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Estonia to use cutting edge e-prescribing system to drive up generic prescribing by Nick Smith

TALLINN, June 6 (APM) - Estonia is to use its new electronic prescribing system to drive up use of generic drugs, delegates at an international meeting of wholesalers were told in the country's capital, Tallinn have heard.

Early data from the Baltic state's e-prescribing system also shows that approximately only 80% of prescriptions issued are actually collected by patients, APM was told.

The system allows a doctor to issue a prescription online and the patient to collect their medicines at any pharmacy in the country without the need for a written scrip of any type.

It is probably the most advanced in Europe and is seen as a model for the rest of EU, experts behind the system said at the GIRP meeting of full-line pharmaceutical wholesalers on Monday.

The initiative went live at the beginning of last year and, after a few early problems, has been functioning well for months, with some 82% of prescriptions now being issued and collected using e-prescribing and "91% user satisfaction", Hannes Danilov, the chairman of Estonia's Health Insurance Fund - the state's obligatory health service fund - said at the event.

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Also speaking from the podium, Erki Laidmae, the Estonian health board's project manager said the system offered patients security in ensuring they got the right drug, as well as monetary savings via reduced drug co-payments on pharmacist intervention.

"It is obligatory (for pharmacists) to offer patients the one (medicine) which offers the best value," he said.

Laidmae said an anticipated new use for the system was to make general practitioners (GPs) explain why they had chosen to prescribe a branded drug rather than prescribe generically.

Speaking to APM on the sidelines of the event, Laidmae said Estonian law already demanded that GPs gave their reasoning for prescribing via brand, rather than generic name, but in practice this law was routinely ignored.

The e-prescribing system could be altered to ensure that a GP prescribing a branded drug inputted reasons for the decision before the scrip was electronically issued, he said.

Also, the electronic system would make it much easier to police the reason give by GPs for issuing a scrip for an expensive branded drug, he said.

References to improved compliance via electronic prescribing came from both podium and floor during the examination of Estonia's system.

However, speaking to APM, Laidmae conceded there was no data to back this up and anecdote had led to the presumption of improved compliance - although he also believed

this was the case.

However, the e-prescribing system did give Europe's first fully accurate read-out - as opposed to samples or estimates - on the gap between prescriptions and drugs actually dispensed.

This showed some 20% of prescriptions were not filled, he said.

When quizzed as to why they had not collected their medicines, most patients said it was because they did not believe the drugs would work, but others cited the cost of copayments, he said.

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