

Ninety years after the discovery of insulin, millions of people with diabetes cannot access this life-giving medicine due to high prices, exposing them to risk of serious disease, such as blindness, and amputation.

Most surprising is that insulin prices vary considerably between regions and between countries within the same region. A vial of 15 mg human insulin in Islamic Republic of Iran costs around US\$ 1.5, while in the Congo and Namibia it can reach over US\$ 47, a difference of 3000% with no production justification. The high price of insulin is leading poor people to use less than the prescribed amount or simply to go without it.

Prices also vary among regions worldwide. Prices are higher in the African Region than in the Eastern Mediterranean and South East Asia Region. However, stark differences exist in the Eastern Mediterranean Region. In the occupied Palestinian territory, for example, which is undergoing very difficult conditions, patients pay higher prices than Canadian patients pay for the same quantity of insulin.

In an endeavour to study insulin prices in the different countries of the world and the causes of their increase, Health Action International (HAI), an international nongovernmental organization concerned with medicines policy, undertook a one day 'snapshot' of the price of insulin from 60 low-income, medium-income and high income countries on 11 May 2010. HAI also compared insulin prices provided by three international drugs companies.

One startling result of the study is that a single company can vary its insulin pricing policy from one country to another. Thus, the price of insulin produced by one company in Zimbabwe is US\$ 9 whereas it exceeds US\$ 44 in Congo. Similarly, the insulin produced by another company varies in price from US\$ 3 in Senegal to US\$ 47 in Namibia.

At the same time, it was noted that one company provides human insulin to the least developed countries (public and private sector) at prices that are 20% below the average prices in Europe, Japan and North America. It is believed that 9 of the 12 least developed countries where data was collected are purchasing insulin at low prices. However, the snapshots indicated that governments do not always benefit from this low price offer or that this reduction does not always reach patients.

This means that patients do not benefit from the reduced prices for insulin offered by the producing companies. Consequently, there are startling cases of countries where a family living on US\$ 1 a day would need to spend about half its monthly income to buy 1 dose of insulin from a private pharmacy.

Even in a middle-income country (family income US\$ 2 a day) a patient spends one third to one half of monthly income to buy 1 dose of insulin from either of the two above mentioned companies. This, together with the other costs, such as for syringes, needles and glucose tests, is preventing access of millions of people with diabetes to insulin.

In general, the following are the results of insulin prices survey conducted by collecting snapshots from 60 countries.

- There is a very limited number of manufacturers of insulin worldwide with the insulin market dominated by just two companies.
- The prices patients pay for insulin are similar within the same country but vary between countries and regions and, although the price the patient pays is often lower in low-income countries, the prices in some of these countries are higher than those in high-income countries.
- Even when prices are reduced in low-and middle-income countries, insulin is still unaffordable for the majority of the population in these countries, causing severe consequences for people with diabetes who cannot afford to purchase insulin.
- Insulin prices could be much lower and hence more affordable to those who need it. In order to achieve this, governments need to set priorities for the health budget and set financial

allocations to ensure availability of insulin free of charge to patients in the public sector.

- Adequate forecasting is needed as well as efficient supply systems to prevent stock-outs and maintain product quality.

- Mechanisms need to be developed to provide insulin through the private sector at low cost or free in line with the practice in some countries.

- The low price offers made by some manufacturers should be utilized and passed on to patients.

- Syringes and needles should be available and provided either free of charge or at affordable prices to people with diabetes.

- Traditional vials of insulin should be available in the market rather than relying only on the newer, much more expensive ones.

Saturday 17th of May 2025 01:35:23 PM