Health literacy: major difficulties in France

● In a recent study, about 45% of French survey participants reported finding it difficult to understand and apply information in order to take care of their health and navigate the healthcare system.

Health literacy is the ability of individuals to find, understand, appraise and apply the information necessary for making decisions about their own health (1).

French participation in the Health Literacy Survey, conducted in 2020 and 2021, has produced the first France-specific data on health literacy and its various dimensions. This project consisted of an online questionnaire completed by 2000 people aged 18 to 75 years living in France (excluding its overseas departments), as well as by participants in 16 other European countries (2).

The study found a relatively high overall mean health literacy score in France, with 77.5% of respondents reporting that they found it "*easy*" or "*very easy*" to do the tasks explored by the survey. But a detailed analysis of the tasks they considered to be "*difficult*" or "*very difficult*" revealed that 44% of respondents showed an insufficient level of health literacy: 14% had an "*inadequate*" level and 30% a "*problematic*" level (2).

The tasks that respondents found most difficult were analysing information available in the media about protecting oneself from illness, assessing the harm-benefit balance of treatment options, and finding information on how to manage mental health problems. Broadly speaking, lower levels of health literacy were associated with self-reported low social status and greater financial difficulties (2).

About three-quarters of respondents had difficulty understanding, accessing, appraising and applying the information necessary for navigating the healthcare system. More specifically, about two-thirds reported finding it difficult to advocate for themselves if the care they received did not meet their needs, and to understand the impact of ongoing reforms of the healthcare system on their care (2).

To a lesser extent, the survey participants also reported finding it difficult to communicate with doctors: 26% of them had difficulty expressing their personal view or preferences, and 21% reported difficulty in being involved in decisions about their health. Finally, about one in five respondents found it difficult to remember information they had been given in a conversation with a doctor (2).

These findings act as a reminder of the need to tailor sources of information, by making them available in different formats, repeating key information and ensuring that it is understood by patients (2).

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References 1- "Mieux se comprendre. Faible niveau de littératie en santé: un obstacle pour les plus vulnérables" *Rev Prescrire* 2021; 41 (450): 294-296. **2-** Touzani R et al. "Littératie en santé. Rapport de l'étude Health Literacy Survey France 2020-2021" *Santé Publique France* May 2024: 99 pages.

Antineoplastic drugs that do not represent a therapeutic advance: still highly profitable

● Antineoplastic drugs that provide little or no progress for patients are nonetheless significant sources of revenue for pharmaceutical companies: between 1995 and 2020, these drugs generated half as much revenue as those that represented a major therapeutic advance.

Various studies have shown that antineoplastic drugs are highly profitable for pharmaceutical companies (1).

A study published in 2024 examined pharmaceutical company revenue from anti-neoplastics authorised in Europe between 1995 and 2020, based on the extent to which these drugs advanced patient care, if at all. The authors estimated worldwide revenues from these drugs using the companies' published financial reports, and derived "added benefit" ratings, indicating the extent to which the drug advanced patient care in comparison with available alternatives, from evaluations produced by various organisations, including the French National Authority for Health, the US Institute for Clinical and Economic Review, oncology societies and Prescrire. The 4 added benefit ratings used in this study were: negative or non-quantifiable, minor, substantial, or major (2).

For 43 of the 131 drugs analysed, the authors identified a total of 149 such evaluations. They estimated the cumulative revenue generated by each drug for the company concerned over the 3-year period following its market introduction. Median cumulative revenue was estimated at $1.2 billion for drugs providing major added benefit, and $740 million for drugs with

negative or non-quantifiable added benefit ratings (2).

Median research and development costs were about $700 million per antineoplastic (with a range of $166 million to $2060 million, depending on the drug), and the median time to offset these costs was estimated at 3 years for the drugs as a whole. For drugs with conditional marketing authorisation, which more frequently received negative or non-quantifiable added benefit ratings, the median time to offset costs was estimated at 4 years (2).

While this study has a number of limitations, as discussed by the authors, it shows that even when they provide little or no progress for patients, authorised anti-neoplastic drugs still typically represent a substantial source of revenue for pharmaceutical companies, and thus a major expenditure for health insurers. Those responsible for authorising drugs, and for negotiating drug prices, should take note.

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References 1- Prescrire Editorial Staff "Cancer drugs: very profitable for drug companies" *Prescrire Int* 2020; 29 (211): 27. **2-** Brinkhins F et al. "Added benefit and revenues of oncology drug approved by the European Medicines Agency between 1995 and 2020: retrospective cohort study" *BMJ* 2024; 384: e077391, + supplement: 20 pages.

Anti-competitive practices: a very "inventive" pharmaceutical industry

● A total of €780 million in fines was imposed in the European Union over the period 2018-2022. More than half of this sum related to a case in France that has been appealed by the companies concerned.

Pharmaceutical companies employ various anti-competitive practices. Examples include misuse of the patent system and vexatious litigation designed to deter generic companies; "pay-for-delay" agreements between certain generic and originator companies to postpone the launch of generic drugs; disparagement of competitor products; abusive rebates (or "predatory pricing") to retain the business of a customer such as a hospital; steering patients toward a particular drug using a phone number on company materials; price fixing of an active substance between several companies; and the sharing out between companies of the supply of a drug to wholesalers (1-6).

The European Commission and European Union (EU) member states have the power to sanction companies that infringe competition rules with prohibition or fines. Companies can avoid these penalties by coming to an agreement with these institutions regarding remedies for abusive conduct (1).

Over the period 2018-2022, 26 infringements of competition law in the pharmaceutical sector were sanctioned in the EU by either the Commission or member states, with fines reaching a total of €780 million. In 2024, 30 cases of suspected infringement were under investigation (1-4).

Companies can appeal against these sanctions for anti-competitive practices. Of the €780 million in fines imposed in the European Union, €444 million relate to a French case brought against three companies that has since been overturned by an appeal court (1).

Lack of competition between companies leads to massive increases in costs for national health insurance systems. But in the view of the Commission, enforcement of competition law only goes part of the way in ensuring patients' access to drugs at affordable prices. The EU still lacks an effective pharmaceutical legislative framework for achieving this goal (1,7).

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References 1- European Union "Update on competition enforcement in the pharmaceutical sector (2018-2022)" 2024: 48 pages. **2-** "The pharmaceutical company Aspen: European sanction for abuse of dominant market position" *Prescrire Int* 2022; 31 (236): 111. **3-** "A company fined for abuse of its dominant position" *Prescrire Int* 2022; 31 (242): 279. **4-** European Commission "Commission fines pharma companies €13,4 million in antitrust cartel settlement" 19 October 2023: 7 pages. **5-** "Commercial deals to delay introduction of generics: European companies fined" *Prescrire Int* 2022; 31 (239): 195. **6-** "'Denigration' of Plavix® generics: France's National Health Insurance System wins one round against Sanofi" *Prescrire Int* 2022; 31 (242): 278-279. **7-** "Revision of European pharmaceutical legislation: a disappointing vote in the Parliament" *Prescrire Int* 2024; 33 (264): 278-279.