

Generic versus Branded Medicine

We read an interesting observational study by Das *et al.*^[1] The study is worth appreciation and may be considered a milestone in this direction in India. There are certain views which we would like to share as under:

1. Providing cheaper medicines and other treatment-related aids such as stents and prostheses should be priority in all the hospitals or health-care centers whether private or government and the Government of India is committed in this direction
2. There are certain drugs where the therapeutic window or the safety margin is very narrow like phenytoin or any of the antiepileptic drugs^[2] where the levels cannot be measured or affordable, as is with anticoagulants and antiplatelets. We should take appropriate measures in this direction to fight the cost of medicines along with maintaining the treatment and management quality.
3. Implementation of such measures to provide cheaper medicines, will also safeguard the precious image of the novel medical profession, the government should also maintain strict quality control measures^[3]
4. Meanwhile, public awareness in this direction may also help, which will help purchase cheaper generic or online medicines, which in turn further reduce the cost. Public awareness regarding cost, quality, spurious drugs and side effects may also improve the health quality and cost. Online methodology in this respect will further expedite the quality and control of cost and side effects^[4]
5. Making available such cheaper drugs at every health-care station which are ultimately interconnected and also with the supervised supplying agency so as to maintain smooth delivery to the needy patients will again cut the burden on pockets of the poor patients. Furthermore, taking help of well-developed telemedicine network can also cut cost to patients by handling minor or treatable complications at peripheral level and major one may be transported by means of surface transport and later on to also develop air ambulances in certain circumstances as in remote area and those who require comparatively early and specific interventions besides drugs.

Financial support and sponsorship

Nil.

Conflicts of interest

There are no conflicts of interest.

Khichar Purnaram Shubhakaran, Rekha Jakhar Khichar

Department of Neurology, Obstetrics and Gynaecology,
Dr. S. N. Medical College, Jodhpur, Rajasthan, India

Address for correspondence: Dr. Khichar Purnaram Shubhakaran,
House No. E-22/13, Umaid Hospital Campus Geeta Bhawan Road,
Jodhpur - 342 001, Rajasthan, India.
E-mail: drkhicharsk@gmail.com

REFERENCES

1. Das M, Choudhury S, Maity S, Hazra A, Pradhan T, Pal A, *et al.* Generic versus branded medicines: An observational study among patients with chronic diseases attending a public hospital outpatient department. *J Nat Sci Biol Med* 2017;8:26-31.
2. Shubhakaran K, Jakhar R. Generic substitution of anti-epileptic drugs: What's a clinician to do? *Neurol Clin Pract* December 2013;3:457.
3. Shubhakaran K, Khichar RJ. Current controversies: Physicians vs pharma. *Neurol Clin Pract* 2014;4:374-5.
4. Shubhakaran K, Khichar RJ. Health literacy and medication awareness in outpatient neurology. *Neurol Clin Pract* 2014;4:370-1.

This is an open access journal, and articles are distributed under the terms of the Creative Commons Attribution-NonCommercial-ShareAlike 4.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.

Access this article online

Quick Response Code:



Website:
www.jnsbm.org

DOI:
10.4103/jnsbm.JNSBM_155_17

How to cite this article: Shubhakaran KP, Khichar RJ. Generic versus branded medicine. *J Nat Sc Biol Med* 2018;9:300.

© 2018 Journal of Natural Science, Biology and Medicine | Published by Wolters Kluwer - Medknow