Drug shortages an ongoing health threat for hospitals and healthcare facilities

Over the past few years, shortages have been linked to at least $230 million in additional annual costs, adverse clinical outcomes, and, in some cases, death. Shortages may have caused 15 deaths in 2011, due to usage of substitute drugs in lieu of first-line medicines that were in short-supply. (Source: Fortune)

Providing high quality patient care in the midst of drug shortages also raises ethical issues. Decisions on the allocation of existing drugs by clinical need and where to obtain first-line or substitute medicines must be made. It is not feasible to consider regional healthcare facilities as a lending source, as they are often experiencing the same shortage. Drugs may be available through the "gray market," private brokers or dealers with access to medicines, but drug quality cannot be assured. Compounding pharmacies, also utilized during shortages, are controversial due to their relatively lax regulation. (Sources: The Conversation, Modern Healthcare)

Reasons for drug shortages are varied, but they include disease spikes and reduced drug production from pharmaceutical companies. Policies and incentives have been implemented to address drug shortages, but hospitals and healthcare facilities must rely on their own plan of action to respond to them. (Source: Fortune)

ACTION STEPS

Develop policies for rationing medicines during a drug shortage
using a clinical ethical framework. (Source: The American Journal of Bioethics)

Regularly review the current drug shortage bulletins and assess your facility’s anticipated need of these products, with regard to current stock.

Discourage off-label use of scarce medications for which there is little efficacy evidence. (Source: The Conversation)

UPCOMING EVENTS

THURSDAY

29

Pacers vs. Knicks
Bankers Life Fieldhouse

Assn. of Fraternal Leadership & Values
Indiana Convention Center & Lucas Oil Stadium

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