عنوان مقاله:

Trends of Negotiated Targeted Anticancer Medicines Use in China: An Interrupted Time Series Analysis

محل انتشار:

مجله بین المللی سیاست و مدیریت بهداشت, دوره 11, شماره 8 (سال: 1401)

تعداد صفحات اصل مقاله: 7

نوىسندگان:

Cong Huang - Department of Pharmacy Administration and Clinical Pharmacy, School of Pharmaceutical Sciences, Peking University, Beijing, China

Carolina Ung - State Key Laboratory of Quality Research in Chinese Medicine, Institute of Chinese Medical Sciences, University of Macau, Macao, China

Haishaerjiang Wushouer - Department of Pharmacy Administration and Clinical Pharmacy, School of Pharmaceutical Sciences, Peking University,
Beijing, China

Lin Bai - Department of Pharmacy Administration and Clinical Pharmacy, School of Pharmaceutical Sciences, Peking University, Beijing, China

Xinyi Li - Department of Pharmacy Administration and Clinical Pharmacy, School of Pharmaceutical Sciences, Peking University, Beijing, China

Xiaodong Guan - Department of Pharmacy Administration and Clinical Pharmacy, School of Pharmaceutical Sciences, Peking University, Beijing, China

Luwen Shi - Department of Pharmacy Administration and Clinical Pharmacy, School of Pharmaceutical Sciences, Peking University, Beijing, China

خلاصه مقاله:

Background In order to relieve the financial burden of the patients in China, the Ministry of Health (MoH) conducted the first national price negotiation and successfully negotiated three expensive medicines including Υ targeted anticancer medicines (TAMs), icotinib and gefitinib. However, little evidence was available to demonstrate the impact of the national negotiation on TAMs use. The purpose of the study is to evaluate the implementation of the national price negotiation policy in China on TAMs use. Methods We used interrupted time series (ITS) design to examine the changes in the daily cost, the monthly hospital purchasing volume and spending of icotinib and gefitinib with pharmaceutical procurement data from $\Delta \P$ tertiary hospitals in $\Upsilon \P$ provinces of mainland China between January $\Upsilon \cdot \Upsilon \Lambda$ and July $\Upsilon \cdot \Upsilon \Psi$. The period between May and July $\Upsilon \cdot \Upsilon \Psi$ was applied to assess the impact of policy. Results The daily cost of icotinib and gefitinib decreased by $\Delta \cdot \cdot \cdot \Lambda \Psi$ (P < ... \) and $\Delta \Upsilon \cdot \Lambda \Psi$ (P < ... \) and $\Delta \Upsilon \cdot \Lambda \Psi$ months after the national negotiation, respectively. In terms of volume, the negotiation was associated with increases in the trend of the monthly hospital purchasing volume of icotinib and gefitinib by $\Psi \cdot \Lambda \Psi$ thousand defined daily doses (DDDs) (P < ... \) and $\Psi \cdot \Lambda \Psi$ thousand DDDs (P < ... \). However, the monthly hospital purchasing spending of icotinib and gefitinib decreased rapidly by US $\cdot \Lambda \Psi$ million (P < ... \) and US $\cdot \Lambda \Psi$ million (P < ... \) following policy implementation, respectively. Conclusion The first national negotiation had successfully cut off the price of two negotiated TAMs and promoted TAMs use in China. In the future, government should conduct further price negotiations and include more medicines with clinical benefits into reimbursement schemes to alleviate patients' financial burden and promote their access to essential treatment

كلمات كليدى:

Price Negotiation, Targeted Anticancer Medicines, Interrupted Time Series, China

لینک ثابت مقاله در پایگاه سیویلیکا:

https://civilica.com/doc/2048012

