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Medicine Tourism

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Medicine Tourism

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There are many success stories about Medicine Tourism, relevant to India. Greg Jefferys, an Australian student was diagnosed with hepatitis C infection which was fast advancing to cirrhosis of the liver. He urgently needed about 84 tablets of the wonder drug, Sovaldi, made by the Gilead Company which would cost around \$ 100,000. He could not afford it and was desperate. Luckily, he learned that the same medicine is available in India legally for about \$ 300. Greg travelled to India and reached Apollo Hospital in Chennai. He was examined by a qualified gastroenterologist who wrote him the required prescription. From a licensed pharmacy, on producing the prescription, Greg obtained the medicine sufficient for the whole course of the treatment. Within 11 days, all his liver functions had returned to normal and within four weeks, there was no virus detectable in the blood. He was cured. Even after allowing for his flight and hotel expenses, he had saved about \$ 80,000.

Ms Sun Wei, from Shenyang, a city in northeast China, underwent treatment in her home town for hepatitis with interferon. Even after one year, there was no improvement. The weekly interferon injections were giving her headache and causing hair loss. She had heard about the new drug, Sovaldi. But in China, hospitals were not using Sovaldi because of its high cost. Sun Wei came to Delhi. She purchased Sovaldi tablets, enough for a full course, from a registered pharmacy based on her doctor's prescription. It was all perfectly legal and transparent.

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A gastroenterologist from Narayana Health city, Bangalore, treats at least two new hepatitis patients from abroad every day. Another consultant at Columbia Asia Hospital said that about 40% of the patients he treats are from outside India. The total treatment cost comes to about Rs 70,000, while it costs about a crore abroad.

Lu Young, a leukaemia patient, was arrested by the police in Yuanjiang, a city in China for smuggling Indian made medicines. Lu had bought a month's supply of the Indian generic version of Glivec for about 2000 Yuan (\$ 32), which in China actually cost about 23,000 Yuan. Glivec was not covered by health insurance in most places. Lu also distributed the medicine to about thousand other patients. When Lu was arrested, a number of people, whom Lu helped and their families petitioned the government not to punish Lu.

These are some of the examples of a new phenomenon called, "Medicine Tourism". It is NOT "Medical Tourism". In Medical tourism, patients come to India for minor and major surgery or other treatments. In Medicine tourism, persons in need come to India only for the sake of purchasing medicine which is affordable. Throughout the world, there are several companies who organize package tours, which includes round-trip flight, a four-star hotel stay, consultation with doctors and medicine. Some of them also offer a few days sightseeing trips or holiday in Rajasthan or Goa along with the treatment.

Today, several life-saving patented drugs are priced beyond the reach of the common man, even in developed countries. For such thousands of patients,

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the only hope is the inexpensive generic versions of the drugs available in India.

When India adopted the product patent regimen, there was a fear that the Indian pharmaceutical industry will not be able to provide cheaper and affordable medicine anymore. This fear was present not only in India but also in other developing and under-developed countries which greatly depend on the generic drugs from India to provide affordable medicine to its citizens.

Indian pharmaceutical industry responded to this challenge in several ways. Indian companies filed several pre and post grant oppositions under Section 3(d) of the Indian Patent Act. This resulted in the denial of patents to several important drugs. The celebrated example is the case of Glivec, an anticancer drug, whose patent was rejected. This made it possible for the cancer patients in India to get their monthly dosage of Glivec for about Rs 10,000 compared to Rs 1.2 lakh charged by Novartis. This is also the reason for Lu Young and other desperate cancer patients of the world go to the extent of smuggling the medicine from India.

By resorting to the provision of “Compulsory License”, India throttled the attempts of Bayer to sell yet another life-saving cancer drug, Nexavar, at an exorbitant price. Bayer was selling this patented drug at a price of about Rs 280,000 (\$ 5,500) for a monthly dose of 120 tablets. After obtaining compulsory license, Natco Pharma marketed the same medicine at Rs 8,880. It is no surprise that Nexavar is another generic medicine from India which attracts “Medicine Tourism”.

More fascinating case is that of “Sovaldi,” the crucial and most effective medicine for hepatitis C

infection. It was outrageously priced by the patent holder, Gilead Sciences, at \$ 1000 per tablet and \$ 84,000 for a full 12 week course of the treatment in USA. In spite of medical insurance, a large number of patients were left out because of the price. WHO studies compellingly showed that the treatment remains unaffordable in large number of countries. Gilead was wise enough to read the writing on the wall. In an attempt to forestall the criticism and to avoid the reputational damage, Gilead approached several Indian generic companies with a licensing agreement for making and selling Sovaldi at a highly discounted price in developing countries. True to its reputation, the Indian generic companies brought down the price and Sovaldi was available in Indian market at a retail price of around \$ 300 for 28 tablet course compared to \$ 84,000 in USA. Unfortunately, license agreement conditions with Gilead did not allow the low-cost benefit to reach people in affluent countries. Because of this reason, Greg, Sun Wei and other patients of the world had to make a beeline to India to get the medicine triggering the phenomenon of “Medicine Tourism”.

Thus, although Gilead had a patent on Sovaldi, it had to go for licensing with Indian generic companies. This example was replicated with other anti-hepatitis drugs by other companies. Many other class of drugs such as anti-HIV have also been added to the list of most wanted drugs. In all these cases, the innovator company holding the patent, ultimately had to approach India for making their medicine affordable.

All this again shows that India is still considered as the “*Pharmacy of the World*” and the Indian Pharmaceutical Industry is the Health keeper of the World.