# Executive Summary

The Healthcare spending in India consists majorly of Out-of-Pocket (OOP) expenses. Majority of this is spent on therapeutic drugs. The generic medicines are distributed through the public and private health sector which includes hospitals, clinics and health centres.  Due to the unethical practice by pharmaceutical industry and nexus with doctors, many a times, costly branded drugs/medicines are prescribed. OOP expenses account for 78% of private health expenditure. Medicines contribute to 74% of this!**[1]**

 This project aims to look at the distribution patterns of generic drugs across private and public clinics, the mindset issues associated with them and possible promotion avenues for generic drugs and awareness regarding the same.

As of now, generic drug regulations in many countries all over the world have been studied. Field visits have been undertaken to Guru Gobind Singh Government Hospital, a model hospital of the Government of Delhi which uses the Hospital Management Information System (developed and managed by CDAC). Data regarding prescriptions have been obtained as well as stock inventory data collection for a week has been started. Valuable inputs regarding the project have been obtained from the senior doctors at GGSGH specialized in General Medicine, Pediatrics and Surgery.

Some of the major inputs received were:

1. To identify a cut-off based system (based on prior quality of supply) for identifying generic drugs suppliers rather than lowest bidder getting the contract
2. To study major reasons for interruption in supply of essential drugs, this could range from few days to months.
3. To study possibility of developinga feedback loop between policy makers and doctors with regard to quality of drugs supplied. This could strengthen *pt.* (1)
4. To provide recommendations to use Line 1 (basic) as first prescription drugs instead of Line 2/3 (advanced, stronger and more expensive drugs); focus primarily on confidence being instilled in doctors about generics

My 2 major recommendations would be the following

1. Establishment of a Healthcare Management Information System
2. Establishment of a Feedback mechanism to facilitate communication among health care providers and Administration to ensure that quality drugs are supplied at government pharmacies.