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Psychotropic drug dealers minting money

By Our Staff Reporter

LAHORE, Aug 18: Pakistan is witnessing an alarming increase in the psychic and mental disorders among its people and the drug manufacturing companies are capitalising on the situation by introducing expensive drugs.

These drugs serve only doctors and manufacturers and the patients get no relief despite spending huge money on them, says a consumer rights group in its latest report.

"The situation further aggravates in the absence of effective rules and regulations on the sale and consumption of such drugs and qualified psychiatrists," says the Network for Consumer Protection in its report titled "New alluring business of psychotropic drugs" launched this week.

"It seems that big multinationals have picked Pakistan as a favourite spot for creating and treating patients with mental and psychiatric disorders through the sale of such drugs."

According to the report, the annual psychotropic drug sales (allopathic only) in Pakistan is touching the figure of Rs3 billion. For only one year (July 2003 to June 2004) the sales stood at Rs2.76 billion ($46.77 million). Of these, antidepressants' sales were worth Rs821.17 million ($13.4 million — an increase of 23 per cent from the previous year), tranquilisers and hypnotics Rs1.36 billion ($23.18 million - an increase of 18 per cent and 137 per cent, respectively, compared to the previous year), and anti-psychotics Rs377.02 million ($6.39 million).

"Interestingly, the sales of drugs categorised as non-tropics (so-called brain stimulants) were worth Rs187.6 million ($3.18 million). To put the above figures in the context, Pakistan's GDP is approximately $61.6 billion whereas the per capita income is $440. There are only 150-200 qualified psychiatrists and the people have to consult general practitioners for the treatment of mental and psychic diseases. However, such drugs are sold even without prescriptions.

The patients who could not afford doctors' fee or expensive drugs have to rely on quacks," reads the report.

"The country's population of 150 million makes it the world's sixth most populous country. Community-based prevalence studies for common mental disorders give high figures — 25-66 per cent women and 10-40 per cent men. There are an estimated three million drug addicts in Pakistan.

"Suicide rates have increased dramatically in the last few years, from a few hundred to more than 3,000 annually. Serious mental illnesses account for another 1-3 per cent of the population. Health spending is a pitiable one per cent of the government's annual budget and mental health does not have a separate budget. There is no health insurance and a poorly-funded public health service is accessed by only the poorest. All health care costs are borne by patients themselves. Mental health services are almost non-existent and limited to either psychiatry departments of teaching hospitals or privately-run clinics.

"There are only 150-200 qualified psychiatrists in Pakistan, an alarming ratio of one psychiatrist to one million people. The majority of psychiatrists are urban-based, whereas 70 per cent of the population is rural-based. Except in a few instances, psychiatry is neither taught nor examined at the undergraduate level, leaving most practicing physicians with poor diagnostic and management skills for psychiatric disorders," observes the report.

It further says a multinational pharmaceutical company recently launched a drug for dementia in Pakistan and flew about 70 Pakistani doctors to Bangkok, Thailand for a three-night all-expense-paid trip. "Pakistani doctors were part of a larger group that also included doctors from other countries. A conservative estimate of costs for the Pakistani doctors alone is about Rs7 million ($120,000)."

Says the report: "Although the company could justify it, questions linger about the rationale behind spending this huge amount in a developing country without a health care system and where all health care is out-of-pocket expenditure. The drug in question costs Rs320 ($5.40) per recommended daily maintenance dose — prohibitively expensive for the vast majority of Pakistani patients."

The report quotes an article by a professor of psychiatry in Aga Khan University, Karachi, as writing, "the pharmaceutical companies and physicians have a well-established symbiotic relationship in Pakistan, not unlike that in many other countries. However, with little or no regulation of medical practice or drug prescribing and dispensing, companies and physicians are free to act as they deem fit. Malpractice litigation against doctors is unheard of.

"Pharmaceutical companies have therefore targeted psychiatrists aggressively. The traffic is bi-directional — psychiatrists are as demanding of favours as companies are of providing them. Some of the many inducements on offer include: sponsoring attendance at conferences, underwriting symposia, all-expense-paid trips for self and spouse for a drug launch abroad, free drug samples and expensive gifts (watches, air conditioners, briefcases, laptops, etc).

The other methods include funding a physician's family wedding, holidays and other events of this nature. One of the latest incentives is for the pharmaceutical company to provide the physician with a down payment for a new car. All the physician has to do in return is write 200 prescriptions for the company's expensive drug."

The writer, says the report, believes that psychiatrists in the developing countries can regain integrity provided there is a serious will to do so. "It is vital that no matter what the circumstances the interest of the patient remains paramount. Anything that compromises this must be identified and eliminated. This includes accepting any kind of inducement — large or small, in any form, shape or size — from pharmaceutical companies. Alternative ways of funding attendance at conferences must be found. This must be strengthened by strong institutional policies limiting direct contact with pharmaceutical sales representatives."