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Drug 'Control' or Drug 'Fixing'

National Pharmaceuticals Pricing Authority (NPPA) is an organization of the Government of India authorized to fix/ revise the prices of controlled bulk drugs and formulations, and to enforce prices and availability of the medicines in the country, under the Drugs (Prices Control) Order, 1995 [1]. It is commendable that so far a total of 650-odd formulations have price caps. Of the total healthcare spending, 70% is on medicines. In India this cost is mostly borne by the patients. Controlling drug prices by administrative fiat may appear to be a correct initiative, but in reality it may not be so. We share our concern regarding impact of drug control on pediatric formulations.

Paracetamol oral formulation (125 mg/5 mL) is under price control. Several of the leading manufacturers have changed formulation to 120 mg, 150 mg, 500 mg per 5 mL or to 250 mg per 7.5 mL to overcome the price control without any drop in prices. Amoxicllin-clavulanic acid combination (Syrup 200+28.5 mg, Tablet 500+125 mg) is under price control. Several manufacturers have increased cost of other formulations (tablet 250+125 mg, drops 80+11 mg) as a compensatory process. Chlorpheniramine maleate (2 mg/5 mL), an anti-histaminic preparation, in isolation is difficult to procure in the market. Majority of manufacturers have clubbed it with a decongestant, mucolytic, antitussive or antipyretic agent to avoid price control. Cetrizine (5 mg/5 mL) is readily available as 2.5 mg/5 mL or in combination with a mucolytic agent, thus avoiding price control. Salbutamol (2 mg/5 mL) has almost disappeared from the market once it came under price control. Majority of the manufacturers withdrew the molecule and changed the formulation to levo-salbutamol and modified the brand name. This led to a doubling of the cost. This is also true for respiratory solution for use in nebulizer. Several antibiotics (*e.g.* cefixime, azithyomycin) are also being marketed in strengths that are different from those under price control.

It is clear that the companies are modifying the strength, composition or format of the drug to avoid price control. This defeats the purpose as the drug either is difficult to procure or prescribe as laid down in the drug control list. There is no regulation on manufacturing a drug in various strengths or in combinations, which allows the companies to come with newer formulation overcoming the drug control. It is also a tragedy that majority of doctors are ignorant about this process, and there is a need to bring about awareness amongst the doctors and patients to prefer medicines in the drug control format. There is an urgent need for professional medical bodies to pressurize the Government to ensure strict implementation of the drug control; otherwise the entire purpose of making the medicines available, accessible, and affordable would be defeated.

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