



## A European survey on medicines management in hospitals

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**A**fter nearly 15 years of experience on pharmaceutical policies, last year was inspiring for me as my team and I entered a new research field. As part of the PHIS (Pharmaceutical Health Information System) project, we worked intensively to survey and analyse medicines management in the hospital sector. It may surprise hospital pharmacists but for policy makers and academia this is pioneer territory.

PHIS is a research project commissioned by the European Commission, the Executive Agency for Health and Consumers (EAHC) and co-funded by the Austrian Ministry of Health (BMG). It aims to increase knowledge and exchange of information on pharmaceutical policies, in particular on pricing and reimbursement, within the European Union Member States, covering both the outpatient and the inpatient sector. It is coordinated by the Austrian Health Institute *Gesundheit Österreich GmbH/Geschäftsbereich Österreichisches Bundesinstitut für Gesundheitswesen (GÖG/ÖBIG)* together with four associate partners.

PHIS was launched following the Pharmaceutical Pricing and Reimbursement Information (PPRI) project [1] coordinated by our institute together with WHO Europe. PPRI also tackled the need for information on pharmaceutical systems in other countries and produced country reports describing and analysing national pharmaceutical systems (PPRI Pharma Profiles). In this, the major focus was on the outpatient sector. PPRI Pharma Profiles have since then been come to be regarded as a key reference for information on pharmaceutical policies. However, people have requested having such Pharma Profiles for the inpatient sector too.

In response, a major work package of the PHIS research project, called 'PHIS Hospital Pharma', has been devoted to the inpatient pharmaceutical system. Coordinated by the SUKL (Slovak Medicines Agency) and our institute GÖG/ÖBIG, national PHIS Hospital Pharma reports have been produced by country representatives. At the time of writing, 20 reports have been drafted, five of which (Austria, Bulgaria, Malta, Norway, Slovakia) have already been published [2]. Preliminary results show some trends in Europe regarding purchasing and financing of medicines in hospitals, but these strategies are influenced by country-specific characteristics.

A key issue is the level of medicines prices in the inpatient compared to the outpatient sector. Therefore, case studies

being undertaken in five countries (Austria, The Netherlands, Norway, Portugal, Slovakia) include a price survey. We were very pleased with the good cooperation with hospital pharmacists and the willingness to share price data. During the survey, we had the opportunity to visit hospital pharmacies and to learn about good practice in hospital pharmacy. This was very interesting for us as researchers, but also for the accompanying people from regulatory authorities on the ground and I am convinced that this has contributed to a better understanding between the inpatient and outpatient sector.

The case study surveys are currently being undertaken at the time of writing, so I cannot share results with you now. I will be pleased to do so in the PHIS Hospital Pharma report, which will contain both a detailed European survey and the results from the case studies. The report will be published on the PHIS website in spring 2010 [2].

The work package 'PHIS Hospital Pharma' could never have been performed successfully if we had not had the support of the experts in the field, i.e. hospital pharmacists who have contributed their knowledge and experience. I hope that this research project is seen as a starting point for a partnership of experts and we are looking forward to enlarging the PHIS network by further representatives from hospital pharmacies. I believe that the PHIS project has produced much needed information for policy makers, which – as hospital pharmacists confirmed – is also of value for them. But in my opinion PHIS has also contributed to building a basis for a closer cooperation between the in- and outpatient sector and thus allows for a comprehensive perspective when tackling the challenges in health care.

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