11846 COMPETITIVE PROBLEMS IN THE DRUG INDUSTRY

news from the NATIONAL RESEARCH COUNCIL

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DRUG BOARD URGES CHANGE IN DRUG SUBSTITUTION LAWS

FOR RELEASE: P.M.'s, Tuesday, January 21, 1975

WASHINGTON--A physician should be required to give to, or explicitly withhold from, the pharmacist the option of substituting one brand of a drug he prescribes for another brand of the same drug--an option which could in many cases provide the same treatment at lower cost--according to a resolution of the National Research Council's Drug Research Board (DRB).

This "substitution" option is allowed by law in only two states—Florida and Michigan. In all others it is illegal for a pharmacist, without checking with the prescribing physician, to replace one brand with another even if both brands are known by the pharmacist to have been made in the same laboratory and even if one costs substantially less than the other, the DRB said in a background statement accompanying its resolution.

The DEB pointed out that "no inherent reason" exists for choosing the more expensive drug product simply because of brand-name familiarity. In the absence of any data indicating the substituted drug is not equivalent, then the pharmacist is "in the best position" to make the final choice, the Board said, with cost an element in the decision.

Following are the resolution and the background statement:

Resolution

WHEREAS, The patient's welfare should be the ultimate goal of statutes and regulations concerning drug product selection, which in operational terms means the best product for the lowest cost, and

WHEREAS, The physician must have the ultimate responsibility and authority in drug product selection, since he has the fullest knowledge of the patient's needs and responses with attendant obligation to be held accountable for his selection of particular drug product, and