Generic Medicine in South Africa –

Past, Present and Future

15th Annual IGPA Conference 2012 Kyoto - Japan

Dr. Fathima Docrat Chief Executive Officer

The National Association of Pharmaceutical

Manufacturers (NAPM), is a voluntary, nonprofit organization consisting of South African, generics-based pharmaceutical manufacturers and distributors

Established in 1977, its primary objective remains the championing of affordable healthcare by promoting the use of generic medicines







Founded in 1977

One of the oldest pharmaceutical association in South Africa

Established relationships with stakeholders in SA's healthcare landscape

Represents SA internationally as a member of IGPA A founding member of the Southern African Generics Medicines Association (SAGMA)

Through our efforts we aim to increase the generic market share by value in South Africa to 45% by 2015



Our Vision

To ensure the provision of access to **affordable**, **safe**, **quality medicines** for all South Africans.

The NAPM's goal is to ensure a local vibrant pharmaceutical industry that is benchmarked against developed countries.

Our Mission

To ensure that the healthcare sector plays a constructive role in our country's economic growth, through development and transformation, thereby creating an environment can thrive, expand, and be competitive, with the ultimate aim to enhance access of medicines to all of our country's citizens.



The NAPM' Role





The NAPM is championing affordable healthcare by promoting quality generic medicines for all South Africans



NAPM Structure



Pharmaceutical Manufacturers



Members

Abex Pharmaceuticals Activa Health Akacia Healthcare Aurobindo Pharma **Austell Laboratories** Afrika Biopharma Cipla Medpro Di Medicine Registration Consultants Dr Reddy's Laboratories Ferring SA Litha Healthcare Group Limited Mc Pharma Medreich SA Mylan

Pharma Dynamics Pharmachem Primapharma Ranbaxy Sandoz SA Sekpharma Teva Pharmaceuticals Watson Pharma Zydus Pharmaceuticals

Representing almost 90% of generic companies in South Africa, and representing a generics market share of approximately 45%.







Population: 51.8 million

Population: half under 39 years

Life expectancy at 52 years

GDP per capita: \$11,100 (2011)

GDP real growth rate: 3.1% (2011 est.) 2.9% (2010 est.)

Unemployment: 25.3%

Inflation rate 6 % ave. 2012

Key fact: over 85% of the SA population is still uninsured



Sources: Statistics South Africa - Census 2012; IMF; SA DoH; World Bank, KPMG; SA Revenue Service, SA Pharmacy Council





Healthcare expenditure of GDP at 8.1 % (13.8 bUSD)

Private coverage of 7.5m people public coverage of 51.8 m

- 4.1 % of GDP spent on private health = 16.2 % of population
- 4.2 % of GDP spent on the public health sector = 84 % of population

Private sector spending @ R11 150 pp vs Public sector spending @ R2 766 pp



Sources: Statistics South Africa - Census 2012; IMF; SA DoH; World Bank, KPMG; SA Revenue Service, SA Pharmacy Council





HIV/Aids: New patients on ARV's increased by almost 50% to 617 147 in 2011 – increasing life expectancy

Quadruple disease burden (HIV/TB, maternal and child mortality, noncommunicable diseases, injuries)

NHI to cost approx. R10.4 billion per year, above current spend

NHI to cost R145 billion over next 14 years



Sources: Statistics South Africa - Census 2012; IMF; SA DoH; World Bank, KPMG; SA Revenue Service, SA Pharmacy Council



The Development & Impact of Generic Medicine Usage in South Africa

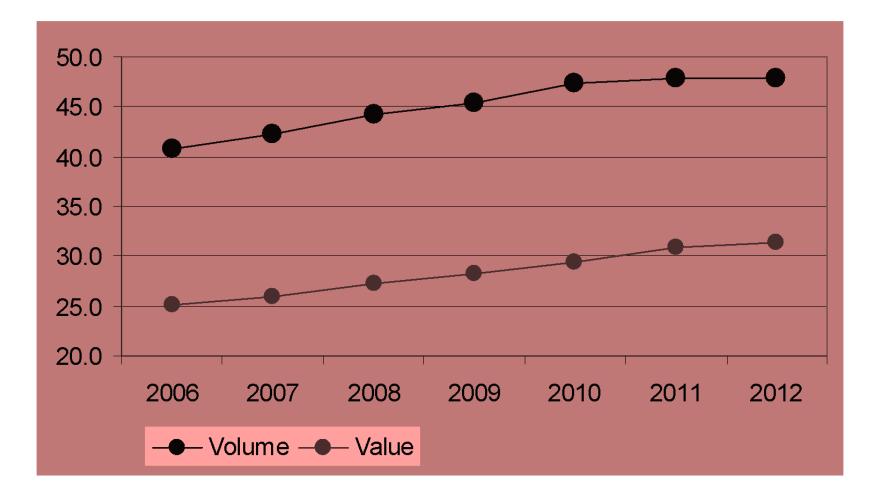






Generic share of Drug Market – 7 Year Trend in South Africa



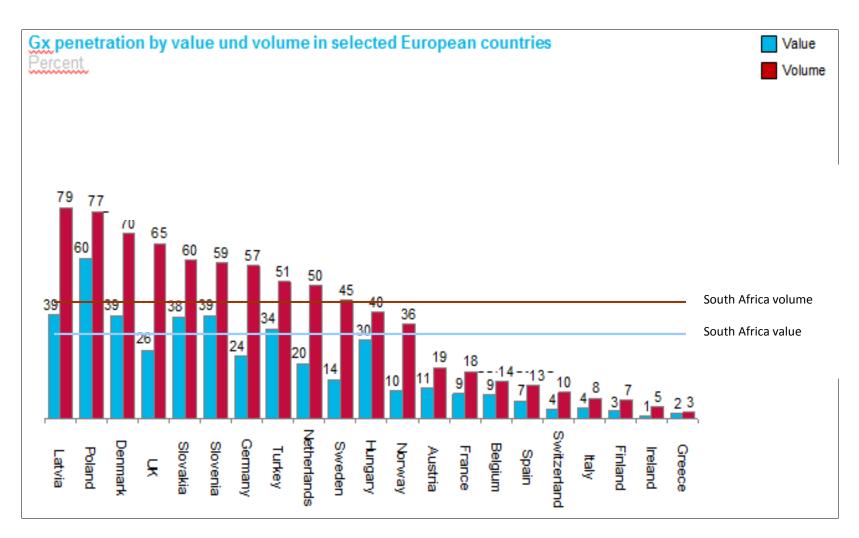




IMS:TPM:Sep 2012

Comparing SA to mature markets in Europe, suggest there is room for further Gx growth

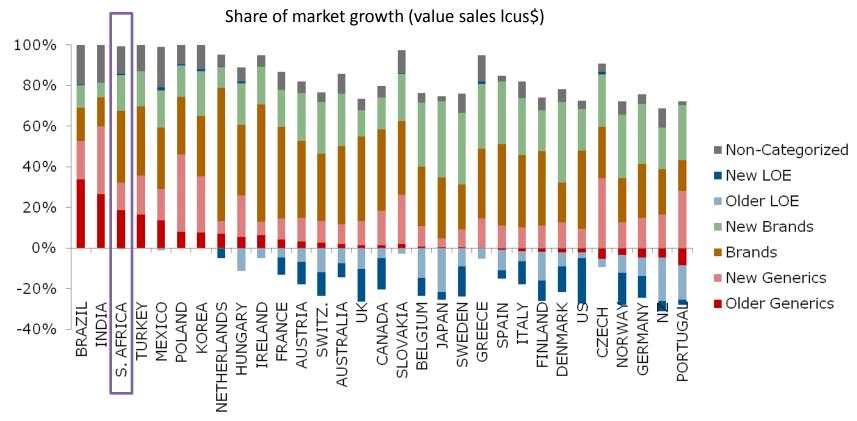






However, old Gx contribute more to the Gx market in South Africa as the introduction of new generics is slow!





Source: IMS Health MIDAS Sales Data. MAT DEC 2010. Note new products includes those launched in the previous two years. Note countries ordered by the contribution of older generics to total market growth



Registration time survey

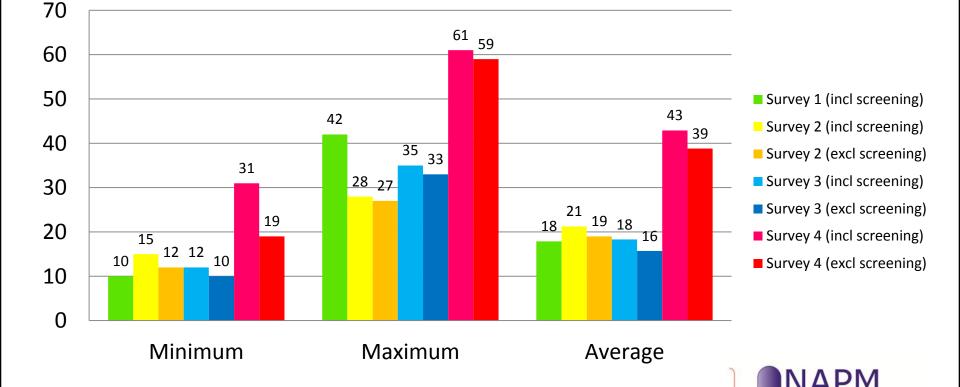


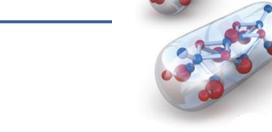
	Survey 1 2005/6	Survey 2 2006/7	Survey 3 2007/8	Survey 4 2008-11
Number of members participating	9	6	13	8
Total number of products reg'd	402	83	103	132
Number of products registered via fast-track procedure	86	8	31	19
Number of products registered via "routine" procedure	316	75	72	113



Average, Minimum and Maximum Registration times – Fast track

Fast track (registration time in months)

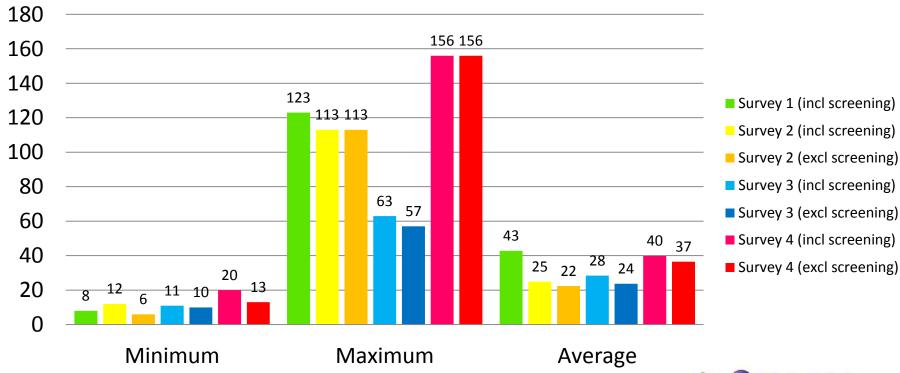




National Association of Pharmaceutical Manufacturers

Average, Minimum and Maximum Registration times – "Routine"

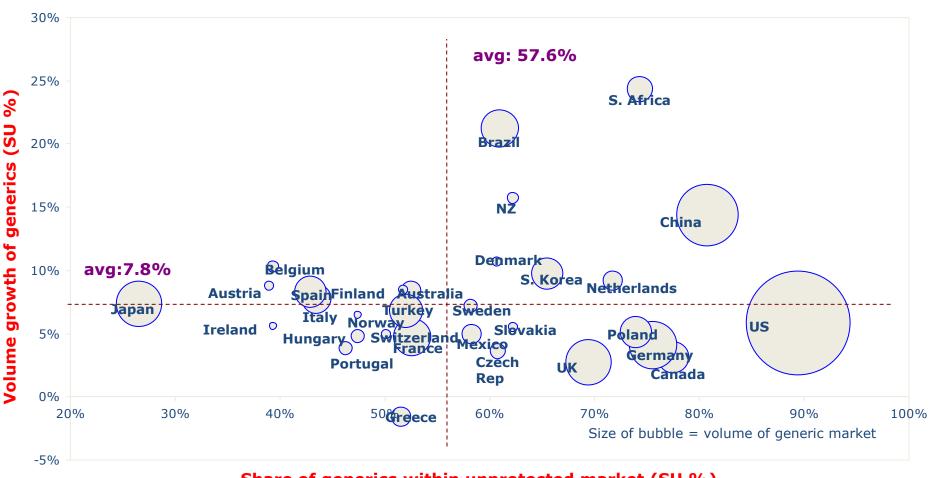
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Routine registration time in months



When Generics are introduced they achieve high penetration relatively quickly



Share of generics within unprotected market (SU %)

Source: IMS Health, MIDAS, Market Segmentation, MAT September 2010, Rx only. *Market Segmentation countries Except for China – data for MAT May 2010. Unprotected market = Never protected + no longer protected.



Drivers for increased Generic Utilisation





Manufacture Capacity Rational & Assurance for generics Vertical Integration (API) Quality of MCC submissions Patent protection

Fast track approvals Perverse Incentives Pseudogenerics Marketing Code

Generics Industry





Generic vs Originator

Access to affordable and sustainable healthcare.

How to achieve similar market shares as to EU & US. Enabling legislation and clear rational why generic medicines should become SA's (and indeed any emerging markets') key pharmaceutical needs source.

• Patent Protection & Intellectual Property

Ever greening is anti- competitor, anti-consumer and monopoly extending as it gives limited choice while ensuring greater costs onto the consumer.

Pseudogenerics

Are they anti-competitive and do they negatively impact or unduly influence the pricing models of "true generics"? Is SEP pricing legislation fair to generic companies?

• Vertical Integration (API)

Nearly 95% of Active Pharmaceutical Ingredients (API's) are imported and make up approximately 70% of the price of finished pharmaceuticals.



Generic Approvals

MCC to allow generic companies a quicker more cost effective method for submitting and gaining approvals for generic drugs

• Perverse Incentives

In some European markets where only price controls have been used, generic market growth has slowed down as it does not help to increase volume and expand market access. Use of generics is the single most important driver to reducing overall cost.

As generics are often half the price of originator medicines it results in a much lower Single Exit Price (SEP). Pharmacists in South Africa are really disincentivised from dispensing the cheaper equivalent medication. This does not benefit government, medical aid schemes and most importantly the South African public, who are already under pressure to manage their expenses.

Marketing Code of Conduct

The NAPM has been supportive of the marketing code developed jointly by industry players. The NAPM, however, have repeatedly called on government to legislate sanctions against offenders if self-regulation fails.



Drivers for increased Generic Utilisation

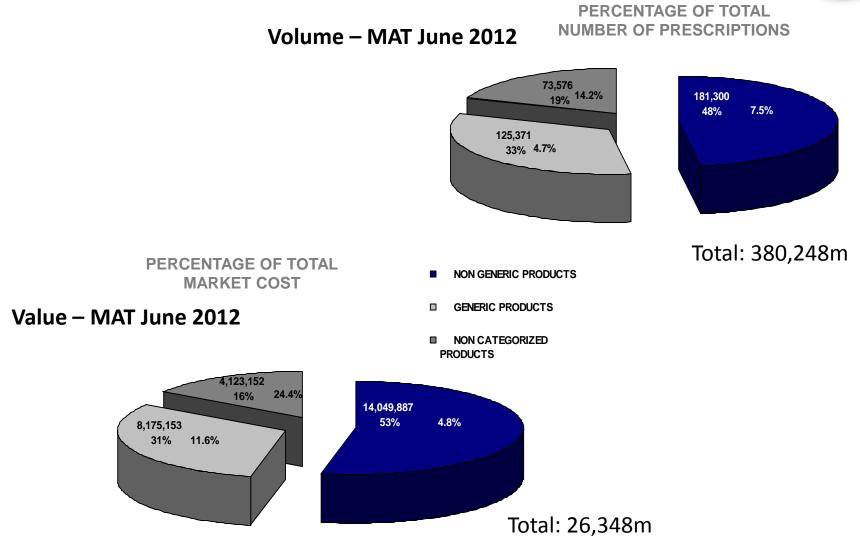
Supportive of the TAC (Treatment Action Campaign) and MSF joint efforts

www.fixthepatentlaw.org

South Africa's patent law has NO examination



Market Growth 2012-2020



IMS:TPM:June 2012

THANK YOU

