Specialty Spotlight

Does a Family History of Mental Illness Impact Their Children?

Stimulants could be linked to psychotic symptoms related to family history of mental illness, according to new research. The study looked at certain psychotic symptoms in children and youth who had one or both parents with disorders such as depression and schizophrenia. These symptoms occurred in 62.5% of youth who had taken stimulants, compared with 27.4% of those who had never taken stimulants. The association remained significant after adjusting for potential confounders. The study authors recommend that psychotic symptoms should be monitored when children and adolescents use stimulants, and family history should be considered when stimulants are prescribed.”

Pediatrics (01/01/16) Vol. 137, No. 1 MacKenzie, Lynn E.; Abidi, Sabina; Fisher, Helen L.; et al.

Comment:
Our rudimentary understanding of Attention Deficit Hyperactivity Disorder (ADHD) and the elements of its diagnosis in different age groups leads to a significant gap in how to treat the condition. If family history of mental illness turns out to be an element of the diagnostic differential, then this will shed more light on making appropriate diagnoses. Clearly, this one study needs to be confirmed by other groups of researchers. Stimulants are not innocuous therapy. There is a need to ensure that we are treating patients who truly have ADHD and risk the consequences versus treating symptoms for which the consequences of stimulants are unwarranted.
Does the FDA Have a Role in the Affordability of Generic Pharmaceuticals?

Costly off-patent drugs have attracted much attention and debate in recent weeks. As a solution, three Johns Hopkins researchers are calling on the FDA to allow bulk compounding and importation of generic formulations of drugs that are approved for sale outside of the United States. While "compounded products are not an optimal solution to overcome a shortage of approved generic drugs," the researchers suggest that temporarily permitting bulk compounding could be used in certain instances in which the benefits of improved access to the drug would outweigh the risks of compounding.

The authors also suggest that the FDA temporarily allow the importation of drugs that have been reviewed and approved by competent regulatory authorities in other nations. FDA should work to protect the public, the researchers write, and "Congress should continue its investigation to illuminate the business strategies that are distorting the market for generic drugs, with a focus on eliminating price gouging.

Journal of the American Medical Association (01/04/16) Greene, Jeremy A.; Anderson, Gerard; Sharfstein, Joshua M.

Comment:
The pharmaceutical marketplace was always international, and now the availability and price of international products is topical. The reality is that with the free flow of information on the web, international quality, access and price are easily identified. Different countries have their own regulatory programs, but as information is freely available so is the ability for different countries to compare the quality of their raw or finished pharmaceutical products.

Today, the largest producer of raw materials for branded products across the world is India, and for generics is Israel. Both the U.S. and other countries buy raw materials for the same products from these international suppliers. This article from Johns Hopkins is reflective of the international availability of quality medications.

Prescription Drug Prices Increased 9.4% in 2013

AARP recently released a study on the pricing trends of 622 widely used prescription drugs. Here are some key findings from the report:

- In 2013, the average cost of a drug was more than $11,000 per drug per year.
- This cost is more than twice the average annual cost ($5,571) in 2006.
- Retail prices for widely used prescription drugs increased by 9.4% in 2013.
- The price increase was more than six times higher than the inflation rate of 1.5%.
- Brand name drugs experienced price increases of 12.9%.
- Specialty drugs experience price increase of 10.6%.
- Generic drug prices decreased 4.0% in 2013.

Source: AARP, February 2016

Comment:
Drug prices and price trends are reported by many sources: Medicare, PBMs, AARP, National Association of Chain Drug Stores (NACDS), etc. Each provides different numbers. It is important to ask the source of the report and the population that they are analyzing.

Differences exist in cost of drugs between sources, the types of providers screened (retail, retail chain, Medicare, Medicaid, etc.), reporting dead net cost, gross cost, retail cost, cost including discounts and rebates, contract costs, etc. All of this matters. What matters most is the same source reporting of trends year-over-year. These trends then have some value.
Data Analytics

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