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The voice of the pharmaceutical industry in Scotland

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Claire Ferguson
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Dear Ms Ferguson

Consultation on the Local Healthcare Bill

The Association of the British Pharmaceutical Industry (ABPI) is the representative body for more than 75 companies researching, making and supplying medicines fulfilling eight out of ten prescriptions in Scotland. ABPI's members spend £217 million a year in Scotland in the development of medicines illustrating their commitment to quality and further development of this sector in Scotland.

Pharma related businesses contributes £850 million to the Scottish economy each year and provide 12,500 jobs directly and indirectly in Scotland. ABPI welcomes this consultation by the Scottish Government and the opportunity to engage positively in this key issue.

Scottish NHS Boards, by setting their medicines budgets and through the work of their Area Drug and Therapeutic Committees (ADTCs), are the gatekeepers between medicines manufacturers and, through prescribers, NHS Scotland patients. As such they have a crucial role in deciding what medicines should be available on formularies in their particular areas.

The Scottish Medicines Consortium (SMC) carries out appraisals on all new medicines for NHSScotland and makes recommendations as to whether each should be made available across NHSScotland and on what terms they may be prescribed. Unlike elsewhere in the UK, there is no mandatory requirement on NHS Boards to take up that advice (except in one defined set of circumstances).

Each NHS Board's ADTC considers all SMC recommendations and then make a local decision as to whether the medicine concerned can be made readily available to local prescribers by being placed on the area formulary. The ADTCs, as presently operating, make their decisions without the input of lay members (and sometimes in the absence of clinicians specialising in the disease area that the medicine under consideration covers), are not accountable for their decisions. There is no publication of the criteria under which decisions are made and the process of appeal by patients, clinicians or manufacturers varies where it exists.

Too often the conclusion is reached that the decision not to allow an SMC recommended medicine to be placed on formulary has been down to cost alone – a conclusion that, because of the lack of information is impossible to prove or disprove.

Given that the Scottish Government wants to encourage greater public and patient involvement in the planning and delivery of local NHS services in Scotland, and the desire to ensure local accountability, ABPI Scotland would urge the Scottish Government to consider broadening the Local Healthcare Bill to include provision for members of NHS Boards to be represented on ADTCs.

Yours sincerely

Dot Anderson
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