VOLUME-8, ISSUE-4, APRIL-2019 • PRINT ISSN No 2277 - 8160

Original Research Paper

Health Science

THE REAL COST OF FREE DRUG SAMPLES: A PROPOSED POLICY SOLUTION

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ABSTRACT

The improvements related to policy and legislation can create more competition in the pharmaceutical market. The improved pharmaceutical market competition would generate incentives for innovative medicines while regulating the distribution of free drug samples that lack value and have the substitute or alternative less expensive generic products. The provision of free drug samples strongly influences the physician's behavior and decision- making as physicians are more likely to prescribe expensive name- brand drugs provided as a sample by the pharmaceutical company. Physicians' acceptance of drug samples not only undermines the use of prescribing less expensive generic alternatives, but it also contributes to the poor quality of patient care and increasing healthcare cost.

The purpose of this paper is to propose a regulation regarding free drug samples that should be placed on the doctors and drug manufactures and they should be penalized if they provide loose samples of the prescription without proper side effects, drug interactions, doses, available generic drugs, storage instructions, and bookkeeping.

KEYWORDS : Free samples, Prescription drugs, Generic drug, Policy and Regulation

INTRODUCTION

It is difficult to avoid the fact that the prime motivation of pharmaceutical companies to provide free drug samples to physicians is marketing. The provision of free drug samples strongly influences the physician's behavior and decision- making as physicians are more likely to prescribe expensive name- brand drugs provided as a sample by the pharmaceutical company (1). Physicians' acceptance of drug samples not only undermines the use of prescribing less expensive generic alternatives, but it also contributes to the poor quality of patient care and increasing healthcare cost (1,2).

DESCRIPTION

A report published by the Kaiser family foundation in 2008 revealed that patients who receive free samples from their physicians are spending almost 40% more on their prescription drug cost (3). Since the patients get used to the brand name drugs they are never given information about less expensive similar generic or biosimilar drugs which might be available at a much lower cost (3,4). Thus, regulatory and control measures to dispense free drug samples would help to save extra money spent by patients on prescription drugs. Physicians should not be allowed to prescribe free drug samples without providing information about available alternative generic drugs (3).

Furthermore, a lack of written instructions of side effects, risks, drug interactions, doses on sample packages may confuse patients and can lead to misuse (5). In the event of the emergency, some patients can't even recall the sample drug name because of dispensed without detailed documentation (4,5,6). Physicians who choose to dispense free drug samples should reserve adequate time for patient counseling about sample use, risks, and dose (1,3). As for the question of recalling drug name, encouraging physicians to maintain up to date detailed documentation of a patient's medical history including the prescription of free drug samples can resolve misuse of drug sample and recalling concerns.

Free drug sampling needs to be regulated not prohibited as dispensing drug sample have some significant benefits. As prescribing free drug samples for acute problems can lower the medication cost for indigent patients (7). Furthermore, free drug sampling allows patients to try out new medications in order to ensure tolerance and efficacy of a drug before purchasing the expensive drug (8). It also increases adherence to treatment for chronic conditions right away (9). If a patient's condition responds positively to a sampled drug than the physician can introduce to a patient with available generic or biosimilar drug in order to prevent wasteful trials of drugs, clearly the patient benefits.

CONCLUSION

In conclusion, I would like to say that regulations on providing free samples are also necessary for the physician's office. Other major issue raised concerns about storage systems for drug samples. Due to the lack of strict storage instructions, samples tend to be stored in open shelves which can damage the chemical composition of the drugs (10). By keeping these drugs in proper shelves and/or storage units will not only ensure the chemical integrity of the drugs but also will ensure that drugs are not being misused by the physician or the office staff. By being in proper storage there will be a proper accounting of the drug, it won't be overprescribed (1,2,10), and we can also limit the resale of the drug by a patient, doctor, office staff, doctor's relatives or by the patient themselves. By putting some regulatory measures, we might increase some cost on these free samples but overall it will help bring down cost of care for the patient, as by going through these regulations we can ensure that physicians and/or office staff are educating the patients about the alternative generic of the same drug which might be much cheaper compared to the brand name medicine which will eventually bring down the cost of the drug. This regulation should not only be placed on the doctors but also the drug manufactures and they should be penalized if they provide loose samples of the prescription without proper storage instruction and bookkeeping.

REFERENCE

1. Lahey, Tim. "The high costs of "free" drug samples." Clinical and translational gastroenterology vol. 5,12 e67. 18 Dec. 2014, doi:10.1038/ctg.2014.16
2. Brown, Joshua D et al. "Utilization of free medication samples in the United States in a nationally representative sample: 2009-2013." Research in social & administrative pharmacy: RSAP vol. 13,1 (2016): 193-200. doi:10.1016/j.sapharm.2016.01.006
3. Charatan, F. "Hospital bans free drug samples." The Western journal of medicine vol. 174,4 (2001): 236-7.
4. Chimonas, Susan, and Jerome P Kassirer. "No more free drug samples?." PLoS medicine vol. 6,5 (2009): e1000074. doi:10.1371/journal.pmed.1000074
5. Cutrona, Sarah L et al. "Free drug samples in the United States: characteristics of pediatric recipients and safety concerns." Pediatrics vol. 122,4 (2008): 736-42. doi:10.1542/peds.2007-2928
6. Gellad, Walid F et al. "Use of prescription drug samples and patient assistance programs, and the role of doctor-patient communication." Journal of general internal medicine vol. 26,12 (2011): 1458-64. doi:10.1007/s11606-011-1801-y
7. Hurley, Michael P et al. "Characterizing the relationship between free drug samples and prescription patterns for acne vulgaris and rosacea." JAMA Dermatology vol. 150,5 (2014): 487-93. doi:10.1001/jamadermatol.2013.9715
8. Hampp, Christian et al. "Use of Prescription Drug Samples in the USA: A Descriptive Study with Considerations for Pharmacoepidemiology." Drug safety vol. 39,3 (2016): 261-70. doi:10.1007/s40264-015-0382-9
9. Katz, Kenneth A et al. "Drug samples in dermatology: out of the closet, into the dustbin." JAMA Dermatology vol. 150,5 (2014): 483-5. doi:10.1001/jamadermatol.2013.9711
10. Whittle, Jeff, and Chester B Good. "Prescription drug samples: making decisions with imperfect data." Journal of general internal medicine vol. 23,6 (2008): 890-2. doi:10.1007/s11606-008-0642-9