: Consumer Prices of Medicines on HAI Global Core List

[List all median prices in local currency] →

Medicine, Strength, Formulation	Public Sector		Private For-Profit Sector	
	Originator	Low price generic	Originator	Low price generic
16.1. Salbutamol 0.1mg/dose Inhaler	163	97	185	97.7
16.2. Glibenclamide 5 mg Cap/tab		112		105.9
16.3. Atenolol 50 mg Cap/tab		11		12.9
16.4. Captopril 25 mg Cap/tab	138	14		13.5
16.5. Simvastatin 20 mg Cap/tab				406
16.6. Amitriptyline 25 mg Cap/tab		34		35
16.7. Ciprofloxacin 500 mg Cap/tab		61.4		66.5
16.8. Co-trimoxazole 8 + 40 mg/ml Susp.		61		90
16.9. Amoxicillin 500 mg Cap/tab		70.4		80
16.10. Ceftriaxone 1 g/ vial Injection	133.5	25.45	514.5	36
16.11. Diazepam 5 mg Cap/tab		23.4		30.15
16.12. Diclofenac 50 mg Cap/tab		39	607.5	79.2
16.13. Paracetamol 24 mg/ml Susp.				102
16.14. Omeprazole 20 mg Cap/tab		34		38

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### 17. Medicines Trade: Promotion and Advertising - Legal and Regulatory Provisions

Item	Value
17.1. <input type="checkbox"/> Legal provisions exist to control the promotion and/or advertising of prescription medicines	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
17.2. <input type="checkbox"/> Legal provisions exist to make direct advertising to the public illegal	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
17.3. <input type="checkbox"/> Legal provisions exist to control gifts from the pharmaceutical industry to prescribers	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
17.4. <input type="checkbox"/> Regulatory pre-approval is required for medicines advertisements and/or promotional materials	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
17.5. <input type="checkbox"/> Regulatory committee exists for controlling medicines advertising and promotion	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
a. <input type="checkbox"/> If yes, committee procedures are clearly documented and publicly available	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
b. <input type="checkbox"/> If yes, list of committee members is publicly available	<input checked="" type="checkbox"/> Yes <sup>&amp;</sup> <input type="checkbox"/> No
c. <input type="checkbox"/> If yes, members must declare conflicts of interest	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
17.6. <input type="checkbox"/> Standard Operating Procedures (SOP) exist governing the behavior of public procurement agencies in their interactions with sales representatives/wholesalers	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
17.7. <input type="checkbox"/> Reports of complaints regarding promotional practices are publicly available	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
17.8. <input type="checkbox"/> Number of violations and sanctions related to legal provisions controlling advertising of medicines	No violations registered

<sup>&</sup>: If yes, obtain list and append to report

**18. Medicines Trade: Promotion and Advertising - Code of Conduct and Spending**

Item	Value
<b>Code of conduct</b>	
18.1. ⇒ A professional code of conduct exists to limit gifts that physicians can accept from the pharmaceutical industry	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
18.2. ⇒ A national code of conduct exists concerning advertising and promotion of medicines by pharmaceutical manufacturers	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
a. ⇒ If yes, the code of conduct applies to domestic manufacturers only, multinational manufacturers operating locally only, or <u>both</u> (Circle which applies)	both
b. ⇒ If yes, adherence to the code is voluntary	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
c. ⇒ If yes, code contains a formal process for complaints and sanctions	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
d. ⇒ If yes, list of complaints and sanctions for the last two years is publicly available	<input type="checkbox"/> Yes <sup>&amp;</sup> <input checked="" type="checkbox"/> No
<b>Promotion and Advertising Spending</b>	
18.3. ⇒ Pharmaceutical companies are required to report their promotion and advertising budget in taxes disclosures	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<sup>&</sup>: If yes, obtain list and append to report

19. Medicines Supply System: Selection

Item	Value
19.1. <input checked="" type="checkbox"/> National standard treatment guidelines (STGs) exist for most common illnesses	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
a. If yes, they are incorporated in a government document	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
b. If yes, year of last update in national STGs	2010
19.2. <input checked="" type="checkbox"/> National essential medicines list (EML) exists.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
a. If yes, number of unique medicine formulations on the national EML	1,347
b. If yes, frequency of revisions over the past 20 years	6
c. If yes, year of last update in EML	2009
d. <input checked="" type="checkbox"/> If yes, process for selecting medicines on the EML are clearly documented and publicly available	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
e. <input checked="" type="checkbox"/> If yes, criteria for selecting medicines on the EML are clearly documented and publicly available	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
f. <input checked="" type="checkbox"/> If yes, list of national EML committee members is publicly available	<input checked="" type="checkbox"/> Yes <sup>&amp;</sup> <input type="checkbox"/> No
g. <input checked="" type="checkbox"/> If yes, conflict of interest declarations are required from members on national EML committee	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
19.3. <input checked="" type="checkbox"/> Explicit criteria for selecting medicines on national EML	<input checked="" type="checkbox"/> Yes <sup>&amp;</sup> <input type="checkbox"/> No
19.4. <input checked="" type="checkbox"/> National medicines formulary manual exists.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
a. If yes, national medicines formulary manual is limited to essential medicines	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
b. If yes, year of last update in national medicines formulary manual	2003

<sup>&</sup>: If yes, obtain list and append to report

20. Medicines Supply System: Procurement in the Public Sector

Item	Value
20.1. <input checked="" type="checkbox"/> There is a tender board/committee overseeing public procurement that is independent from the procurement office	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
20.2. Public procurement is limited to medicines on the national EML	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
20.3. <input checked="" type="checkbox"/> A functioning process exists to prequalify suppliers for public procurement	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
a. <input checked="" type="checkbox"/> If yes, explicit criteria and procedures exist for prequalification of suppliers	<input type="checkbox"/> Yes <sup>&amp;</sup> <input type="checkbox"/> No
b. <input checked="" type="checkbox"/> If yes, a list of prequalified suppliers is publicly available	<input type="checkbox"/> Yes <sup>&amp;</sup> <input type="checkbox"/> No
c. <input checked="" type="checkbox"/> If yes, a list of suppliers who failed to meet pre-qualification standards in the past exists.	<input type="checkbox"/> Yes <sup>&amp;</sup> <input type="checkbox"/> No
20.4. Percent of public sector procurement expenditures in last year awarded by:	
a. National competitive tenders (%)	
b. International competitive tenders (%)	
c. Negotiation//direct purchasing (%)	
20.5. <input checked="" type="checkbox"/> Public sector tenders are publicly available	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
20.6. <input checked="" type="checkbox"/> Winning bids in the public sector are publicly available	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
20.7. <input checked="" type="checkbox"/> Public sector tenders use a transparent electronic bidding process	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
20.8. <input checked="" type="checkbox"/> Results of quality testing during the procurement process are publicly available	<input type="checkbox"/> Yes <sup>&amp;</sup> <input checked="" type="checkbox"/> No
20.9. Percent of public sector procurement expenditures in last year on:	
a. Medicines on the national EML (%)	
b. Medicines produced by local manufacturers (%)	

<sup>&</sup> If yes, obtain list and append to report

## Pharmaceutical Sector Scan - Data Forms

### 21. Medicines Supply System: Procurement Price of Medicines (HAI Global List)

[List all prices in MPR] ⇒

Medicine, Strength, Formulation	Public Sector	
	Originator	Low price generic
21.1. Salbutamol 0.1mg/dose Inhaler	1.96	1.17
21.2. Glibenclamide 5 mg Cap/tab		4.14
21.3. Atenolol 50 mg Cap/tab		0.8
21.4. Captopril 25 mg Cap/tab	20.5	2
21.5. Simvastatin 20 mg Cap/tab		
21.6. Amitriptyline 25 mg Cap/tab		1.07
21.7. Ciprofloxacin 500 mg Cap/tab		9.67
21.8. Co-trimoxazole 8 + 40 mg/ml Susp.		
21.9. Amoxicillin 500 mg Cap/tab		2
21.10. Ceftriaxone 1 g/ vial Injection	4.19	0.8
21.11. Diazepam 5 mg Cap/tab		2.99
21.12. Diclofenac 50 mg Cap/tab		2.6
21.13. Paracetamol 24 mg/ml Susp.		
21.14. Omeprazole 20 mg Cap/tab		0.84

**22. Medicines Supply System: Distribution**

Item	Value
<b>All Distributors</b>	
22.1. ⇒ National guidelines exist for GDP	<input type="checkbox"/> Yes <sup>&amp;</sup> <input checked="" type="checkbox"/> No
22.2. ⇒ List of GDP compliant distributors is available	<input type="checkbox"/> Yes <sup>&amp;</sup> <input checked="" type="checkbox"/> No
<b>Central Medical Store</b>	
22.3. The government supply system department has a CMS	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
22.4. Software tools are available for planning, quantification of needs, and procurement processes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
22.5. ⇒ Software tools are available for management of medicines supply (procurement tracking, expenditure tracking, stock outs and inventory control)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
22.6. Data on months of stock available are routinely collected	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
22.7. Percentage of medicines with at least one stock out in the past year (%)	
22.8. ⇒ Routine procedures exist to track the expiry dates of medicines	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Wholesale market characteristics</b>	
22.9. ⇒ Legal provisions exist for licensing wholesalers	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
22.10. ⇒ List of wholesalers is publicly available	<input checked="" type="checkbox"/> Yes <sup>&amp;</sup> <input type="checkbox"/> No
22.11. ⇒ Number of wholesalers in market	242
22.12. National association of wholesalers exists	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
22.13. Number of domestic manufacturers with integrated wholesale activities	16

<sup>&</sup>: If yes, obtain list and append to report

## Pharmaceutical Sector Scan - Data Forms

### 23. Medicines Access

Item	Value
<b>Geographic access</b>	
23.1. → Percentage of patients who travel more than one hour to reach primary care facility (%)	2
23.2. → Percentage of households obtaining medicines for recent illness at a public health care facility (%)	0
<b>Affordability of medicines</b>	
23.3. → Number of days' wages of the lowest paid government worker for standard treatment with cotrimoxazole for a child respiratory infection	2.5
23.4. → Number of days' wages of the lowest paid government worker for standard treatments with atenolol for hypertension	1.5
23.5. → Number of days' wages of the lowest paid government worker for monthly standard treatment with simvastatin for hypercholesterolemia	
23.6. → Percentage of households obtaining free medicines at public health care facilities (%)	
<b>Availability of medicines</b>	
23.7. → Availability of basket of key medicines in health care facilities (%)	68
23.8. → Percentage of prescribed medicines actually dispensed (%)	92
<b>Equity in access</b>	
23.9. → Percentage of households in lowest socioeconomic (SE) quintile whose monthly medicines expenditures represent 40% or more of discretionary expenditures (%)	
23.10. → Percentage of households in lowest SE quintile with a chronically ill member who requires medicines but having no medicines at home (%)	
23.11. → Average monthly cost of medicines for the most frequent chronic disease in households in lowest SE quintile (Local cur.)	

## Pharmaceutical Sector Scan - Data Forms

### 24. Medicines Use: National Structures

Item	Value
24.1. <input checked="" type="checkbox"/> A national program or committee [involving government, civil society, and professional bodies] exists to monitor and promote rational use of medicines	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
24.2. <input checked="" type="checkbox"/> Public education campaigns about rational medicines use have been conducted by the MOH in the previous two years	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
24.3. <input checked="" type="checkbox"/> A written national strategy exists to contain antimicrobial resistance	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
24.4. <input checked="" type="checkbox"/> A national reference laboratory has responsibility to coordinate epidemiological surveillance of antimicrobial resistance	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
24.5. A government department has been assigned to coordinate medicines use policies and promote rational use of medicines	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>INRUD facility indicators</b>	
24.6. <input checked="" type="checkbox"/> Percentage of facilities with copy of national STGs (%)	100
24.7. <input checked="" type="checkbox"/> Percentage of facilities with copies of national EML (%)	100

## Pharmaceutical Sector Scan - Data Forms

### 25. Medicines Use: Prescribing

Item	Value
25.1. <input checked="" type="checkbox"/> Legal provisions exist to govern the licensing and prescribing practice of prescribers and health facilities	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
25.2. <input checked="" type="checkbox"/> Legal provisions exist to restrict dispensing by prescribers	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
25.3. <input checked="" type="checkbox"/> A professional association code of conduct exists governing professional behavior of prescribers	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
25.4. Prescribing by INN name obligatory in:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
a. Public sector	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
b. Private sector	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
c. Regulations exist requiring hospitals to organize/develop DTCs	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
25.5. Functioning DTCs are present in what percent of	
a. Public referral hospitals (%)	
b. Public regional or district hospitals (%)	
c. Private hospitals (%)	
<b>INRUD prescribing indicators</b>	
25.6. <input checked="" type="checkbox"/> Average number of medicines per prescription	2
25.7. <input checked="" type="checkbox"/> Percentage of medicines prescribed by INN name (%)	
25.8. <input checked="" type="checkbox"/> Percentage of encounters with an antibiotic prescribed (%)	35.7
25.9. <input checked="" type="checkbox"/> Percentage of encounters with an injection prescribed (%)	17
25.10. <input checked="" type="checkbox"/> Percentage of medicines prescribed from EML or formulary (%)	79
25.11. Average consultation time (minutes)	
<b>Disease-specific prescribing indicators</b>	
25.12. Percentage of non-pneumonia acute respiratory tract infection (ARI) of any age treated with antibiotics (%)	
25.13. Percentage of non-bacterial diarrhea in children under age 5 treated with ORT (%)	

## Pharmaceutical Sector Scan - Data Forms

### 26. Medicines Use: Dispensing

Item	Value
26.1. <input checked="" type="checkbox"/> Legal provisions exist to govern licensing and dispensing practice of pharmacists and pharmacy establishments	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
26.2. <input checked="" type="checkbox"/> Legal provisions exist to restrict prescribing by dispensers	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
26.3. <input checked="" type="checkbox"/> A professional association code of conduct exists governing professional behavior of pharmacists	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
26.4. Substitution of generic equivalents is permitted for:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
a. Public sector dispensers	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
b. Private sector dispensers	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
26.5. <input checked="" type="checkbox"/> Dispensing of antibiotics is not allowed without a prescription	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
26.6. <input checked="" type="checkbox"/> Dispensing of injections is not allowed without a prescription	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
26.7. <input checked="" type="checkbox"/> Dispensing of narcotics, psychotropic drugs and precursors is not allowed without a prescription	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>INRUD dispensing indicators</b>	
26.8. Average dispensing time (minutes)	
26.9. <input checked="" type="checkbox"/> Percentage of prescribed medicines actually dispensed at facility where they were prescribed (%)	
26.10. <input checked="" type="checkbox"/> Percentage of dispensed medicines that are adequately labeled (%)	94.3
26.11. <input checked="" type="checkbox"/> Percentage of patients who know the correct dosing of all dispensed medicines (%)	71

### 27. Medicines Use: Pharmaco-vigilance

Item	Value
27.1. Legal provisions exist for monitoring adverse drug reactions (ADRs) on a routine basis	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
27.2. A functioning system exists for monitoring ADRs	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
27.3. If yes, number of ADR reports sent to the system in last year	13