

## ABSTRACTED SCIENTIFIC CONTENT

## RESEARCH NEWS

**Healthcare professionals will accept generic HIV treatments**

Healthcare professionals working with HIV patients in high-income countries are likely to accept the introduction of generic antiretroviral drugs (ARVs), according to a study carried out by researchers in Ireland [1].

Between the end of August and November 2015, 30 healthcare professionals completed an online survey about the introduction of generic ARVs. Descriptive and univariate analysis revealed information on cohort demographics, knowledge of generic medicine and facilitators of generics substitution.

The sample of healthcare professionals that completed the survey included 22 physicians, four nurse specialists and four pharmacists. 66% of the healthcare professionals had been working in the field of HIV treatment for over five years. They expressed good knowledge of the terms associated with generic medicines and the majority stated that generic medicines contained the same drug as the branded alternative and are as safe and effective.

**The healthcare professionals view**

The majority of the healthcare professionals that completed the survey expressed concerns about the supply chain of generics. They also noted that the main disadvantages in switching to generic ARVs were related to the loss of fixed-dose combinations of medication, potential negative effects on adherence and the use of older medications. In addition, the majority of healthcare professionals noted that an

increase in dosing frequency or pill burden would affect their willingness to prescribe a generic ARV.

Despite concerns, the overall results showed that healthcare professionals would be willing to prescribe generic ARVs if they became available, with 30% stating 'Yes', 43% stating 'Yes, in some cases', and 27% stating 'Yes, on a case-by-case basis'. The survey also showed that healthcare professionals have good understanding of the cost of ARVs and generics alternatives, and saw financial advantages in making a switch to generics.

The authors believe that the results show that generics substitution would be acceptable to the majority of healthcare professionals in Ireland. Education programmes targeted at healthcare professionals should be implemented to ease transition and reduce misconceptions about generic ARVs. However, barriers to substitution are likely to be encountered with increased dosing regime or pill burden. The authors also state that the savings made through administration of generic ARVs that can be reinvested into HIV services, will be a powerful motivation for their implementation by healthcare professionals.

**Reference**

1. Kieran JA, O'Reilly E, O'Dea S, Bergin C, O'Leary A. Generic substitution of antiretrovirals: patients' and health care providers' opinions. *Int J STD AIDS*. 2017;956462417696215.

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