

Enhancing the rational use of new medicines across European health care systems

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The Piperska Group

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How do we maintain the ideals underlying socially funded and equal health services under demanding conditions of the twenty-first century? Expenditure on health care throughout Europe has been rising more rapidly than any other public service, and pharmaceutical expenditure more rapidly than other components of healthcare [1]. The reasons underlying this tendency are well known: demographic changes, rising patient expectations, stricter clinical targets, and expensive new technologies [2]. To what extent is such pressure compatible with the aim of financing a comprehensive and equitable health service in Europe that is largely free at the point of delivery? In addition, what can be done to address these pressures?

A two-day meeting involving 33 leading health care professionals from nine European Union (EU) countries

Piperska Group was created during a 2-day meeting in January 2008 in Stockholm – at Conference Hall Piperska Muren – a meeting centre for 300 years.

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was recently convened in Stockholm to address these issues. A deliberate decision was made not to seek external funding in order to ensure a free exchange of ideas from independent academics, regulators, and clinicians. Each delegate is actively involved either in registration, reimbursement, formulary listing, and/or enhancing the rational use of drugs in his or her country. The meeting was hosted by the Karolinska Institute and Stockholm County Council together with leaders from the 'Mario Negri' Institute of Pharmacological Research in Milan and the universities of Heidelberg, Liverpool, and Marseilles.

The meeting identified that optimizing the use of new expensive technologies represented the major challenge faced by health care services throughout Europe, especially with pharmaceutical companies seeking to overcome lost revenues from patent expiry estimated at over \$100 bn USD per year over the next 4 years [3]. Whereas increasing the proportion of health care expenditure allocated to drugs is not intrinsically regrettable, ongoing pressure reinforces the need to ensure optimum stewardship of national pharmaceutical expenditure. This was encapsulated in the agreed vision which was "to ensure robust systems are in place in Europe to enhance the rational use of drugs, including new, expensive drugs, to improve health." The delegates believed these objectives could be achieved by collaborating and developing pan-European strategies to shared problems and pressures that can be adapted locally.

Guidelines and incentives are seen as beneficial to enhance rational use in line with an approach that has become known as the "five E's," namely: Evaluation, Economics, Enforcement, Education, and Engineering. Rational use of new, expensive drugs would also be enhanced through obtaining greater transparency in the information provided by pharmaceutical companies to regulators and national reimbursement agencies [4, 5]. Ensuring a basic infrastruc-

ture is in place for early and ongoing assessment of the value of new drugs was also seen as a key step for the future. Developing common databases and registries among European countries to capture utilization, safety, and outcome data of new drugs and using such databases to assess their clinical effectiveness and cost-effectiveness in real-world practice would also be very beneficial to refine future guidance. Last, it was believed that independent pan-European studies are essential to generate robust and reliable evidence to enhance the future rational use of new, expensive drugs, building on, for instance, the experience in Italy [6].

The Piperska group is developing a range of pan-European collaborative work programs to pursue these objectives, which it aims to have funded and operational by 2010. Representatives from a “new” European country, Poland, emphasized the potential value of collaboration with “old” European countries to identify strategies and policies to better manage the development of their health care systems. Such collaboration between new and old Europe is at the heart of the work programs being developed.

The Piperska organizing committee on behalf of the Piperska group:

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