



Silk versus Polyester!

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As our population ages, prescription pharmaceuticals are the fastest growing source of health care costs in Canada. In 2009, well over \$25 billion were spent on the various elixirs of health and life. I had an experience recently that really made me notice how the race for this pie can really affect patients. An elderly patient brought in all her medications for me to review, a point I tend to dwell on with patients. Her blood pressure had surprisingly crept up in the last few months without explanation. As I glanced through her pill bottles, I noticed a bottle with both capsules and pills in it? I mistakenly concluded that her pills got mixed up, until she corrected and informed me that this mixture was intentional. Her pharmacist had run out of one generic and seamlessly put a second generic in the same bottle. Technically, all the pills had the same active ingredient, but the desired action seems to be missing. I got to thinking and made some inquiries. We soon switched her to a branded product and within weeks things settled back to normal. Another article in the medical press soon appeared about a senior who tried to save a few dollars and purchased what looked like brand name Lipitor, a cholesterol drug, in Mexico. She developed heart problems, which stopped when the drug was discontinued. Analysis showed the drug to be fake and her problems most likely due to the one of supposedly benign fillers used to produce the black market pill.

My view on generics has changed. Brand name drugs are ones that have undergone extensive research, investment and testing by a pharmaceutical company. A generic is a drug with similar blood levels of the active molecule without regard to activity and effect. The fillers and other components are usually different or more numerous. It skips all the development and testing costs and copies another company's molecule after the patent expires. The key word is "similar", which means it can be 80% as good? There are only a couple of generic companies which share the majority of financial wind-fall. Teams of legal experts take the place of researchers to keep the brand companies at bay. Years ago, the concept was welcomed as a way to save costs, since generic costs were low. Laws were even passed forcing pharmacists to substitute cheaper copy-cats. Some generic companies took advantage of this situation to boost their profits by raising prices but never to the point of equality to the genuine thing. They even provided bonus incentives to pharmacists who were most likely to notice. The majority of my senior patients subsist on generics. Today, several generic versions of a single drug can end up in your pill bottle. It confuses how a sensitive condition is monitored. What worries me more is the lack of new and significant break-through drugs on the market since Brand companies now shy away from expensive research.

Generics have made my job harder. I now have to keep track of which generic copy a patient is taking of the original drug I prescribed and you should too!