

Vaccines and drugs: unacceptable shortages

The fact that, since 2017, an entire chapter of France's national immunisation schedule and guideline has been devoted to dealing with vaccine shortages is a sign of how supply disruptions have come to be viewed as a fact of life (1). Among the vaccines affected, hepatitis B vaccines became available again in community pharmacies in early 2018, after a year-long absence (1,2).

Shortages denounced by the French National Authority for Health (HAS). In another example, Sanofi withdrew the pneumococcal vaccine Pneumo 23° from the market in 2017 and announced it would be replaced with Merck Sharp & Dohme's Pneumovax°. But there is pressure on the availability of Pneumovax°(3). The French Technical Vaccination Committee (CTV), part of the National Authority for Health (HAS), denounced the Pneumovax° shortage as "*unacceptable from a public health perspective*" because it resulted from "*strategic choices*" made by the company (3).

According to France's Health Products Agency (ANSM), more than 500 "*drugs of major therapeutic value*" became unavailable in 2017 (i.e. drugs whose absence can "*be life-threatening*" or "*deprive patients of significant potential benefit*"), over 20% of which were anti-infectives or vaccines (a)(4).

Manufacturers' interests at the expense of public health. According to the ANSM, stockouts are mainly due to drug manufacturers' failure to produce the quantity or quality required, in particular when a single plant supplies the world (4).

Pharmaceutical companies are among the most profitable businesses in the world (5). They have no problem paying dividends to their shareholders on time, yet seem to struggle

with their core function, which is to produce and ensure a steady supply of useful, high-quality drugs.

Public authorities need to find and impose lasting solutions to prevent these shortages, including dissuasive financial penalties for the pharmaceutical companies responsible. There is nothing inevitable about these stockouts: for example, a company's reliance on a single production plant enjoying a monopoly or near-monopoly on global supply is a choice, and one that is clearly not in the public interest.

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a- France's Health Products Agency (ANSM) publishes the list of "*drugs of major therapeutic value*" that are out of stock on its website ansm.sante.fr.

Selected references from Prescrire's literature search

- 1- Prescrire Rédaction "Calendrier vaccinal 2017. Quelques changements et des adaptations en cas de pénurie de vaccins" *Rev Prescrire* 2017; **37** (408): 770-772.
- 2- ANSM "Vaccins anti-hépatite B - Remise à disposition normale" 1 March 2018. ansm.sante.fr accessed 27 March 2018: 2 pages.
- 3- Haute Autorité de Santé "Recommandation vaccinale, Vaccination contre les infections à pneumocoque en contexte de pénurie de vaccin pneumococcique non conjugué 23-valent" December 2017. www.has-sante.fr accessed 23 February 2018: 14 pages.
- 4- "Médicament: les signalements de rupture et de risque de rupture en hausse de 30 % en 2017 (ANSM)" APM news agency, 13 February 2018: 2 pages.
- 5- Prescrire Editorial Staff "Pharmaceutical companies: profit above all else" *Prescrire Int* 2018; **27** (196) : 222-223.

