



## Using Medicine Carefully Saves Money

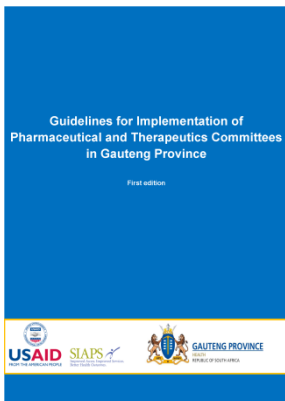
By promoting rational medicine use, three provinces in South Africa—Eastern Cape, Gauteng, and Limpopo have projected a total combined **saving of 24 million SA rand (ZAR)** per annum per 100,000 patients using selected medicines for chronic diseases. All this is thanks to functional Pharmaceutical and Therapeutics Committees (PTCs) tasked with the responsibility of overseeing and promoting safe and cost effective use of medicines.

In South Africa, functional PTCs at provincial, district, and facility levels are a cornerstone of the South African National Drug Policy (NDP). A PTC is a multidisciplinary forum established to promote the safe, efficacious, and cost-effective use of medicines. Members of PTCs are selected for their expertise, and come from medical, nursing, pharmaceutical, and financial backgrounds. The USAID funded Systems for Improved Access to Pharmaceuticals and Services (SIAPS) Program actively supports the establishment and strengthening of these important committees at provincial, district, and facility level.

SIAPS has worked to strengthen governance and sound decision making within PTCs by developing generic terms of reference (TORs) and other governance tools. Policies relating to confidentiality and conflict of interest were also addressed because of the sensitive and confidential information dealt with by these committees. In Gauteng, the Provincial PTC (PPTC) was assisted in developing a guidance document for the functioning of PTCs at all levels. The guidelines address role and functions of PTCs, governance structures and processes, accountability, and communication strategies. Use of the guidelines will not only optimize use of available resources, but also promote rational medicines use.

One challenge faced by PPTCs is a tendency to focus on selection of medicines rather than on monitoring and promoting rational medicine use. The generic TORs foster creating sub-committees allowing a PTC to tackle various issues simultaneously. The ABC analysis—a method of ranking and analyzing medical products according to the value of products used—and formulary maintenance are among the standing items on the agenda of PPTC meetings. Working with members of the committee, SIAPS built capacity in analyzing expenditure on medicines and designing and implementing interventions to address problems identified. Based on the results of the ABC analysis, the PPTCs developed a range of interventions to promote safe and cost effective use of medicines. Decisions taken by the Gauteng PPTC relating to the treatment of epilepsy, use of ACE inhibitors, calcium channel blockers, and insulin pensets will result in considerable savings for the province.

PPTCs in Eastern Cape and Limpopo which have also been assisted by SIAPS have adopted similar resolutions which will result in cost savings such as changing prescribing habits; however, these will take time to show results. Projected savings for all three provinces are shown in the table.



<b>Province</b>	<b>Intervention</b>	<b>Projected annual savings/ 100,000 patients</b>
<b>Eastern Cape, Gauteng, Limpopo</b>	Enalapril 10 mg as preferred ACE inhibitor (versus perindopril 4 mg)	ZAR 6.9 million
<b>Gauteng, Limpopo</b>	Amlodipine 5 mg as preferred calcium channel blocker (versus nifedipine 30 mg XL)	ZAR 10.3 million
<b>Gauteng</b>	Increasing the ratio of adult epileptic patients on lamotrigine versus sodium valproate to 50%	ZAR 5.2 million
<b>Gauteng</b>	Decrease usage of insulin pensets by 50% for adult diabetic patients (versus insulin vials)	ZAR 1.6 million