

Informed decisions: think of the INN

Learn to think in terms of the international non proprietary name (INN): it's one key to optimising our use of medicines.

Think in terms of the INN: it's a crucial way to identify related pharmaceutical products (and copies); to avoid drug-drug interactions; and to know what exactly we are prescribing, dispensing or recommending.

Think in terms of the INN: we soon start to think about product content instead of trade names; are able to identify chemically related drugs; and start practising more coherently, more prudently, and more professionally.

Think in terms of the INN: it soon becomes second nature to question the relevance of the products we use every day, including their pharmaceutical form, dose strength, packaging, convenience, and the quality of the patient leaflet.

Think in terms of the INN: it is so much easier to classify medicines, to compare them, and to choose the most appropriate treatment for a given indication. Patients also find it less confusing.

We start to think and act more professionally, and are better-placed to provide patients with the best available treatment, i.e. we learn to prescribe thoughtfully, factually, precisely and independently.

It also becomes easier to analyse the multiple facets of medicinal products: drugs as

more or less useful (and sometimes downright dangerous) therapeutic agents; drugs as industrial products; drugs as simple marketing ploys.

Use of the INN also highlights aspects of the pharmaceutical market that have little or nothing to do with therapeutics, such as economic considerations and shareholder interests. Drugs may also be used as tools for public health policies and may involve administrative demands that are not necessarily coherent or acceptable, or generate conflicts among health care professionals.

Take the case of misoprostol in France: one INN, two indications, two trade names, two different types of packaging and two different prices.

More generally, drugs reflect society as a whole, and can be analysed at various levels. Society, health insurers, governments, health administrators, care-givers, are all subject to different constraints and adopt their own point of view. We should be aware of the non-therapeutic aspects of medications, while keeping an open yet critical mind.

And we should never forget the overriding priority, namely providing the best-quality patient care, which means choosing the therapeutic option with the best possible risk-benefit balance.

©Prescrire Editorial Staff