DRUG POLICY
OF
The NATIONAL CAPITAL TERRITORY OF
DELHI

The Govt. of National Capital Territory of Delhi
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Drug Policy of the State of Delhi

A comprehensive statement of the drug policy of the state of Delhi is necessary at this stage in order to provide a strong framework within which the different components would be implemented in the coming years. Such a policy statement would also clearly enunciate the social and economic goals, based on equity and care for the underprivileged, which are sough to be attained through this drugs policy.

The main elements of the policy are the following:

1) All the essential drugs needed for health care should be available at all times at all the health facilities of the state. These drugs should be safe, effective and of good quality.

2) The facilities and manpower needed for providing a good and continuing quality control and assurance system for the drugs being used will be strengthened.

3) The system for procurement, storage and distribution of drugs will be modified to ensure that drugs of good quality, obtained at competitive prices, are always available at the health units.

4) Rational use of drugs will be promoted. Rational use is the use of the most appropriate drug prescribed at the correct dose for the correct length of time. Medicines will be prescribed and ensuring as far as is possible that appropriate drugs only are prescribed.
5) Doctors at all public health facilities will be encouraged to prescribe drugs by their generic names. Procurement of drugs will also be by generic names.

6) There will be a strengthening of the health education programmes of the government specially relating to drugs. This would promote rational use of drugs and enhance compliance. There would also be an acceleration of the continuing education programmes for doctors and para-professional personnel in the field of drugs. This would include establishment of Drug Information Centre and development of links with non-governmental organization.

7) Research on all aspects of use of drugs will be an integral part of the drug policy in the state so that these results would be continuously utilized to modify the different components of the programme for the benefit of the people. It is important, for example, to collect information as to what is happening at this time. A survey will be carried out by the best available professional consultancies available to understand the strengths and weaknesses of the present system. As each new mechanism will be introduced studies will be initiated to document the impact of such interventions.

It is important to emphasize that all these seven components of the drug policy for the state need to be implemented if the results are to be effective and make an impact:

1) Availability of safe and effective Drugs
2) A Good Quality Control and Assurance System
3) Improved procurement, storage and distribution System
4) Rational Prescribing of Medicines
5) Prescribing by Generic Names
6) Strengthening of Health Education Programmes
7) Research on all Aspects of Drug use
It is the objective of the policy that a limited list of carefully selected drugs will always be available at all health centres and hospitals of the state. These medicines would be procured at reasonable prices thus enabling the drug budget to be used for a much large number of persons than is now available. These drug would be of good quality and there would be a good are being take, are of good quality, safe and effective. The prescribing of the drugs would be based on rational pharmacological and therapeutic knowledge and the patients would also be aware of the medicines they are getting and thereby actually take the medicines in the way they should be taken. Information about these essential medicines would also be available to the doctors and paraprofessional staff, wherever justified additional complementary medicine not on the essential list of drug would be provided through a mechanism established for this purpose. Each hospital, if it so desires could order drugs not on the common list of essential drugs but not more than 10% of the budget spent on drugs.
Steps Being Taken by the Government of Delhi to Implement the New Policy

A series of steps are being taken to implement the drug policy of the state as described above. These are detailed below:

1) Selection of a list of essential drugs

The cornerstone of the drug policy is the selection of a limited number of medicines to be used throughout the state. A list of drugs to be used at the primary health care level and different levels of the health care system is being prepared. Different lists have been prepared for the Outpatients and Inpatients at hospitals. This list will be prepared every year by a Special Committee consisting of eminent experts from the different hospitals in the state and other leading specialists.

2) Pooled procurement of drug for all hospitals in Delhi State-
   Establishment of a Central Drug Procurement, Storage and distribution Centre.

Only those drugs on the list of drugs prepared will be procured by a centralized procurement unit which will invite tenders and order the medicines for all hospitals and medical facilities in the state of Delhi. The present practice of every hospital ordering its own drugs will be phased out. All ordering will be carried out by the Central Procurement, storage and Distribution Centre to be established. In the first phase a rate contract will be prepared for the different drugs to be ordered. This will be done by floating tenders and selecting suppliers based on strict criteria such as whether these are actual manufacturers of the medicines, past performance, quality of drugs and prices. This rate contract will be supplied to all hospitals who could then order only from this rate contract. In the next phase the drugs for all hospitals will be ordered centrally but the medicines will be delivered to the hospital
directly. Finally in the third phase when a computerized procurement, storage and distribution centre has been established all drugs will be ordered by the Centre, stored there and distributed to the different hospitals in the state. The geographical entity of the state of Delhi is such that this is possible and feasible. Modern techniques of drug storage and inventory control will be introduced so that the central unit is aware at any time of the different drugs available at the different hospitals and health care facilities. This would ensure that drugs would not pass their expiry dates and that any imbalances such as shortage of a particular drug at one hospital and unused stocks at another would be identified and corrective measures taken well in time. Checks and counterchecks, such as computerized inventory systems, modern accounting procedures, and surprise checks will be initiated to ensure that losses due to illegitimate activity is kept down to the bare minimum. Training of pharmacists in stores management and improvements in monitoring systems will from an integral part of the system.

3. Preparation of a formulary

To ensure proper and rational use of drugs which in turn would decrease the unnecessary expenditure spent today on medicines a Delhi State Formulary will be prepared. This would provide up-to-date information about drugs which are included in the Essential List of Drugs for the state. This formulary would be made available free of cost to all doctors, pharmacists and para-professionals in the health field working at state health units. It has been the experience that preparation and use of formularies in different countries have reduced the expenditure on drugs by about fifteen to twenty percent. This formulary would be prepared by a Formulary Committee set up by the State of Delhi and will be updated every year in accordance with the updating of the list of essential drugs. This formulary will consist of information which will help the doctor in prescribing drugs – such as therapeutic indications, contraindications, interactions and side effects associated with each drug.
In addition to the Delhi State Formulary, a small pocket book containing names and doses of drugs in the essential list will be printed and provided to all doctors, pharmacists and nurses. This will help them to prescribe and provide drugs only from this list.

4. **Quality assurance**

   The State Drug Control Authority will be considerably augmented and strengthened so that drugs reaching the patient are safe, effective and meet approved specifications and standards. The quality control and assurance system will include managerial, technical and legal aspects. Some of the activities will be (a) strengthening of the Drug Inspectorate Unit (b) strengthening the Quality Control Laboratory and (c) establishing an efficient system for withdrawal from circulation of products which have been found to be below the standard required.

5. **Training in Rational Use of Drugs**

   To make certain that the drugs on the test are prescribed will a series of workshops on rational use of drugs would be held throughout the state for all categories of persons involved in prescribing drugs. This will be carried out in collaboration with the staff of medical, nursing and pharmacy institutions in Delhi and organizations such as the medical and pharmacy associations. The government will help in any way it can to implement and strengthen ongoing programmes aimed to introduce the concept of essential drugs in the medical and nursing curriculums so that emerging graduates of the future possess more sensitivity towards rational prescribing than is present at the moment. Much of this training will be imparted working at the hospitals and health centres in Delhi State.

6. **Drug Information**

   The aim of the policy is to see that practical unbiased information on rational use of drugs and on handling of drugs is provided to all health
workers at all levels. Appropriate information will be provided to traditional medical practitioners, retailers, patients and the general public. All available techniques available for such communication using the print, electronic and even, where appropriate, the traditional folk media would be used. Training programmes, workshops, lectures and discussions for different aspects of drugs it is proposed, in collaboration with the National Informatics Centre and the Delhi Medical Association, to set-up a computerized Drug Informatics Centre. In due course a Delhi State Drug Information Letter will be published. This will contain objective, up-to-date information about drugs and will be widely circulated.

7. Preparation of Standard Treatment Schedules

In an effort to rationalize prescribing, reduce cost and prevent loss of medicines it is proposed to prepare Standard Treatment Schedules for those drugs being used at the primary health centres and at the outpatients departments of hospitals. It would be one more step like the preparation of a list of essential drugs, establishing combined pool procurement, development of a formulary and centralized monitoring of medicines, which would help in using a limited budget for drugs for the maximum number of persons without reducing, in any way, the standard of health care delivered.

8. Drug Advertising and Promotion

Ethical criteria for drug promotion and advertising will be established for the State of Delhi along the lines of such ethical criteria developed by the World Health Organization. Drug promotional activities not in accordance with the law or with such criteria will not be permitted in the state. This will help to protect the public from being exploited.

9. Research

The type of research will be carried out will be, initially surveys which will enable a picture to be drawn as to what is happening today e.g. how much
the expenditure is on the four major groups of high-use drugs like antibiotics, how many people actually are provided medicines, how many people are issues. Later, as interventions are introduced the effect of these interventions will be documented. Other studies on drug utilization and on behavioural aspects of patients and the public relating to use of drugs will also be carried out as also studies on drug economics. This type of research – health systems research – will enable the results to be used to modify programmes thereby utilizing such research for the benefit of the people.

10. Monitoring and evaluation

Monitoring and evaluation of the policy and its implementation will be carried out by establishing a monitoring and evaluation mechanism at the Ministry of Health. This unit will study performance in relation to projected activities. Three standing committees would be established; for selection of Drugs, for Drugs Procurement and Stores Management, and for preparing the formulary.