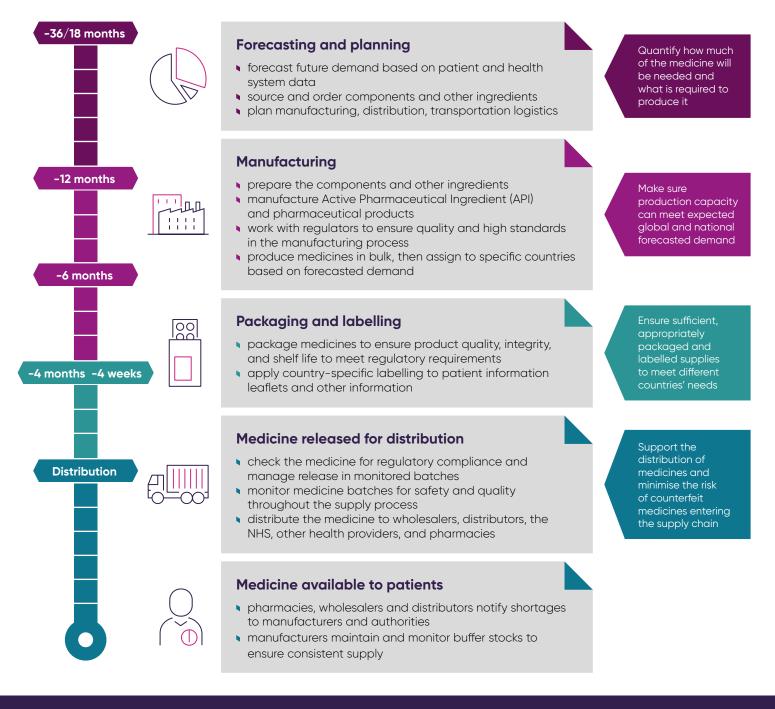
Ensuring patients receive the medicines they need, when they need them

Medicines supplied by hospitals and pharmacies today began their journey up to 36 months earlier, when global manufacturers start planning production based on anticipated demand. This is highly complex especially for generic medicines, which may have many separate suppliers.



Medicine supply chains are built to provide the right medicines in the right packaging, to the right location, at the right time, in the right amount, and with the right documents.

However, supply chains are complex and involve many different suppliers and processes. Delays and shortages can occur despite planning and forecasting, creating frustration and worry for patients, and their family, carers and clinicians.

What's behind medicine shortages? The right diagnoses lead to the right solutions

What makes supply chains resilient?



collaboration between manufacturers, wholesalers, pharmacies, the NHS, regulators and government

transparency of demand informs appropriate planning



flexibility allows capacity and supply to be increased or reallocated to where it is needed

global supply chains mitigate risks through diversified sourcing and international/regional back-up



digitalisation leads to better demand forecasting, helping to detect risks and speeds up response

Shortages can happen for many different reasons:

Manufacturing

e.g. input material shortfall, capacity issues, storage issues, distribution bottlenecks, quality control and regulator constraint, intervention or capacity challenge

Business factors

e.g. unexpected demand, parallel export, unnecessary stockpiling, component costs

External factors e.g. natural disasters, media attention 'spiking' demand, geopolitical events, unexpected prescribing changes

Economic factors e.g. market conditions, cost containment measures, restrictive public procurement practices

Shortages impact both branded and generic medicines.



Branded medicines (onpatent brands and branded generics), account for

of all reported shortages.

According to the Specialist Pharmacy Service medicines supply tool, April 2024

Policy solutions need to be fit for purpose, carefully tailored to the underlying causes of shortages.

What are manufacturers doing?

- investing in advanced technology and capabilities to forecast demand and better manage stocks
- increasing quality management of individual manufacturing facilities
- improving internal quality, safety and manufacturing processes to increase and optimise capacity
- strengthening internal operating procedures to reduce risks inherent to any step of their manufacturing and distribution processes
- transforming supply chains towards carbon neutral or negative emissions
- engaging in an active dialogue with government and the health systems to improve the security of supply
- researching, developing and investing in new equipment and processes which enables more efficient and environmentally friendly manufacturing, including continuous manufacturing

What can the UK do?

- foster closer collaboration between the NHS and manufacturers to anticipate demand surges, such as those arising from high-profile campaigns.
- undertake close monitoring of the impact of the voluntary scheme on the resilience of supply
- chains, especially on the availability of 'older' branded medicines suitably resource the regulator to rapidly approve
- medicines and closely monitor the safety of the supply chain
- improve collaboration and communication between stakeholders to identify possible shortages early
- ensure globally resilient supply chains by reducing trade and regulatory barriers through cooperation and bilateral agreements
- promote a positive health trade agenda at the World Trade Organization that eliminates export restrictions, supports trade facilitation, and builds customs and regulatory capacity
- ensure the NHS considers sustainability of supply in its procurement processes

What should patients do?

If there is a shortage in a patient's prescribed medicine, please contact the original prescriber to discuss alternatives.