An Investigation into the Relationship between the Number of Available Generics within a Therapeutic Class and Prices of Medicines in South Africa.

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DECLARATION

In fulfillment of the requirements of the coursework degree of Masters

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ABBREVIATIONS

Abbreviation	Description / Meaning
CVD	Cardiovascular disease
DOH	Department of Health
HAI	Health Action International
IMSM	Interchangeable Multi-source Medicines
IRP	International Reference price
MSH	Management Sciences for Health
NDP	National Drug Policy
NHI	National Health Insurance
RSA	Republic of South Africa
SEP	Single Exit Price
WHO	World Health Organization

ABSTRACT

RATIONALE FOR THE STUDY

Access to therapeutic drugs form an integral part of any successful healthcare system particularly in the Republic of South Africa where the burden of disease is on average four times that of developed countries and, in most instances, twice that of its developing counterparts. The high costs of therapeutic drugs, however, remain a barrier to accessibility and improved health to the majority of the population. The promotion of generic drug competition is a key policy strategy in the containment of increasing drug costs in South Africa. Generic drugs represent a substantial part of the pharmaceutical industry, and offer several advantages. A principal pharmacoeconomic question with regard to the use of generic drugs relates to the association between drug prices and the number of available sellers. This relationship is particularly important in South Africa, where concurrent pricing legislation, is being implemented without monitoring of the consequences on generic drug prices and use.

AIMS AND OBJECTIVES

- To examine the effect of generic competition on the price differentials between the least expensive and the most expensive drug products with respect to the number of available brands within five classes of cardiovascular drugs
- To make a comparison between South African drug prices with International Reference Prices

METHODOLOGY

Data on private sector prices of originator and generic drugs belonging to the cardiovascular class of drugs as at 10 June 2013 was sourced from the South African Medicine Price Registry and utilized in this study. The relationship between the mean proportional price (in percentage) and the number of brands was analyzed using correlation analysis. International reference prices were obtained from the Management Sciences for Health International Drug Price Indicator Guide (2012 edition).

RESULTS

Findings were inconsistent with those found in unregulated markets in that with the exception of diuretics, a weak correlation between price and the number of originator drugs and generics and between generics drugs themselves was observed. A comparison of median prices for each strength of the originator drug, originator generic drug and the highest price generic drug showed that the price of the generic drug manufactured by the originator was still higher than the most expensive generic version manufactured by any other company. The exception was telmisartan, where no other generic drugs were available for this product. Comparison of the price ratio between the originator drug, lowest priced generic and the International Reference Price values revealed that the originator drug prices had a Median Price Ratio of 20.99 (interquartile range 7.31 to 53.46) and the lowest priced generics had a Median Price Ratio of 4.28 (interquartile range 2.10 to 8.47).

CONCLUSION

The number of generic entrants is not necessarily a predictor of lower drug prices in South Africa. This research suggests that Single Exit Pricing as a single pricing policy initiative seems to hinder healthy competition in terms of prices of generic drugs. The results also suggest that the South African procurement system has not achieved the lowest prices for drugs when compared internationally.

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CHAPTER 1

1. INTRODUCTION

In the Republic of South Africa (RSA), the burden of disease is on average four times that of developed countries and, in most instances, twice that of its developing counterparts (Bradshaw et al., 2006). This dire situation further lends itself to an increased burden on finances, health sector facilities and human resources in South Africa.

Access to therapeutic drugs form an integral part of any successful healthcare system. These drugs are utilized in the prevention and treatment of both communicable and non-communicable diseases, enabling people to live longer and more productive lives. The high costs of therapeutic drugs, however, remain a barrier to accessibility and improved health to the majority of the RSA population (Gray and Matsebula, 2000). The increasing costs of pharmaceutical drugs account for a significant portion of total health expenditure, straining the budgets of patients and public/private insurers. These inflated costs further directly contribute to poor health outcomes by decreasing adherence to vital medication (Shrank et al., 2006). Out-of-pocket expenditure has been estimated to be as much as 65% of total therapeutic drug expenditure in sub-Saharan Africa (Shrank et al., 2006). In light of the costs of therapeutic drugs, the promotion of generic drug consumption could potentially be an important cost-saving mechanism for final consumers, insurance providers, and government.

The restructuring of the RSA public health sector post-1994 led to the development and implementation of the National Drug Policy (NDP). The economic objective of the NDP was to decrease the cost of therapeutic drugs in both the private and public sectors (Department of Health, 1996). In 2001 the RSA Government subsequently amended the Medicine and Related Substances Act 101 of 1965 which allows generic substitution of branded drugs with generics (Government Gazette, 2001). Generic drugs represent a substantial part of the pharmaceutical industry, and offer several irrevocable

advantages. A principal pharmaco-economic question relates to the relationship between drug prices and the number of sellers. This relationship is particularly important in the pharmaceutical industry as the market is sensitive to changes in legislation, which are specifically implemented to promote competition. Most studies on the pharmaceutical industry reveal a mixed impact with respect to generic entry (Wiggins and Maness, 2004), with very limited research being available on the South African market.

In addition to mandatory generic substitution, the amended South African Medicines and Related Substances Act 101 of 1965 introduced several additional regulations to reduce health care expenditure (Department of Health, 1996). The first of these (section 18A) banned "bonusing" (preventing pharmaceutical manufacturers from offering discounts and/or rebates to patients or healthcare providers) and the second (section 22G) which led to the formation of a "Pricing Committee" who were tasked with constructing "transparent pricing mechanisms" (Nicolosi and Gray, 2009). The high levels of discounting and payment of incentives within the pharmaceuticals supply chain had raised serious concerns in the Department of Health (DOH) as these practices were of no benefit to the consumer. Retail pharmacies and dispensing doctors on the other hand were able to capitalize on these incentives while patients continued to pay the official manufacturers "listed" price (Hawkins, 2011). This also countered the effect of generic substitution as evidence revealed that in many cases doctors and pharmacists were not always agreeable to substituting the lower priced generic but would rather dispense the most profitable product (Hawkins, 2011). This led to the prices of pharmaceutical drugs being regulated by the Single Exit Price (SEP) legislation. Single Exit Price refers to a legislation mandating that medicine manufacturers may only sell their products at one price to all their customers, regardless of the nature of the customer's order size and consumption levels. The implementation of SEP in the private sector resulted in a significant shift from a free market, to a regulated one, ensuring transparent pricing practices for the industry (Advanstar Communications, 2009).

While previous studies revealed the price-lowering effect of generic competition with respect to the number of sellers in the overall market (Cook, 1998, Fatokun, 2011), very little data is available on this concept within a specific drug therapeutic class, let alone in RSA, which has the additional policy of the SEP. While HIV/AIDS remains the leading overall cause of mortality in sub-Saharan Africa, cardiovascular disease (CVD) is the second leading killer and is first amongst individuals over the age of 45 years (Lopez et al., 2006). "In RSA approximately 195 people die per day due to CVD, representing about 20% of the daily deaths due to HIV/AIDS" (Steyn, 2007). There is currently minimal information on the cost of CVD in South Africa, however it was estimated that overall costs in 2010 would have been more than double that 20 years ago (Murray and Lopez, 1996).

The objectives of this study were to examine the relationship between generic drug price competition and the number of available brands within the cardiovascular drug class with respect to the SEP policy. A secondary objective was to make a comparison of South African drug prices to international drug prices, to gauge where exactly the South African cardiovascular market stands relative to its developed counterparts, in an effort to guide future policy efforts. The final objective was to follow the consumption trends of generic drugs when compared to the originator drug and the originator generic drug.

1.1 Implications for Practice

The value of these findings is untold, as currently, there is limited and dated information on economic interventions specific to the unique South African context and addressing its specific needs. The implementation of the proposed National Health Insurance (NHI) is likely to result in a shift in the use of prescription drugs, as public access to healthcare services will also be increased. Limited information is available on the potential impact of NHI on the pharmaceutical space in South Africa. This study is therefore important since lessons learnt can guide further regulatory affairs, demand forecasts and be used as a potential intervention to further reduce costs in the healthcare

system. The potential impact of NHI in South Africa should be researched as a single focus area and will not be covered within this research dissertation.

CHAPTER 2 LITERATURE REVIEW

The focus of the literature review is on relevant background and explanation of terms regarding the impact of the implementation of regulated pricing within the pharmaceutical environment in South Africa.

2.1 Definition of Concepts

2.1.1 Originator brand drug

Originator brand drugs are products that have been designed, developed, tested and subsequently patented by a company in order to maximize economic gain which may result from the availability of a new drug (van der Merwe Smit and Bredenkamp, 2013). Patent protection and the sole monopoly of sales for a defined period of time allow the company to recoup costs incurred during research and development (McDonald, 2005).

Innovation in the pharmaceutical industry typically have a high fixed cost of production and has consistently been described as being complex, lengthy, and risky (OECD, 2008). It is estimated, that the cost of development of a novel drug ranges from US\$ 500 million to US\$ 2 billion, depending upon the targeted disease, and requires an average investment time of 73 months (Daems et al., 2011). Furthermore, it should be noted that only 20% of potential drugs are ever brought to market (Adams and Brantner, 2006). These are often the reasons cited by pharmaceutical manufactures to justify the high retail prices of their drugs.

Post patent expiry, originator brand drug prices are affected by the entry of generic drugs. To compensate for competition from generic firms and to continue funding innovation, original manufactures must therefore achieve exceptional profits while they still enjoy patent rights. Patents are usually valid for 20 years but, owing to the onerous process required to bring a product onto the market, companies often only have about ten years in the market before the patent expires (Adams and Brantner, 2006).

2.1.2 Generic drug

Section 22F of the Medicines and Related Substance Control Amendment Act 90 of 1997 refers to "generics" as interchangeable multi-source medicines ("IMSM"). IMSM is defined in the Medicines Control Act as "medicines that contain the same active substances which are identical in strength or concentration, dosage form and route of administration and meet the same or comparable standards which comply with the requirements for therapeutic equivalence as prescribed" (OECD, 2008).

In an effort to reduce drug expenditure in South Africa, the Medicines and Related Substances Control Act 101 of 1965 was amended by the Medicines and Related Substances Control amendment Act (Act 90 of 1997) under section 22F. Under this law a pharmacist is obliged to inform a patient of the benefits of the substitution for a branded drug of an interchangeable multi-source medicine. A pharmacist may replace the drug or medicine prescribed by a doctor with a generic alternative drug or medicine unless expressly forbidden to do so by the patient or stipulated by the prescriber as 'no substitution' next to the item prescribed (Government Gazette, 2001).

Following patent expiry of branded drugs, other manufacturing companies may produce the same drug under a different brand name once they have filed for registration and gained approval from the regulatory authorities. Generic drugs bypass the large marketing and Research and Development expenditure, and are offered on the market at much lower prices compared to the originator drugs with as much as a 20% to 90% cost benefit (Brems et al., 2011).

In 2010, the South African Mediscor Medicines Review indicated that 50% of patients that are insured with medical aids used generic drugs when they were available, which was a steady increase from previous years (Badenhorst et al., 2011). The growth of the South African generic pharmaceutical market is set to rapidly accelerate in the presence of the

countries medicine regulations, spiralling drug costs and the expiry of a number of patents especially in the cardiovascular category (Moorad, 2012).

2.2 Pharmaceutical Policy Implementation in South Africa

2.2.1 Single exit pricing

In 2004, the South African government - in striving to attain total transparency in the pricing structure of medicines - introduced a SEP for generic and branded drugs. Single Exit Price refers to legislation mandating that drug manufacturers may only sell their products at one price to all their customers, regardless of the nature of the customer's order size and consumption levels (Nicolosi and Gray, 2009). Price increase limits are granted by the DOH on an annual basis only, while manufacturers are allowed to apply for price reductions whenever they choose (Pretorius, 2011).

The implementation of SEP in the private sector resulted in a significant shift from a free market, to a regulated one (Advanstar Communications, 2009). This policy evades the excessive rebates passing between manufacturers, and the private sector suppliers (such as wholesalers and distributors) as well as puts a stop to discounts and additional levies on drugs, thus setting price competition limits and averting predatory pricing strategies (Pretorius, 2011). The medicine pricing regulations provided only for the addition of a regulated professional fee to the SEP. In this way the consumers are made aware of how much is being paid for the medicine and what is being paid for the dispensing and distribution (OECD, 2008).

The South African Government has introduced several price control mechanisms to regulate the cost of medicines in the country. The combination of SEP and capped annual price increases led to an overall decrease of 22% in medication costs in its first year of introduction (McIntyre and Thiede, 2007) and hence appeared to produce its targeted effect of cost reduction of medications to the patient. However, these policies have also been met with mixed reactions. Several economists have argued that by

interfering in the normal market process of pharmaceuticals, price controls discourage normal price competition and stifle innovation, research and development (Calfee, 2001). While the South African government may have good intentions in creating transparency in the pricing structure of medicines the imposition of a SEP may have many unintended consequences, which could potentially reduce access to medicines and compromise South Africa's healthcare system (Calfee, 2001).

2.2.2 International reference pricing

International Reference Pricing also referred to as External Price Referencing and External Price Benchmarking is defined as "the practice of comparing pharmaceutical prices across countries" (OECD, 2008). In South Africa, the DOH is presently aiming to implement legislation that will promote international benchmarking of drug prices, where the national originator brand drug price will be benchmarked against counterparts in Australia, Canada, New Zealand and Spain (Government Gazette, 2010). Generic drugs will thereafter be pegged at 40% below the price of the originator drug. The rationale for the proposal is to protect the South African health system from "distorted" medicine prices. International Reference pricing as a method to reduce price distortions is seen to be superior to generalized price cuts or price freezes (Government Gazette, 2010). It is anticipated that there will be an immediate 10% cost reduction in originator drug pricing with a possible further 9.9 % reduction at a later stage (Government Gazette, 2010).

2.3 The Benefits of Generic Drugs

In resource-constrained developing countries like South Africa, the sustainability of a generic drug market is imperative to improving access and availability of essential drugs. In addition to offering a cost saving, to both patients and government, generic drugs also ensure that patients continue to receive gold standard treatments at affordable prices post patent expiry (Sheppard and Principal, 2010).

Unlike originator drugs, which are manufactured by a single firm, generic drugs are multi-sourced. This stimulates healthy competition not only between the originator drug companies and generic drug companies but also amongst generic drug companies themselves. Increased competition, not only means lower patient costs, but also drives product improvements, distribution efficiencies and improved access to all medicines (Sheppard and Principal, 2010).

An added benefit of generic drugs is in ensuring supply continuity even after the originator drug may have exited the market (Brems et al., 2011). They further assist by ensuring availability of supply for particular medicines which can be important at times of increased demand, such as unexpected requirements for anti-infectives during an influenza epidemic (Sheppard and Principal, 2010). Generic drug manufacturing also improves economic development and affords increased employment opportunities especially when produced locally (Sheppard and Principal, 2010).

2.4 Other Research into the Impact of Generic Drug Competition

The dynamic nature of the pharmaceutical industry remains a complex one and varies across the globe, being governed by different legislation and supply and demand characteristics. Several international studies have sought to evaluate the impact of generic entry on originator brand products (Frank and Salkever, 1997, Hudson, 2000, Lexchin, 1993, Fatokun et al., 2011).

A study by van der Merwe Smit and Bredenkamp (2013) focused on the effect of generic drug competition on market share, growth and pricing of originator brand drug was conducted on the South African private pharmaceutical market. The results of the estimations which were performed on 39 different molecules revealed that generic drug competition has different effects in different anatomical classes. The relative pricing of

originator drug in the Cardiovascular System had a significant negative impact on the change of its market share.

The study further showed that the relative prices of originator drugs had a significant positive relationship with the number of generics available in the market, while at the same time the absolute prices of originator drugs had a significant negative relationship with the number of generics available in the market. In other words, while the relative prices of originator brand drug increase as more generic drugs enter the market and aim to compete by entering at lower prices, the originator manufacturers also lower the absolute prices of their medicines in an apparent effort to compete more effectively.

Adriaen et al (2007) in researching the determinants of pricing strategies of originator and generic drugs following patent expiry in Belgium revealed that pricing strategies of originator and generic drugs are dependent on the medication class, with the price differential between originator and generic drugs being higher for the cardiovascular class of drugs. The regression analysis revealed that the number of generic drugs in the market reduces the price of generic drugs and raises the price differential between originator and generic drugs.

Generic drug entry stimulates competition among the various brands of the off-patent product available in the market and assists in reducing the overall price of the drug product (Cook, 1998). This phenomenon however is only likely if there are a sufficient number of generic products in the market (King and Kanavos, 2002, Nguyen et al., 2008). Fatokun et al (2011) conducted a study in Malaysia which examined the relationship between the number of multisource medicines and their proportional prices. The study was limited to the use of private retail price data. The results of the study supported the hypothesis of the price-lowering effect of generic competition as shown by the decrease in the mean proportional price as the number of brands of the multisource product increases. These findings were consistent with the finding of several other empirical studies (Caves et al., 1991, Cook, 1998, Frank and Salkever, 1992, Grabowski and Vernon, 1992, Kong and Seldon,

2004, Lexchin, 1993, Saha et al., 2006, Frank and Salkever, 1997). This generic price lowering effect as observed in the Fatokun et al (2011) study was, however, not observable across all drug brands.

The majority of the previous studies investigating the effect of generic entry and the number of firms have focused on small sets of drugs across several therapeutic classes. Wiggins and Maness (2004) focused on one segment of the pharmaceutical industry, namely anti-infective pharmaceutical products. Data for this study consisted of retail-level pharmacy transactions for all anti-infective products over a period from 1984-1990. Results from this study revealed that prices fall rapidly moving from one seller to several, with prices continuing to decrease in the face of numerous sellers.

2.5 Research into the Impact of Pricing Policies

Various global investigations into the implementation of pharmaceutical price controls and pricing regulations for the pharmaceutical industry have been conducted (Calfee, 2001, Anonymous, 2006, McIntyre and Thiede, 2007). However, there is a dearth of information to determine the effectiveness of the medicine pricing policy in South Africa.

A study conducted by Pretorius (2011) sought to investigate whether the cost benefits of SEP has in fact filtered down in a consistent and predictable manner to a patient level in the private healthcare sector in South Africa. A mixed methodology approach was applied to 50 private sector pharmacies comparing the actual prices of predetermined drugs to ascertain if consistent pricing benefits were experienced by patients through the introduction of the SEP system. In addition to this, 22 semi-structured interviews were conducted with pharmacy managers from independent, group, and hospital pharmacies to determine the changes in the business environment following the introduction of the SEP. The study revealed that the implementation of the SEP did not result in consistent pricing benefits to the patient. Changes in the business environment of private retail pharmacies, following the introduction of SEP included: strategic changes, survival tactics and day to

day changes as well as restructuring. In essence the findings revealed that even though pricing regulations may initially produce a positive impact for all stakeholders involved, in the long term however, the true impact of interference in the market may be more harmful to all stakeholders.

These studies all indicate a need to monitor the impact of pharmaceutical policies, especially pricing policies at all times and therefore makes it imperative to investigate the effects of current pricing policies being implemented in South Africa.

CHAPTER 3

Paper 1

Preface

This article has been submitted to the "International Journal of Clinical Pharmacy."

Title:

An investigation into the relationship between the number of available generics within a therapeutic class and prices of medicines

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Running Title

An investigation of the relationship between the number of generic drugs

and pricing within a therapeutic class

Abstract

Background: The promotion of generic drug competition is a key policy strategy

in the containment of increasing drug costs in South Africa. One question

regarding generic drugs relates to the association between drug prices and the

number of available brands within a therapeutic class. This relationship is

particularly important in South Africa, where concurrent pricing legislation, is

being implemented without monitoring of the consequences on generic drug

competition and usage.

Objectives: To examine the relationship between generic drug price

competition and the number of available brands within cardiovascular class of

drugs; to compare South African prices with International Reference Prices and

to compare the consumption of generic drugs to originator drugs.

Setting: South African Private Health sector

Method: Data on private sector drug prices utilized in this study was sourced

from the South African Medicine Price Registry. The relationship between the

median proportional price and the number of brands was analyzed using

correlation analysis. International reference prices were obtained from the

Management Sciences for Health International Drug Price Indicator Guide

(2012 edition).

Main outcome measure: Drug prices and drug consumption

Results: Findings were inconsistent with those in other studies in that; with the

exception of diuretics, a weak correlation between originator drugs and

generics and between generic drugs themselves was observed. The observed

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median prices per strength of the originator generic were still higher than the most expensive generic version manufactured by any other company. The exception was telmisartan, for which no other generic drugs were available. Comparison of the price ratio between the originator drug, lowest priced generic and the International Reference Price values revealed that the originator drug prices had a Median Price Ratio of 20.99 (interquartile range 7.31 to 53.46) and the lowest priced generics had a Median Price Ratio of 4.28 (interquartile range 2.10 to 8.47).

Conclusion: The number of generic entrants is not necessarily a predictor of lower drug prices in South Africa. Single Exit Pricing as a single pricing policy initiative seems to hinder healthy competition in terms of prices of generic drugs. The results also suggest that the South African procurement system has not achieved the lowest prices for drugs when compared internationally.

Keywords

Medicine pricing, South Africa, Generic drugs, Single Exit Price, Price competition

Impact of Research Findings on Pharmacy/Clinical Practice

- Generic competition may be affected by other policies and requires careful monitoring within countries
- Pricing studies for medicines within therapeutic classes are required to determine what factors affect generic medicine adoption and use

Introduction

Access to therapeutic drugs form an integral part of any successful healthcare system. The high costs of therapeutic drugs, however, remain a barrier to accessibility and improved health to the majority of the South African population [1]. In light of the escalating costs of therapeutic drugs, the promotion of generic drug consumption could potentially be an important cost-saving mechanism for final consumers, insurance providers, and government.

In 2001 the South African Government amended the Medicine and Related Substances Act 101 of 1965 which allows substitution of branded drugs with generic drugs [2]. Questions arise as to the relationship between drug prices and the number of brands available in the market.

In addition to mandatory generic substitution, the amended South African Medicines and Related Substances Act in terms of section 18A banned "bonusing" (preventing pharmaceutical manufacturers from offering discounts and/or rebates to patients or healthcare providers) and with section 22G led to the formation of a "Pricing Committee" who were tasked with constructing "transparent pricing mechanisms" [3]. Prices of drugs were regulated by the Single Exit Price (SEP) legislation, i.e. drug manufacturers may only sell their products at one price to all their customers, regardless of the nature of the customer's order size and consumption levels.

Currently, both nationally and internationally, very little data is available with regard to generic price competition and the number of brands within a specific drug therapeutic class. This study focuses on the drugs used to treat cardiovascular disease (CVD). While HIV/AIDS remains the leading overall cause of mortality in sub-Saharan Africa, CVD is the second leading killer and is first amongst individuals over the age of 45 years [4].

Aim of the Study

The aim of this study was to examine the relationship between generic drug competition and the number of available brands within the cardiovascular drug class within the context of SEP legislation, and to compare South African drug prices with international drug prices.

Ethical Approval

Ethics approval for the study was obtained from the Humanities and Social Science Ethics Committee of the University of KwaZulu-Natal.

Method

The quantitative study design was a secondary data analysis based on data collected on the five classes of cardiovascular drugs listed in the abridged South African hypertension guideline 2011 [5]. These classes were aceinhibitors, beta blockers, calcium channel blockers, diuretics and angiotensin II antagonists. All drugs listed under each class were then sought from the South African Medicines Formulary (10th edition) [6]. Data on private sector prices of originator and generic drugs was sourced from the South African Medicine Price Registry which is an official website that communicates drug prices as approved by the Pharmaceutical Economic Evaluation Unit of the Department of Health [7]. The number of registered brands as at 10 June 2013 for each drug preparation was obtained from the registry. Drugs chosen under each medication were only included if there was a generic drug and originator price available. Combination preparations were excluded as they tend to alter the classification of the drug.

Originator or Brand pharmaceutical products were those initially registered by the innovator research-based pharmaceutical manufacturer on the basis of the documentation of its efficacy, safety and quality, whereas generic drugs were those usually intended to be interchangeable with the originator brand product, of the same strength and dosage form, registered after patent expiry or as licensed by the patent-holder. Due to the differences in pack sizes between originator and generic drugs, the SEP, inclusive of value added tax per standard unit (i.e. price per tablet or capsule) was computed.

The price differential between originator and generic drugs was calculated as the difference between the price per standard unit of the originator drug and the median price per standard unit of available generic drugs expressed as a percentage of the price per standard unit of the originator drug. The relationship between the median proportional price (in percentage) and the number of brands was analyzed using correlation analysis. It was hypothesized that the price differential would be larger when the number of generic drugs on the market increases.

Reference prices were obtained from the Management Sciences for Health (MSH) International Drug Price Indicator Guide (2012 edition) [8]. These constitute internationally recognized prices, based on current catalogues and price lists obtained from pharmaceutical suppliers, international development organizations, and government agencies. Price comparisons were made only for the originator drugs and the lowest price generics where the median buyer International Reference Price (IRP) values were available. Price summaries were expressed as ratios relative to a standard set of reference prices. The ratio indicates how many times more or less the comparator drug is than the IRP. For international price comparisons the exchange rate used was that of the first day of data collection from Google Finance (1 ZAR = 0.1017 US\$ on 30 July 2013). Price comparisons were made using a methodology developed by the World Health Organization and Health Action International for the WHO/HAI Project on Medicine Prices and Availability [9].

Consumption data on the use of generic and originator drugs were sourced from IMS Health. Data was captured as the single unit measure (per tablet or capsule) per drug strength from January 2010 - June 2013. All data was analyzed using Microsoft Excel version 2010.

Results

The findings relate to prices of the different available strengths of 23 originator medicines and their generic equivalents. Table 1 reflects the private sector prices of originator and generic drugs sourced from the South African Medicine Price Registry on the 10th June 2013.

Table 1: Private sector prices of originator and generic drugs sourced from The South African Medicine Price Registry (10 June 2013)

Drug Strength Dru	Drug Class	Median cost differentials	Minimum SEP (R)	Maximum SEP (R)	Number of Registered
		between Originator and			
		Generic versions (%)			brands
Captopril 12.5mg	ACE inhibitor	73.72	0.58	2.20	2
Captopril 25mg	ACE inhibitor	86.01	0.24	2.82	9
Enalapril10mg	ACE inhibitor	14.63	1.02	1.55	8
Enalapril 20mg	ACE inhibitor	19.44	1.35	2.84	7
Enalapril 5mg	ACE inhibitor	17.06	0.59	1.12	7
Perindopril 10mg	ACE inhibitor	39.30	4.19	6.90	2
Perindopril 2mg	ACE inhibitor	53.69	2.82	6.09	2
Perindopril 4mg	ACE inhibitor	42.79	1.32	4.56	15
Quinapril 10mg	ACE inhibitor	56.14	1.34	4.15	3
Quinapril 20mg	ACE inhibitor	60.30	2.03	5.85	4
Quinapril 40mg	ACE inhibitor	41.91	3.65	6.28	2
Quinapril 5mg	ACE inhibitor	52.83	1.86	3.94	2
Ramipril1.25mg	ACE inhibitor	51.07	1.96	4.78	5
Ramipril10mg	ACE inhibitor	50.04	1.44	10.11	6
Ramipril 2.5mg	ACE inhibitor	53.57	2.73	6.36	7
Ramipril 5mg	ACE inhibitor	52.45	4.13	9.39	7
Lisinopril10mg	ACE inhibitor	38.88	0.68	2.80	10
Lisinopril 20mg	ACE inhibitor	50.52	0.68	4.75	13
Lisinopril 5mg	ACE inhibitor	37.78	0.683	1.96	9
Nifedipine 20mg	CCB	90.89	0.63	9.20	6
Nifedipine 30mg	CCB	44.87	4.34	8.38	6
Nifedipine 60mg	CCB	41.33	6.41	11.60	5
Amlodipine 10mg	CCB	49.25	2.09	7.09	20
Amlodipine 5mg	CCB	56.80	1.18	5.05	22
Felodipine 5mg	CCB	57.49	3.65	8.58	2
Propranolol 10mg	BB	92.86	0.08	1.59	6
Propranolol 40mg	BB	95.18	0.14	3.99	7

Drug Strength	Drug Class	Median cost differentials	Minimum SEP (R)	Maximum SEP (R)	Number of Registered
		between Originator and			
		Generic versions (%)			brands
Atenolol 100mg	BB	88.28	0.79	10.01	8
Atenolol 25mg	BB	86.98	0.48	3.70	2
Atenolol 50mg	BB	88.66	0.52	6.16	9
Acebutolol 400mg	BB	26.50	6.86	9.33	2
Bisoprolol 10mg	BB	45.21	2.53	4.91	8
Bisoprolol 5mg	BB	48.39	1.5	3.10	8
Carvedilol1.25mg	BB	53.02	2.07	4.66	8
Carvedilol 25mg	BB	40.41	2.61	4.661	8
Carvedilol 6.25mg	BB	54.44	1.72	4.47	8
Indapamide 1.5mg	Diuretics	65.13	1.06	3.03	2
Indapamide 2.5mg	Diuretics	84.42	0.44	3.83	12
Furosemide 40mg	Diuretics (loop)	95.76	0.12	4.29	11
Spironolactone100mg	Diuretics (anti-aldosterone)	0.00	6.91	6.91	2
Spironolactone 25mg	Diuretics (anti-aldosterone)	2.18	1.07	1.12	3
Losartan 100mg	Angiotensin-receptor blocker	8.22	2.53	3.02	11
Losartan 50mg	Angiotensin-receptor blocker	19.09	1.35	3.02	15
Irbesartan 150mg	Angiotensin-receptor blocker	51.84	1.49	8.16	4
Irbesartan 300mg	Angiotensin-receptor blocker	50.81	1.49	7.99	4
Valsartan160mg	Angiotensin-receptor blocker	50.20	1.25	7.49	6
Valsartan 80mg	Angiotensin-receptor blocker	50.20	1.25	7.49	6
Telmisartan 40mg	Angiotensin-receptor blocker	41.89	4.84	8.33	2
Telmisartan 80mg	Angiotensin-receptor blocker	41.89	4.84	8.33	2
Verapamil 240mg	CCB (non-dihydropyridine)	24.36	3.80	5.89	5
Verapamil 40mg	CCB (non-dihydropyridine)	51.35	0.38	0.90	4
Diltiazem 240mg	CCB (non-dihydropyridine)	21.24	7.25	9.21	2

Note: ACE inhibitor- angiotensin converting enzyme inhibitor; BB - beta-blocker; ARB - angiotensin receptor blocker; CCB-calcium channel blocker

As indicated in Table 1, the largest therapeutic class is angiotensin converting enzyme (ACE) inhibitors with 6 drug products, followed by beta-blockers and angiotensin-receptor blockers (ARB) with 5 and 4 drug products respectively. The total number of brands for the different strengths of the 23 drug products is 346, of which ACE inhibitors are 120; beta-blockers are 74; calcium channel blockers (CCBs) are 61; ARBs are 50; diuretics are 30 and CCBs (non-dihydropyridine) are 11. Older generics drugs (e.g. captopril) that have been off-patent several years back have more registered brands than newer off-patent drugs (e.g. telmisartan).

Table 1 reveals considerable variability in the number of drugs under each class as well as in the number of registered brands for each drug preparation. A cursory look at Table 1 also reveals that drug products with higher number of registered brands generally have higher median cost differentials between originator and generic versions compared to drug preparations with lower number of registered brands. Competition theory (effect of the number of generic equivalents) was tested statistically between the price of the originator drug and generic drugs, between generic drugs and finally between the originator drug and generic version of the drug manufactured by the originator firm. The assumption was that increased generic entry would result in price competition and reduction in drug prices suggesting that the calculated price differential would be larger as number of generic drugs on the market increases [10]. Of the 346 branded drugs, the median cost differential was 50.4% (interguartile range 40.1% to 56.98%). Of all generic drugs identified, 75% were more than 40% cheaper than the branded version, which was the proposed government price at which generic drugs will be pegged at in South Africa.

Of the 23 cardiovascular drugs, four originator companies manufactured a generic version of the drug. Table 2 shows cost differentials between originator brand and generic versions manufactured by the originator for each of the available strengths of the drug. The median cost differential between originator brand and generic versions manufactured by the originator was 32.7% (interquartile range 22.96 to 41.89%). A weak correlation between the number

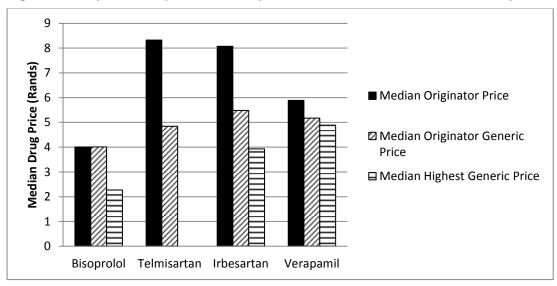
of generics and the size of the cost differential was apparent (correlation coefficient -0.48).

Table 2: Cost differentials associated with originator brand and originator generics

Drug Name	Number of registered brands identified	Cost differential between originator brand and originator generic drugs (%)
Bisoprolol 5mg	8	0
Bisoprolol 10mg	8	0
Telmisartan 40mg	2	41.89
Telmisartan 80mg	2	41.89
Irbesartan 150mg	4	32.81
Irbesartan 300mg	4	31.37
Verapamil 240mg SR	5	12.19

Figure 1 represents the median prices of the different available strengths for the 4 originator generic drugs in comparison to the originator drug, and the corresponding highest priced generic. With the exception of telmisartan for which there were no other generic drugs available (aside from the originator generic), the price of the originator generic was still higher than the most expensive generic version manufactured by any other company. There was no price difference between the originator brand and the originator generic version for bisoprolol.

Figure 1: Comparison of prices for Bisoprolol, Telmisartan, Irbesartan and Verapamil



In terms of consumption data for the 4 originator generics, it was revealed that bisoprolol (5mg and 10mg) and telmisartan (40mg and 80mg) produced similar trends as portrayed by verapamil (240mg SR) (Figure 2) where the lowest priced generic had the highest usage, followed by the originator generic and finally the originator. The exception was irbesartan (150mg and 300mg) where usage of the originator generic was higher than that of the originator and found to be higher than even the lowest priced generic (Figure 3).

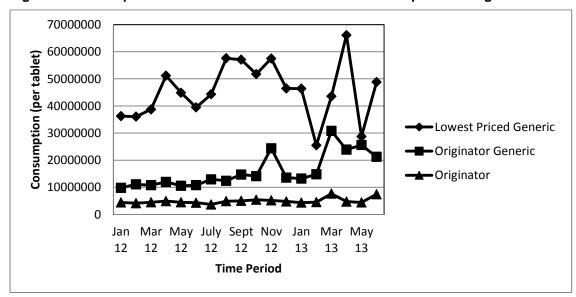


Figure 2: Consumption trends from Jan 2012-June2013 for verapamil 240mg SR tablets



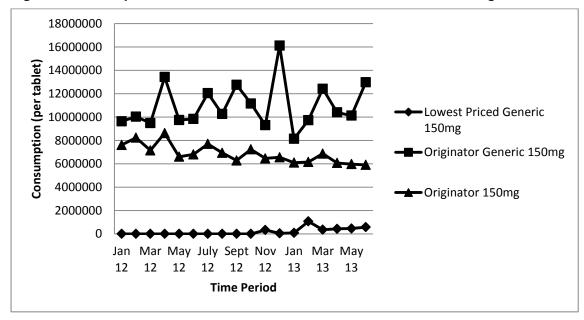


Table 3 presents the correlation coefficient for median cost differentials between originator and generic versions as well as the correlation coefficient for median cost differentials between generic drugs for each drug class. The negative value indicates an inverse relationship between the price differential between the originator drug and median generic drug prices. With the exception of diuretics, the remaining drug classes display a weak correlation between the number of generics and the size of the cost differential.

Table 3: Correlation coefficients results for each drug class

Drug Class	Correlation coefficient (Median cost differentials between originator and generic drugs)	Correlation coefficient (between generic drugs)
ACE inhibitor	-0.19	0.08
Calcium channel blocker	-0.12	0.04
Beta blocker	0.07	0.51
Diuretics	0.78	0.92
Angiotensin-receptor blocker	-0.77	-0.39
Calcium-channel blockers: non-dihydropyridine	0.28	1

Reference pricing allows for comparisons to be drawn between South Africa and international countries. Table 4 indicates that South Africa shows large variations between originator and generic prices and secondly that the lowest prices for medications are not always being attained.

Table4: Comparison of Median Price Ratios (MPR) with International Reference Price (IRP) values

	IRP Unit Price (US\$)	MPR* for Originator	MPR* for Lowest
	(Buyer Price)	Drug Unit Price (US\$)	Price
			Generic Unit Price
			(US\$)
Captopril 25mg	0.01	25.41	2.16
Enalapril 10mg	0.01	28.71	18.78
Enalapril 20mg	0.01	38.03	18.02
Perindopril 4mg	0.04	11.98	3.48
Nifedipine 20mg Sr	0.02	62.36	4.27
Amlodipine 10mg	0.01	55.93	16.48
Amlodipine 5mg	0.01	47.59	11.11
Propranolol 10mg	0.05	3.28	0.16
Propranolol 40mg	0.01	52.64	1.79
Atenolol 100mg	0.01	99.83	7.88
Atenolol 50mg	0.01	115.97	9.79
Carvedilol 12.5mg	0.05	9.64	4.29
Carvedilol 25mg	0.05	8.79	4.92
Carvedilol 6.25mg	0.09	4.94	1.90
Furosemide 40mg	0.01	65.10	1.82
Spironolactone 100mg	0.09	8.03	8.03
Spironolactone 25mg	0.03	3.36	3.22
Losartan 50mg	0.02	16.57	7.44
Verapamil 240mg SR	0.12	5.14	3.32
Verapamil 40mg	0.034	2.69	1.13

Note: *(MPR = Drug Unit Price/ IRP Unit Price)

Of the 20 drugs that were compared, none of originator drugs or lowest priced generics resulted in a ratio of 1.00 or less. None of the ratio values for originator brand and lowest-priced generics were close to each other, which indicates that the procurement system is not obtaining very competitive prices for drugs. The originator drug prices had a median MPR of 20.99 (interquartile range 7.31 to 53.46) and the lowest priced generics had a median MPR of 4.28 (interquartile range 2.10 to 8.47)

Discussion

Generic drug entry stimulates competition among the various brands of the off-patent product available in the market and assists in reducing the overall price of the drug product [11]. This phenomenon however is only likely if there are a sufficient number of generic products in the market [12] [13]. Several international studies have sought to characterize the relationship between the number of brands of a product and its effect on drug pricing. An American study by Wiggens and Maness, explored price variation in anti-infective drugs and yielded results differing from previous studies conducted on several random drugs [14]. They showed that pricing variation may be sensitive to the class of generic drugs. Their analysis further showed that increases in the number of competitors significantly reduced prices. These findings are consistent for unregulated markets without price caps and are consistent with findings of an American study by Brenham and Reiss 15].

Fatokun et al conducted a study in Malaysia examining the relationship between the number of multisource drugs and their proportional prices [10]. The results confirmed the price-lowering effect of generic competition as shown by the decrease in the mean proportional price as the number of brands of the product increases. This generic price lowering effect was, however, not observable across all therapeutic classes.

Adriaen et al in researching the determinants of pricing strategies of originator and generic drugs following patent expiry in Belgium revealed that pricing strategies of originator and generic drugs are dependent on the therapeutic class, with the price differential between originator and generic drugs being higher for cardiovascular classes of drugs [16]. Pricing strategies were further influenced by regulatory aspects, such as successive reductions in reference prices and prescription status of drugs; by market incentives in the form of price competition between generic drugs

and competition between originator and generic drugs and by market power of the manufacturer of the originator drug.

The results from our analysis do not indicate that there is a price-lowering effect for CVD drugs with increased generic competition. When testing the competition hypothesis between originator drugs and generics and between generics drugs themselves, the correlation was found to be weak in both instances, with the exception of diuretics. There is a wide variation between the price of the least expensive brands and the most expensive brands. One explanation for this observation is that the originator companies do not engage in price competition with generic brands [17]. This is supported by the second finding. When the price of the generic drug manufactured by an originator company was compared to the median generic drug price, these drugs were consistently found to be higher, suggesting that originator companies may set the price ceiling for other generic products. In this study the originator generics showed greater consumption than the originator drug, but less than the lowest price generic. In the case of irbesartan the originator generic displayed greater use than even the lowest priced generic. The possible reasoning for this could be that the originator generic was introduced before any other generic into the South African market. Thus the increased use could potentially be linked to product loyalty.

A study conducted in Gauteng Province in South Africa (2004) revealed that the majority of drug prices did not compare well with the international reference price [18]. Similarly our findings revealed high prices for drugs when compared with buyer international prices ranging from 2.69 times greater to a staggering 115.97 times greater for originator drugs. These results indicate that current pricing policies are not optimal in South Africa even though there is greater consumption of generic drugs for the five classes of cardiovascular drugs in this study.

Limitations

Price comparisons to international prices would have benefited if IRP values for all drugs in the study were available. The second limitation involves the reliability of median price ratios, which may be skewed since the international reference prices are based on limited data. Due to the lack of availability of supplier prices, buyer prices were used as a proxy thus MPR results could potentially be skewed by a particularly high or low international reference price.

Conclusion

While the pro-generic legislations may seek to increase accessibility to medicines and improved healthcare, the implementation of SEP may result in long term unintended effects by interfering in the normal market processes. Alternative price regulations may promote active competition among generic drug producers thus avoiding the observed behavior of drug prices clumping together.

The differences between the high South African medicine prices and international prices warrant the implementation of future policy evaluations as well as possible pricing interventions such as benchmarking and reference pricing in an effort to lower drug prices. More work is required to identify the determinants of the price differentials between originator and generic drugs in South Africa, particularly in light of the newly proposed healthcare restructuring.

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Conflict of interests: None

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CHAPTER 4

SUMMARISED RECOMMENDATIONS AND CONCLUSIONS

Decision makers in South Africa, in an effort to economize on scarce resources, have implemented aggressive generic policies through mandatory drug substitution. However the variability with which generic medicines diffuse in South Africa and the complexity of generic policies pose a series of questions, many of which still remain unaccounted for. For instance, what are the determinants affecting generic drug competition, as well as what are the barriers to healthy competition posed by current health and pharmaceutical regulatory policies in South Africa? Secondly, how are generic prices influenced by the entry of new competitors and are prices of branded products sensitive to competition from generics and is this phenomenon specific to drug classes and treatment algorithms? Finally what is the impact of (pricing and reimbursement) regulation, market structure and product differentiation on generic competition, prices and market share?

The study results reveal that the number of generic entrants is not necessarily a predictor of lower drug prices in South Africa; hence the full benefit of generic drug competition may actually be negated due to an unintended consequence of SEP implementation. The irregularities between the high South African medicine prices and international prices warrant the implementation of future pharmaco-economic evaluations as well as possible interventions such as benchmarking and reference pricing in an effort to lower medicine prices. Further work is therefore required to identify the determinants of the price differentials between originator and generic medicines in South Africa, particularly in light of the newly proposed healthcare restructuring.

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APPENDICES

Data Collection: Private sector prices of originator and generic drugs sourced from the RSA Medicine Price Registry (10 June 2013)

Captopril

Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originator / Generic	SEP(US\$)	Unit Price (US\$)	IRP(US\$)Unit Price
Bristol Meyers Squibb	Capoten	12.5mg	TAB	90	198.27	2.20	Originator	20.16	0.22	Not Avail
Sandoz Sa (Pty) Ltd	Capto-Hexal 12.5	12.5mg	TAB	100	57.89	0.58	Generic	5.89	0.06	Not Avail
Bristol Meyers Squibb	Capoten	25mg	TAB	60	169.42	2.82	Originator	17.23	0.29	1.01
Pharmacare Limited, Woodmead	Capace	25mg	TAB	60	70.00	1.17	Generic	7.12	0.12	1.01
Pharmacare Limited, Woodmead	Zapto	25mg	TAB	60	23.82	0.40	Generic	2.42	0.04	1.01
Sandoz Sa (Pty) Ltd	Captohexal 25	25mg	TAB	60	30.88	0.51	Generic	3.14	0.05	1.01
Sandoz Sa (Pty) Ltd	Sandoz Captopril 25	25mg	TAB	60	23.59	0.39	Generic	2.40	0.04	1.01
Adcock Ingram Limited	Adco Captomax 25	25mg	TAB	60	16.86	0.28	Generic	1.71	0.03	1.01
Biotech Laboratories (Pty) Ltd	Bio-Captopril 25	25mg	TAB	60	16.67	0.28	Generic	1.69	0.03	1.01
Mylan (Pty) Ltd	Mylan Captopril 25	25mg	TAB	60	14.33	0.24	Generic	1.46	0.02	1.01
Pharmacare Limited, Woodmead	Capace	25mg	TAB	60	70.00	1.17	Generic	7.12	0.12	1.01
Pharmacare Limited, Woodmead	Zapto	50mg	TAB	60	46.81	0.78	Generic	4.76	0.08	Not Avail
Sandoz-Hexal (a Novartis company)	CaptoHexal	50mg	TAB	60	57.89	0.96	Generic	5.89	0.10	Not Avail
Adcock Ingram Limited	Adco Captomax 50	50mg	TAB	60	19.45	0.32	Generic	1.98	0.03	Not Avail
Biotech Laboratories (Pty) Ltd	Bio Captopril 50 mg	50mg	TAB	60	25.47	0.42	Generic	2.59	0.04	Not Avail
Mylan (Pty) Ltd	Mylan Captopril 50	50mg	TAB	60	20.72	0.35	Generic	2.11	0.04	Not Avail

Enalapril

Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originator/ Generic	SEP(US\$)	Unit Price (US\$)	IRP(US\$)Unit Price
MSD (Pty) Ltd	Renitec 10	10mg	TAB	28	43.47	1.55	Originator	4.42	0.16	0.01
Sandoz Sa (Pty) Ltd	Hr-Enalapril Mealate 10	10mg	TAB	30	39.76	1.33	Generic	4.04	0.13	0.01
Thebe Medicare (Pty) Ltd	Envas 10	10mg	TAB	30	36.03	1.20	Generic	3.66	0.12	0.01
Cipla Medpro (Pty) Ltd	Ciplatec 10	10mg	TAB	30	41.37	1.38	Generic	4.21	0.14	0.01
Pharma Dynamics (Pty) Ltd	Enap 10 Mg	10mg	TAB	30	39.88	1.33	Generic	4.06	0.14	0.01
Pharmacare Limited, Woodmead	Pharmapress	10mg	TAB	30	41.68	1.39	Generic	4.24	0.14	0.01
Ranbaxy (S.A.) (Pty) Ltd	Alapren 10 Tablets	10mg	TAB	28	28.45	1.02	Generic	2.89	0.10	0.01
Ranbaxy (S.A.)(Pty) Ltd	Enalapril Unicorn 10	10mg	TAB	28	34.20	1.22	Generic	3.48	0.12	0.01
MSD (Pty) Ltd	Renitec 2 5	2.5mg	TAB	14	20.15	1.44	Originator	2.05	0.15	Not Avail
MSD (Pty) Ltd	Renitec 20	20mg	TAB	28	79.57	2.84	Originator	8.09	0.29	0.01
Sandoz Sa (Pty) Ltd	Hr-Enalapril Maleate 20	20mg	TAB	30	67.34	2.24	Generic	6.85	0.23	0.01
Pharma Dynamics (Pty) Ltd	Enap 20 Mg	20mg	TAB	30	70.03	2.33	Generic	7.12	0.24	0.01
Pharmacare Limited, Woodmead	Pharmapress	20mg	TAB	30	70.66	2.36	Generic	7.19	0.24	0.01
Ranbaxy (S.A.) (Pty) Ltd	Alapren 20 Tablets	20mg	TAB	28	37.71	1.35	Generic	3.84	0.14	0.01
Ranbaxy (S.A.)(Pty) Ltd	Enalapril Unicorn 20	20mg	TAB	28	54.72	1.95	Generic	5.57	0.20	0.01
Sandoz Sa (Pty) Ltd	Ciplatec	20mg	TAB	30	70.13	2.34	Generic	7.13	0.24	0.01
MSD (Pty) Ltd	Renitec 5	5mg	TAB	28	31.39	1.12	Originator	3.19	0.11	Not Avail
Sandoz Sa (Pty) Ltd	Hr-Enalapril Mealate 5	5mg	TAB	30	28.35	0.95	Generic	2.88	0.10	Not Avail
Thebe Medicare (Pty) Ltd	Envas 5	5mg	TAB	30	24.51	0.82	Generic	2.49	0.08	Not Avail
Cipla Medpro (Pty) Ltd	Ciplatec 5.0	5mg	TAB	30	28.02	0.93	Generic	2.85	0.09	Not Avail
Pharma Dynamics (Pty) Ltd	Enap 5 Mg	5mg	TAB	30	27.88	0.93	Generic	2.84	0.10	Not Avail
Pharmacare Limited, Woodmead	Pharmapress	5mg	TAB	30	27.91	0.93	Generic	2.84	0.09	Not Avail
Ranbaxy (S.A.) (Pty) Ltd	Alapren 5 Tablets	5mg	TAB	28	16.54	0.59	Generic	1.68	0.06	Not Avail

Cilazapril

Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originator/ Generic	SEP(US\$)	Unit Price (US\$)	IRP(US\$)Unit Price
Roche Products (Pty) Ltd	Inhibace	5mg	TAB	28	156.63		Originator	15.93	0.10	Not Avail

Perindopril

Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originator/ Generic	SEP(U\$)	Unit Price (US\$)	IRP(US\$)Unit Price
Servier Laboratories SA (Pty) Ltd	Coversyl 10 mg	10mg	TAB	30	206.97	6.90	Originator	21.05	0.70	Not Avail
Biogaran South Africa (Pty) Ltd	Prexum 10 mg	10mg	TAB	30	125.63	4.19	Generic	12.78	0.42	Not Avail
Servier Laboratories SA (Pty) Ltd	Preterax	2mg	TAB	30	182.69	6.09	Originator	18.58	0.62	Not Avail
Specpharm (Pty) Ltd	Spec-Perindopril Plus 2	2mg	TAB	30	84.70	2.82	Generic	8.61	0.29	Not Avail
Servier Laboratories SA (Pty) Ltd	Coversyl 4 mg	4mg	TAB	30	136.75	4.56	Originator	13.91	0.46	0.04
Aurobindo Pharma (Pty) Ltd	Auro Perindopril 4 mg	4mg	TAB	30	75.96	2.53	Generic	7.73	0.27	0.04
Aurobindo Pharma (Pty) Ltd	Bindace 4 mg	4mg	TAB	30	76.18	2.54	Generic	7.75	0.26	0.04
Biogaran South Africa (Pty) Ltd	Prexum	4mg	TAB	30	97.64	3.25	Generic	9.93	0.33	0.04
Biogaran South Africa (Pty) Ltd	Vectoryl 4 mg	4mg	TAB	30	97.26	3.24	Generic	9.89	0.33	0.04
Biogaran South Africa (Pty) Ltd	Perindopril Unicorn 4	4mg	TAB	30	76.59	2.55	Generic	7.79	0.26	0.04
Cipla Life Sciences (Pty) Ltd	Cipla-Perindopril 4 Mg	4mg	TAB	30	118.97	3.97	Generic	12.10	0.40	0.04
Cipla Medpro (Pty)Ltd	Ciplasyl 4	4mg	TAB	30	76.60	2.55	Generic	7.79	0.26	0.04
Glenmark Pharmaceuticals South Africa (Pty) Ltd	Acti-Prex	4mg	TABS	30	74.74	2.49	Generic	7.60	0.25	0.04
Pharma Dynamics (Pty) Ltd	Pearinda 4	4mg	TAB	30	76.64	2.55	Generic	7.79	0.26	0.04
Ranbaxy (S.A.) (Pty) Ltd	Ran-Perindopril 4	4mg	TAB	30	37.49	1.32	Generic	3.81	0.13	0.04
Specpharm (Pty) Ltd	Spec-Perindopril 4	4mg	TAB	30	80.00	2.66	Generic	8.14	0.27	0.04
Specpharm (Pty) Ltd	Spec-Perindopril Plus 4	4mg	TAB	30	121.00	4.03	Generic	12.31	0.41	0.04
Thebe Medicare (Pty) Ltd	Acesyl 4 Mg	4mg	TAB	30	91.93	3.06	Generic	9.35	0.31	0.04
Zydus Healthcare S.A. (Pty) Ltd	Zydus Perindopril 4 mg	4mg	TAB	30	88.92	2.96	Generic	9.04	0.30	0.04
Aurobindo Pharma (Pty) Ltd	Auro Perindopril 8 mg	8mg	TAB	30	115.32	3.84	Generic	11.73	0.39	Not Avail
Aurobindo Pharma (Pty) Ltd	Bindace 8 mg	8mg	TAB	30	116.38	3.88	Generic	11.84	0.39	Not Avail
Biogaran South Africa (Pty) Ltd	Vectoryl 8Mg	8mg	TAB	30	110.10	3.67	Generic	11.20	0.37	Not Avail
Biogaran South Africa (Pty) Ltd	Perindopril Unicorn 8	8mg	TAB	30	115.79	3.86	Generic	11.78	0.39	Not Avail
Cipla Life Sciences (Pty) Ltd	Cipla-Perindopril 8 Mg	8mg	TAB	30	118.98	3.97	Generic	12.10	0.40	Not Avail
Cipla Medpro (Pty) Ltd	Ciplasyl 8	8mg	TAB	30	109.50	3.65	Generic	11.14	0.37	Not Avail
Pharma Dynamics (Pty) Ltd	Pearinda 8	8mg	TAB	30	109.50	3.65	Generic	11.14	0.37	Not Avail
Specpharm (Pty) Ltd	Spec-Perindopril 8	8mg	TAB	30	115.00	3.83	Generic	11.70	0.39	Not Avail

Quinapril

Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originator/ Generic	SEP(US\$)	Unit Price (US\$)	IRP(US\$)Unit Price
Pfizer Laboratories (Pty) Ltd	Accupril 10Mg	10mg	TAB	28	116.21	4.15	Originator	11.82	0.42	Not Avail
Mylan (Pty) Ltd	Quinagen	10mg	TAB	30	69.12	2.30	Generic	7.03	0.23	Not Avail
Pharmacia South Africa (Pty) Ltd	Accumax 10 mg	10mg	TAB	30	40.21	1.34	Generic	4.09	0.14	Not Avail
Pfizer Laboratories (Pty) Ltd	Accupril 20Mg	20mg	TAB	28	163.78	5.85	Originator	16.66	0.59	Not Avail
Mylan (Pty) Ltd	Quinagen	20mg	TAB	30	104.37	3.48	Generic	10.61	0.35	Not Avail
Pharmacare Limited, Woodmead	Quinaspen	20mg	TAB	30	69.67	2.32	Generic	7.09	0.24	Not Avail
Pharmacia South Africa (Pty) Ltd	Accumax 20 mg	20mg	TAB	30	60.98	2.03	Generic	6.20	0.21	Not Avail
Pfizer Laboratories (Pty) Ltd	Accupril 40Mg	40mg	TAB	28	175.93	6.28	Originator	17.89	0.64	Not Avail
Mylan Pty Ltd	Quinagen	40mg	TAB	30	109.45	3.65	Generic	11.13	0.37	Not Avail
Pfizer Laboratories (Pty) Ltd	Accupril 5Mg	5mg	TAB	28	110.41	3.94	Originator	11.23	0.40	Not Avail
Mylan (Pty) Ltd	Quinagen	5mg	TAB	30	55.89	1.86	Generic	5.68	0.19	Not Avail

Lisinopril

Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originator/ Generic	SEP(US\$)	Unit Price (US\$)	IRP(US\$)Unit Price
Astrazeneca Pharmaceuticals (Pty) Ltd- Sunninghill	Zestril 10	10mg	TAB	30	83.90	2.80	Originator	8.53	0.28	Not avail
Ranbaxy (SA) (Pty) Ltd	Sinopren 10	10mg	TAB	30	20.50	0.68	Generic	2.09	0.07	Not avail
Ranbaxy(SA)(Pty)Ltd	Simayla Lisinopril 10	10mg	TAB	30	49.54	1.65	Generic	5.04	0.167	Not avail
Sandoz Sa (Pty) Ltd	Hexal-Lisinopril 10	10mg	TAB	30	52.11	1.74	Generic	5.30	0.18	Not avail
Xixia Pharmaceuticals (Pty) Ltd	Zeprosil 10Mg	10mg	TAB	30	41.10	1.37	Generic	4.18	0.14	Not avail
Adcock Ingram Limited	Adco-Zetomax 10 mg	10mg	TAB	30	52.14	1.74	Generic	5.30	0.18	Not avail
Aurobindo Pharma (Pty) Ltd	Lisinozide 10 mg	10mg	TAB	30	53.07	1.77	Generic	5.40	0.18	Not avail
Aurobindo Pharma (Pty) Ltd	Lizro 10 mg	10mg	TAB	30	52.11	1.74	Generic	5.30	0.18	Not avail
Austell Laboratories (Pty) Ltd	Austell-Lisinopril 10 mg	10mg	TAB	30	20.50	0.68	Generic	2.09	0.07	Not avail
Cipla Medpro (Pty) Ltd	Cipla Lisinopril 10	10mg	TAB	30	51.28	1.71	Generic	5.22	0.17	Not avail
Astrazeneca Pharmaceuticals (Pty) Ltd- Sunninghill	Zestril 20	20mg	TAB	30	142.63	4.75	Originator	14.51	0.48	Not avail
Ranbaxy (SA) (Pty) Ltd	Sinopren 20 Tab	20mg	TAB	30	20.50	0.68	Generic	2.09	0.07	Not avail
Ranbaxy(SA)(Pty)Ltd	Simayla Lisinopril 20	20mg	TAB	30	70.65	2.36	Generic	7.19	0.24	Not avail
Sandoz Sa (Pty) Ltd	Hexal-Lisinopril 20	20mg	TAB	30	82.98	2.77	Generic	8.44	0.28	Not avail
Sandoz Sa (Pty) Ltd	Zemax	20mg	TAB	30	81.12	2.70	Generic	8.25	0.28	Not avail
Xixia Pharmaceuticals (Pty) Ltd	Zeprosil 20Mg	20mg	TAB	30	65.47	2.18	Generic	6.66	0.22	Not avail
Adcock Ingram Limited	Adco-Zetomax 20 Mg	20mg	TAB	30	72.70	2.42	Generic	7.39	0.26	Not avail
Aurobindo Pharma (Pty) Ltd	Lisinozide 20 mg	20mg	TAB	30	86.84	2.89	Generic	8.83	0.29	Not avail
Aurobindo Pharma (Pty) Ltd	Lizro 20 mg	20mg	TAB	30	71.28	2.38	Generic	7.25	0.24	Not avail
Austell Laboratories (Pty) Ltd	Austell Lisinopril	20mg	TAB	30	66.24	2.21	Generic	6.74	0.22	Not avail
Austell Laboratories (Pty) Ltd	Austell-Lisinopril 20 mg	20mg	TAB	30	20.50	0.68	Generic	2.09	0.07	Not avail
Be-Tabs Pharmaceuticals (Pty) Ltd	Lysin 20	20mg	TAB	30	65.65	2.19	Generic	6.68	0.22	Not avail
Camox Pharmaceuticals (Pty) Ltd	Apex-Lisinopril 20 mg	20mg	TAB	30	70.35	2.35	Generic	7.15	0.24	Not avail
Astrazeneca Pharmaceuticals (Pty) Ltd- Sunninghill	Zestril 5	5mg	TAB	30	58.73	1.96	Originator	5.97	0.20	Not avail
Ranbaxy (SA) (Pty) Ltd	Sinopren 5 Tablets	5mg	TAB	30	20.50	0.68	Generic	2.09	0.07	Not avail
Sandoz Sa (Pty) Ltd	Hexal-Lisinopril 5	5mg	TAB	30	38.59	1.29	Generic	3.93	0.13	Not avail
Xixia Pharmaceuticals (Pty) Ltd	Zeprosil 5Mg	5mg	TAB	30	31.86	1.06	Generic	3.24	0.11	Not avail
Zydus Healthcare SA (Pty) Ltd	Simayla Lisinopril	5mg	TAB	30	33.80	1.13	Generic	3.44	0.11	Not avail
Adcock Ingram Limited	Adco-Zetomax 5 Mg	5mg	TAB	30	38.64	1.29	Generic	3.93	0.13	Not avail
Aurobindo Pharma (Pty) Ltd	Lizro 5 mg	5mg	TAB	30	38.50	1.28	Generic	3.92	0.17	Not avail

Lisinopril

Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originator/ Generic	SEP(US\$)	Unit Price (US\$)	IRP(US\$)Unit Price
Be-Tabs Pharmaceuticals (Pty) Ltd	Lysin 5	5mg	TAB	30	37.27	1.24	Generic	3.79	0.13	Not avail
Cipla Medpro (Pty) Ltd	Cipla Lisinopril 5	5mg	TAB	30	35.82	1.19	Generic	3.64	0.12	Not avail

Nifedipine

Miledipine										
Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originator/ Generic	SEP(US\$)	Unit Price (US\$)	IRP(US\$)Unit Price
Biotech Laboratories (Pty) Ltd	Bio-Nifedipine 10	10mg	CAP	250	61.20	0.24	Generic	6.22	0.02	Not Avail
Pharmacare Limited, Woodmead	Cardifen	10mg	CAP	100	105.78	1.06	Generic	10.76	0.11	Not Avail
Pharmacare Limited, Woodmead	Cardifen	10mg	CAP	250	227.86	0.91	Generic	23.17	0.09	Not Avail
Sandoz Sa (Pty) Ltd	Rolab-Nifedipine	10mg	CAP	100	124.74	1.25	Generic	12.69	0.13	Not Avail
Sandoz Sa (Pty) Ltd	Nifedalat 10Mg	10mg	CAP	100	74.48	0.74	Generic	7.57	0.08	Not Avail
Bayer (Pty) Ltd	Adalat Retard 20Mg	20mg	TAB	60	551.89	9.20	Originator	56.13	0.93	0.02
Bayer (Pty) Ltd	Adalat Retard 20Mg	20mg	TAB	28	189.16	6.76	Originator	19.24	0.69	0.02
Adcock Ingram Limited	Adco Vascard 20 Sr	20mg	CAP	60	37.82	0.63	Generic	3.84	0.06	0.02
Cipla Life Sciences (Pty) Ltd	Cipalat Retard	20mg	TAB	60	50.64	0.84	Generic	5.15	0.10	0.02
Sandoz Sa (Pty) Ltd	Nifedalat 20 Sr	20mg	SRT	60	50.25	0.84	Generic	5.11	0.09	0.02
Adcock Ingram Limited	Adco Vascard 20 Sr	20mg	CAP	60	37.82	0.63	Generic	3.85	0.06	0.02
Bayer (Pty) Ltd	Adalat XI Tabs 30Mg	30mg	TAB	28	234.58	8.38	Originator	23.86	0.85	Not Avail
Adcock Ingram Limited	Adco-Vascard 30 Sr	30mg	SRC	30	169.59	5.65	Originator	17.253	0.57	Not Avail
Biotech Laboratories (Pty) Ltd	Bio Nifedipine XL 30	30mg	TAB	30	138.55	4.62	Generic	14.10	0.47	Not Avail
Pharma Dynamics (Pty) Ltd	Fedaloc 30Mg Sr	30mg	TAB	30	146.59	4.89	Generic	14.91	0.50	Not Avail
Specpharm (Pty) Ltd	Macorel 30 Sr	30mg	TAB	30	138.52	4.62	Generic	14.09	0.47	Not Avail
Specpharm (Pty) Ltd	Spec Nifedipine 30 Sr	30mg	TAB	30	130.23	4.34	Generic	13.24	0.44	Not Avail
Biotech Laboratories (Pty) Ltd	Bio-Nifedipine 5	5mg	CAP	100	43.48	0.43	Generic	4.42	0.04	Not Avail
Pharmacare Limited, Woodmead	Cardifen	5mg	CAP	100	119.00	1.19	Generic	12.10	0.12	Not Avail
Bayer (Pty) Ltd	Adalat XI Tabs 60Mg	60mg	TAB	28	324.83	11.60	Originator	33.04	1.18	Not Avail
Biotech Laboratories (Pty) Ltd	Bio Nifedipine XL 60	60mg	TAB	30	204.06	6.80	Generic	20.75	0.69	Not Avail
Pharma Dynamics (Pty) Ltd	Fedaloc 60Mg Sr	60mg	TAB	30	215.90	7.20	Generic	21.96	0.73	Not Avail
Specpharm (Pty) Ltd	Macorel 60 Sr	60mg	TAB	30	204.32	6.81	Generic	20.78	0.69	Not Avail
Specpharm (Pty) Ltd	Spec Nifedipine 60 Sr	60mg	TAB	30	192.53	6.42	Generic	19.58	0.65	Not Avail
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Amlodipine

Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originator/ Generic	SEP(US\$)	Unit Price (US\$)	IRP(US\$)Unit Price
Pfizer Laboratories (Pty) Ltd	Norvasc Tablets 10Mg	10mg	TAB	30	212.82	7.09	Originator	21.64	0.72	0.01
Be-Tabs Pharmaceuticals (Pty) Ltd	Calbloc	10mg	TAB	30	96.44	3.21	Generic	9.818	0.32	0.01
Brimpharm Sa (Pty) Ltd	Amlosyn 10 Mg	10mg	TAB	30	159.65	5.32	Generic	16.23	0.544	0.01
Cipla Medpro (Pty) Ltd	Ciplavasc 10	10mg	TAB	30	111.10	3.70	Generic	11.30	0.38	0.01
Dr Reddy's Laboratories (Pty) Ltd	Amlate 10	10mg	TAB	30	109.97	3.67	Generic	11.18	0.37	0.01
Dr Reddy's Laboratories (Pty) Ltd	Stamlo 10	10mg	TAB	30	111.93	3.73	Generic	11.38	0.38	0.01
Gulf Drug Company (Pty) Ltd	Gulf Amlodipine 10	10mg	TAB	30	62.70	2.09	Generic	6.38	0.21	0.01
Pharma Dynamics (Pty) Ltd	Amloc 10 Mg	10mg	TAB	30	108.31	3.61	Generic	11.023	0.37	0.01
Pharma Dynamics (Pty) Ltd	Pharma Dynamics Amlodipine Besylate 10	10mg	TAB	30	92.40	3.08	Generic	9.39	0.31	0.01
Pharmacare Limited, Woodmead	Almadin Tabs 10Mg 3	10mg	TAB	30	95.64	3.19	Generic	9.73	0.32	0.01
Pharmacia South Africa (Pty) Ltd	Lomanor 10 mg	10mg	TAB	30	97.76	3.26	Generic	9.94	0.34	0.01
Sandoz Sa (Pty) Ltd	Sandoz-Amlodipine 10	10mg	TAB	30	109.45	3.65	Generic	11.13	0.37	0.01
Sanofi-Aventis Sa (Pty) Ltd	Amlodipine-Winthrop	10mg	TAB	30	109.34	3.64	Generic	11.12	0.37	0.01
Unichem SA (Pty) Ltd	Pendine 10	10mg	TAB	30	92.26	3.07	Generic	9.38	0.31	0.01
Zydus Healthcare S.A (Pty) Ltd	Amlodac 10 Tablets	10mg	TAB	30	108.06	3.60	Generic	10.99	0.37	0.01
Accord-Healthcare (Pty) Ltd	Amtas 10	10mg	TAB	30	111.74	3.72	Generic	11.36	0.38	0.01
Akacia Healthcare (Pty) Ltd	Norcard 10	10mg	TAB	30	108.06	3.60	Generic	10.99	0.37	0.01
Aurobindo Pharma (Pty) Ltd	Keysal 10 mg	10mg	TAB	30	102.03	3.40	Generic	10.38	0.35	0.01
Aurobindo Pharma (Pty) Ltd	Aprate 10 mg	10mg	TAB	30	99.85	3.33	Generic	10.15	0.34	0.01
Austell Laboratories (Pty) Ltd	Austell-Amlodipine	10mg	TAB	30	107.74	3.59	Generic	10.96	0.37	0.01
Pfizer Laboratories (Pty) Ltd	Norvasc Tablets 5Mg	5mg	TAB	30	151.61	5.05	Originator	15.42	0.51	0.01
Be-Tabs Pharmaceuticals (Pty) Ltd	Calbloc	5mg	TAB	30	60.33	2.01	Generic	6.14	0.20	0.01
Brimpharm Sa (Pty) Ltd	Amlosyn 5,0 Mg	5mg	TAB	30	113.72	3.79	Generic	11.57	0.39	0.01
Cipla Medpro (Pty) Ltd	Ciplavasc 5	5mg	TAB	30	71.32	2.38	Generic	7.25	0.24	0.01
Dezzo Trading 392 (Pty) Limited T/A Indo Pharma	Indo Amlodipine-5	5mg	TAB	30	55.44	1.85	Generic	5.64	0.19	0.01
Dr Reddy's Laboratories (Pty) Ltd	Amlate 5	5mg	TAB	30	67.40	2.25	Generic	6.85	0.23	0.01
Dr Reddy's Laboratories (Pty) Ltd	Stamlo 5	5mg	TAB	30	71.84	2.39	Generic	7.31	0.24	0.01
Gulf Drug Company (Pty) Ltd	Gulf Amlodipine 5	5mg	TAB	30	35.34	1.18	Generic	3.59	0.12	0.01

Amlodipine

Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originator/ Generic	SEP(US\$)	Unit Price (US\$)	IRP(US\$)Unit Price
Pharma Dynamics (Pty) Ltd	Amloc 5 Mg	5mg	TAB	30	77.17	2.57	Generic	7.84	0.26	0.01
Pharma Dynamics (Pty) Ltd	Pharma Dynamics Amlodipine Besylate 5	5mg	TAB	30	61.50	2.05	Generic	6.25	0.21	0.01
Pharmacare Limited, Woodmead	Almadin Tabs 5Mg	5mg	TAB	30	61.43	2.05	Generic	6.25	0.21	0.01
Pharmacia South Africa (Pty) Ltd	Lomanor 5 mg	5mg	TAB	30	63.80	2.13	Generic	6.49	0.22	0.01
Pharmascript Pharmaceuticals Ltd	Klodip-5	5mg	TAB	30	63.78	2.13	Generic	6.49	0.22	0.01
Sandoz Sa (Pty) Ltd	Sandoz-Amlodipine 5	5mg	TAB	30	70.21	2.34	Generic	7.14	0.241	0.01
Sanofi-Aventis Sa (Pty) Ltd	Amlodipine-Winthrop	5mg	TAB	30	77.90	2.60	Generic	7.92	0.26	0.01
Thebe Medicare (Pty) Ltd	Norcard 5	5mg	TAB	30	63.33	2.11	Generic	6.44	0.21	0.01
Unichem SA (Pty) Ltd	Pendine 5	5mg	TAB	30	58.22	1.94	Generic	5.92	0.19	0.01
Zydus Healthcare S.A (Pty) Ltd	Amlodac 5 Tablets	5mg	TAB	30	67.00	2.23	Generic	6.81	0.23	0.01
Accord-Healthcare (Pty) Ltd	Amtas 5	5mg	TAB	30	71.71	2.39	Generic	7.29	0.24	0.01
Aurobindo Pharma (Pty) Ltd	Keysal 5 mg	5mg	TAB	30	65.49	2.18	Generic	6.66	0.22	0.01
Aurobindo Pharma (Pty) Ltd	Aprate 5 mg	5mg	TAB	30	59.98	2.00	Generic	6.10	0.20	0.010
Austell Laboratories (Pty) Ltd	Austell-Amlodipine 5mg	5mg	TAB	30	67.66	2.26	Generic	6.88	0.23	0.01

Felodipine

Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originator/ Generic	SEP(US\$)	Unit Price (US\$)	IRP(US\$)Unit Price
Astrazeneca Pharmaceuticals (Pty) Ltd- Sunninghill	Plendil	5mg	SRT	30	257.44	8.58	Originator	26.18	0.87	Not Avail
Sandoz SA (Pty) Ltd	Felodipine-Hexal 5	5mg	SRT	30	109.44	3.65	Generic	11.13	0.37	Not Avail

Propranolol

Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originator / Generic	SEP(US \$)	Unit Price (US\$)	IRP(US\$)Unit Price
Astrazeneca Pharmaceuticals (Pty) Ltd- Sunninghill	Inderal 10	10mg	TAB	50	79.61	1.59	Originator	8.10	0.16	0.05
Be-Tabs Pharmaceuticals (Pty) Ltd	Prodorol	10mg	TAB	1000	101.35	0.10	Generic	10.31	0.01	0.05
Gulf Drug Company	Indoblok 10	10mg	TAB	1000	78.18	0.08	Generic	7.95	0.01	0.05
Pharmacare Limited, Woodmead	Purbloka	10mg	TAB	50	7.57	0.15	Generic	0.77	0.02	0.05
Pharmacare Limited, Woodmead	Purbloka	10mg	TAB	1000	151.61	0.15	Generic	15.42	0.01	0.05
Sandoz Sa (Pty) Ltd	Sandoz Propranolol	10mg	TAB	50	5.68	0.11	Generic	0.582	0.01	0.05
Astrazeneca Pharmaceuticals (Pty) Ltd- Sunninghill	Inderal La 160	160mg	CAP	28	254.29	9.08	Originator	25.86	0.92	Not Avail
Astrazeneca Pharmaceuticals (Pty) Ltd- Sunninghill	Inderal 40	40mg	TAB	50	199.28	3.99	Originator	20.27	0.41	0.01
Be-Tabs Pharmaceuticals (Pty) Ltd	Prodorol	40mg	TAB	500	92.29	0.18	Generic	9.39	0.02	0.01
Gulf Drug Company	Indoblok 40	40mg	TAB	1000	135.81	0.14	Generic	13.81	0.01	0.01
Pharmacare Limited, Woodmead	Purbloka	40mg	TAB	50	9.98	0.20	Generic	1.02	0.02	0.01
Pharmacare Limited, Woodmead	Purbloka	40mg	TAB	250	49.98	0.20	Generic	5.08	0.02	0.01
Pharmacare Limited, Woodmead	Purbloka	40mg	TAB	1000	199.88	0.20	Generic	20.33	0.02	0.01
Sandoz Sa (Pty) Ltd	Sandoz Propranolol	40mg	TAB	50	7.54	0.15	Generic	0.77	0.02	0.01
Astrazeneca Pharmaceuticals (Pty) Ltd- Sunninghill	Inderal La-80	80mg	CAP	28	160.44	5.73	Originator	16.32	0.58	Not Avail

Atenolol

Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originator/ Generic	SEP(US\$)	Unit Price (US\$)	IRP(US\$)Unit Price
Astrazeneca Pharmaceuticals (Pty) Ltd- Sunninghill	Tenormin 100	100mg	TAB	30	300.37	10.01	Originator	30.55	1.021	0.01
Pharmacare Limited, Woodmead	Ten-Bloka	100mg	TAB	30	52.48	1.75	Generic	5.34	0.18	0.01
Sandoz Sa (Pty) Ltd	Sandoz Atenolol 100	100mg	TAB	30	35.20	1.17	Generic	3.58	0.12	0.01
Sandoz Sa (Pty) Ltd	Hexa-Blok 100	100mg	TAB	30	46.31	1.54	Generic	4.71	0.16	0.01
Adcock Ingram Limited	Adco-Atenolol 100	100mg	TAB	28	48.97	1.75	Generic	4.98	0.18	0.01
Austell Laboratories (Pty) Ltd	Tenopress 100	100mg	TAB	30	32.57	1.09	Generic	3.31	0.11	0.01
Be-Tabs Pharmaceuticals (Pty) Ltd	B-Block	100mg	TAB	30	23.72	0.79	Generic	2.41	0.08	0.01
Biotech Laboratories (Pty) Ltd	Bio-Atenolol 100	100mg	TAB	30	27.10	0.90	Generic	2.76	0.09	0.01
Astrazeneca Pharmaceuticals (Pty) Ltd- Sunninghill	Tenormin 25	25mg	TAB	30	111.02	3.70	Originator	11.291	0.38	Not Avail
Austell Laboratories (Pty) Ltd	Tenopress 25 Mg	25mg	TAB	30	14.45	0.48	Generic	1.47	0.05	Not Avail
Astrazeneca Pharmaceuticals (Pty) Ltd- Sunninghill	Tenormin 50	50mg	TAB	30	184.74	6.16	Originator	18.79	0.6	0.01
Pharmacare Limited, Woodmead	Ten-Bloka	50mg	TAB	30	35.83	1.19	Generic	3.64	0.12	0.01
Sandoz Sa (Pty) Ltd	Sandoz Atenolol 50	50mg	TAB	30	18.45	0.61	Generic	1.88	0.06	0.01
Sandoz Sa (Pty) Ltd	Hexa-Blok 50	50mg	TAB	30	23.15	0.77	Generic	2.35	0.08	0.01
Adcock Ingram Limited	Adco-Atenolol 50mg	50mg	TAB	30	35.82	1.19	Generic	3.64	0.12	0.01
Austell Laboratories (Pty) Ltd	Tenopress 50 Mg T	50mg	TAB	30	24.75	0.82	Generic	2.52	0.08	0.01
Be-Tabs Pharmaceuticals (Pty) Ltd	B-Block	50mg	TAB	30	18.73	0.62	Generic	1.90	0.06	0.01
Biotech Laboratories (Pty) Ltd	Bio-Atenolol 50	50mg	TAB	30	15.59	0.52	Generic	1.59	0.05	0.01
Gulf Drug Company	Gulf Atenolol 50	50mg	FCT	28	15.56	0.56	Generic	1.58	0.06	0.01

Acebutolol

Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originator/ Generic	SEP(US\$)	Unit Price (US\$)	IRP(US\$)Unit Price
Sanofi-Aventis South Africa (Pty)Ltd	Sectral 100	100mg	CAP	60	174.55	2.91	Originator	17.75	0.30	Not avail
Sanofi-Aventis South Africa (Pty)Ltd	Sectral 200	200mg	CAP	60	347.28	5.79	Originator	35.32	0.59	Not avail
Sanofi-Aventis South Africa (Pty)Ltd	Sectral 400	400mg	TAB	30	280.02	9.33	Originator	28.48	0.95	Not avail
Pharmacare Limited, Woodmead	Butobloc	400mg	TAB	30	205.80	6.86	Generic	20.93	0.70	Not avail

Bisoprolol

Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originator/ Generic	SEP(US\$)	Unit Price (US\$)	IRP(US\$)Unit Price
Merck	Cardicor	10mg	TAB	30	147.15	4.91	Originator	14.965155	0.50	Not avail
Merck	Concor	10mg	TAB	30	147.15	4.91	Originator	14.965155	0.50	Not avail
Adcock Ingram Limited	Adco-Bisocor	10mg	TAB	30	75.86	2.53	Generic	7.71481962	0.26	Not avail
Merck (Pty) Ltd	Betacor	10mg	TAB	30	80.70	2.69	Originator	8.20719	0.27	Not avail
Pharma Dynamics (Pty) Ltd	Bilocor 10	10mg	TAB	30	80.70	2.69	Generic	8.20719	0.27	Not avail
Pharma Dynamics (Pty) Ltd	Bisoprolol Unicorn 10	10mg	TAB	30	80.72	2.69	Generic	8.209224	0.27	Not avail
Pharmacare Limited, Woodmead	Ziapro 10 Mg	10mg	TAB	30	75.86	2.53	Generic	7.71481962	0.26	Not avail
Sandoz Sa (Pty) Ltd	Bisohexal 10	10mg	TAB	30	85.38	2.85	Generic	8.68327158	0.29	Not avail
Merck	Cardicor	2.5mg	TAB	30	88.42	2.95	Originator	8.992314	0.30	Not avail
Merck	Cardicor	5mg	TAB	30	93.05	3.10	Originator	9.463185	0.32	Not avail
Merck	Concor	5mg	TAB	30	93.05	3.10	Originator	9.463185	0.32	Not avail
Merck (Pty) Ltd	Betacor	5mg	TAB	30	48.00	1.60	Generic	4.8816	0.16	Not avail
Adcock Ingram Limited	Adco Bisocor	5mg	TAB	30	45.07	1.50	Generic	4.58370036	0.15	Not avail
Pharma Dynamics (Pty) Ltd	Bilocor 5	5mg	TAB	30	48.00	1.60	Generic	4.8816	0.16	Not avail
Pharma Dynamics (Pty) Ltd	Bisoprolol Unicorn 5	5mg	TAB	30	48.14	1.60	Generic	4.895838	0.16	Not avail
Pharmacare Limited, Woodmead	Ziapro 5 Mg	5mg	TAB	30	44.97	1.50	Generic	4.5729405	0.15	Not avail
Sandoz Sa (Pty) Ltd	Bisohexal 5	5mg	TAB	30	50.79	1.69	Generic	5.16531383	0.17	Not avail

Carvedilol

Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originator/ Generic	SEP(US\$)	Unit Price (US\$)	IRP(US\$)Unit Price
Roche Products (Pty) Ltd	Dilatrend	12.5mg	TAB	30	139.68	4.66	Originator	14.21	0.47	0.05
Arrow Pharma SA (Pty) Ltd	Vediblok 12.5mg	12.5mg	TAB	30	62.28	2.08	Generic	6.33	0.21	0.05
Cipla Medpro (Pty) Ltd	Carloc 12.5	12.5mg	TAB	30	71.26	2.38	Generic	7.25	0.24	0.05
Pharma Dynamics (Pty) Ltd	Carvetrend 12.5Mg	12.5mg	TAB	30	65.62	2.19	Generic	6.67	0.22	0.05
Pharma Dynamics (Pty) Ltd	Carvedilol Unicorn	12.5mg	TAB	30	63.92	2.13	Generic	6.50	0.22	0.05
Pharmacare Limited, Woodmead	Aspen-Carvidelol	12.5mg	TAB	30	68.21	2.27	Generic	6.94	0.23	0.05
Sandoz Sa (Pty) Ltd	Carvedilol-Hexal 12.5	12.5mg	TAB	30	68.31	2.28	Generic	6.95	0.23	0.05
Xixia Pharmaceuticals (Pty) Ltd	Merck-Carvedilol	12.5mg	TAB	28	57.94	2.07	Generic	5.89	0.21	0.05
Roche Products (Pty) Ltd	Dilatrend	25mg	TAB	30	139.68	4.66	Originator	14.21	0.47	0.05
Arrow Pharma SA (Pty) Ltd	Vediblok 25mg	25mg	TAB	30	78.17	2.61	Generic	7.95	0.26	0.05
Cipla Medpro (Pty) Ltd	Carloc 25	25mg	TAB	30	96.31	3.21	Generic	9.79	0.33	0.05
Pharma Dynamics (Pty) Ltd	Carvetrend 25 Mg	25mg	TAB	30	78.30	2.61	Generic	7.96	0.27	0.05
Pharma Dynamics (Pty) Ltd	Carvedilol Unicorn 25	25mg	TAB	30	83.23	2.77	Generic	8.46	0.28	0.05
Pharmacare Limited, Woodmead	Aspen-Carvidelol	25mg	TAB	30	88.77	2.96	Generic	9.03	0.30	0.05
Sandoz Sa (Pty) Ltd	Carvedilol-Hexal 25	25mg	TAB	30	88.82	2.96	Generic	9.03	0.30	0.05
Xixia Pharmaceuticals (Pty) Ltd	Mercl-Carvedilol 25Mg	25mg	TAB	28	75.02	2.68	Generic	7.62	0.27	0.05
Roche Products (Pty) Ltd	Dilatrend	6.25mg	TAB	30	133.95	4.47	Originator	13.62	0.451	0.09
Arrow Pharma SA (Pty) Ltd	Vediblok 6.25mg	6.25mg	TAB	30	57.32	1.91	Generic	5.83	0.19	0.09
Cipla Medpro (Pty) Ltd	Carloc 6.25	6.25mg	TAB	30	62.90	2.10	Generic	6.40	0.21	0.09
Pharma Dynamics (Pty) Ltd	Carvetrend6,25Mg	6.25mg	TAB	30	62.36	2.08	Generic	6.34	0.21	0.09
Pharma Dynamics (Pty) Ltd	Carvedilol Unicorn	6.25mg	TAB	30	61.03	2.03	Generic	6.21	0.21	0.09
Pharmacare Limited, Woodmead	Aspen Carvedilol	6.25mg	TAB	30	60.85	2.03	Generic	6.19	0.21	0.09
Sandoz Sa (Pty) Ltd	Carvedilol-Hexal 6.25	6.25mg	TAB	30	62.41	2.08	Generic	6.35	0.21	0.09
Xixia Pharmaceuticals (Pty) Ltd	Merck-Carvedilol	6.25mg	TAB	28	48.27	1.72	Generic	4.91	0.17	0.09

Hydrochlorothiazide

Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originator/ Generic	SEP(US\$)	Unit Price (US\$)	IRP(US\$)Unit Price
Pharmacare Limited, Woodmead	Ridaq	12.5mg	TAB	30	10.32	0.34	Generic	1.05	0.03	0.01
Pharmacare Limited, Woodmead	Ridaq	12.5mg	TAB	500	388.64	0.78	Generic	39.52	0.08	0.01
Sandoz Sa (Pty) Ltd	Hexazide 25	25mg	TAB	100	38.59	0.39	Generic	3.93	0.04	0.017

Indapamide

Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originator/ Generic	SEP(US\$)	Unit Price (US\$)	IRP(US\$)Unit Price
Servier Laboratories SA (Pty) Ltd	Natrilix SR	1.5mg	TAB	30	91.04	3.03	Originator	9.26	0.30	Not Avail
Pharma Dynamics (Pty) Ltd	Dyna Indapamide Sr	1.5mg	SRT	30	31.74	1.06	Generic	3.23	0.11	Not Avail
Servier Laboratories SA (Pty) Ltd	Natrilix	2.5mg	TAB	30	114.85	3.83	Originator	11.68	0.39	Not Avail
Sandoz Sa Pty Ltd	Sandoz Indapamide 2.5	2.5mg	TAB	30	17.88	0.60	Generic	1.82	0.06	Not Avail
Adcock Ingram Limited	Adco-Dapamax	2.5mg	TAB	30	18.78	0.63	Generic	1.91	0.06	Not Avail
Adcock Ingram Limited	Adco-Dapamax	2.5mg	TAB	600	375.60	0.63	Generic	38.20	0.06	Not Avail
Biogaran South Africa (Pty) Ltd	Catexan	2.5mg	TAB	30	28.62	0.95	Generic	2.91	0.10	Not Avail
Cipla Medpro (Pty) Ltd	Cipla Indapamide	2.5mg	TAB	30	13.47	0.45	Generic	1.37	0.05	Not Avail
Mylan (Pty) Ltd	Mylan Indapamide	2.5mg	TAB	30	13.33	0.44	Generic	1.36	0.04	Not Avail
Pharma Q (Pty) Ltd	Daptril	2.5mg	TAB	30	13.58	0.45	Generic	1.38	0.05	Not Avail
Pharma Q (Pty) Ltd	Daptril	2.5mg	TAB	600	271.79	0.45	Generic	27.64	0.05	Not Avail
Pharmacare Limited, Woodmead	Hydro-Less	2.5mg	TAB	30	19.87	0.66	Generic	2.02	0.07	Not Avail
Pharmacare Limited, Woodmead	Hydro-Less	2.5mg	TAB	600	342.35	0.57	Generic	34.82	0.06	Not Avail
Pharmacare Limited, Woodmead	Indalix	2.5mg	TAB	30	36.33	1.21	Generic	3.70	0.12	Not Avail

Furosemide

Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originator/ Generic	SEP(US\$)	Unit Price (US\$)	IRP(US\$)Unit Price
Sanofi-Aventis South Africa (Pty)Ltd	Lasix 20 Mg	20mg	TAB	30	100.00	3.33	Originator	10.17	0.34	Not Avail
Sanofi-Aventis South Africa (Pty)Ltd	Lasix 40 Mg	40mg	TAB	30	128.66	4.29	Originator	13.08	0.44	0.01
Alliance Pharmaceuticals	Aquarid	40mg	CAP	30	12.39	0.41	Generic	1.26	0.04	0.01
Austell Laboratories (Pty) Ltd	Austell-Furosemide	40mg	TAB	30	19.70	0.66	Generic	2.00	0.07	0.01
Be-Tabs Pharmaceuticals (Pty) Ltd	Beurises	40mg	TAB	250	37.76	0.15	Generic	3.84	0.02	0.01
Innovata Pharmaceuticals cc	Diuresix	40mg	TAB	250	45.44	0.18	Generic	4.62	0.02	0.01
Mylan (Pty) Ltd	Mylan Furosemide 40	40mg	TAB	250	30.73	0.12	Generic	3.13	0.01	0.01
Pharma Q (Pty) Ltd	Dino-Retic	40mg	TAB	250	40.77	0.16	Generic	4.15	0.02	0.01
Pharmacare Limited, Woodmead	Puresis	40mg	TAB	30	17.95	0.60	Generic	1.83	0.06	0.01
Pharma-Q (Pty) Ltd	Dino-Retic	40mg	TAB	1000	163.06	0.16	Generic	16.58	0.02	0.01
Sandoz (Pty) Ltd	Furosemide 40Mg	40mg	TAB	28	13.80	0.49	Generic	1.40	0.05	0.01
Sandoz Sa Pty Ltd	Sandoz Furosemide	40mg	TAB	30	15.05	0.50	Generic	1.53	0.05	0.01
Sanofi-Aventis South Africa (Pty) Ltd	Lasix 500mg	500mg	TAB	30	1,077.54	35.92	Originator	109.59	3.65	Not Avail
Sanofi-Aventis South Africa (Pty)Ltd	Lasix 500 Mg	500mg	TAB	100	3,800.14	38.00	Originator	386.47	3.86	Not Avail
Sanofi-Aventis South Africa (Pty)Ltd	Lasix 80 Mg	80mg	TAB	30	385.82	12.86	Originator	39.24	1.301	Not Avail

Spironolactone

Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originator/ Generic	SEP(US\$)	Unit Price (US\$)	IRP(US\$)Unit Price
Pfizer Laboratories (Pty) Ltd	Aldactone 100	100mg	TAB	30	207.17	6.91	Originator	21.07	0.70	0.09
Pharmacare Limited, Woodmead	Spiractin	100mg	TAB	60	414.33	6.91	Generic	42.14	0.70	0.09
Pfizer Laboratories (Pty) Ltd	Aldactone 25	25mg	TAB	60	67.08	1.12	Originator	6.82	0.11	0.03
Pharmacare Limited, Woodmead	Spiractin	25mg	TAB	200	223.73	1.12	Generic	22.75	0.11	0.03
Sandoz Sa (Pty) Ltd	Sandoz Spironolactone	25mg	TAB	200	213.70	1.07	Generic	21.73	0.11	0.03

Losartan

Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originator/ Generic	SEP(US\$)	Unit Price (US\$)	IRP(US\$)Unit Price
MSD (Pty) Ltd	Cozaar	100mg	TAB	30	90.45	3.02	Originator	9.20	0.31	Not Avail
Specpharm (Pty) Ltd	Spec Losartan 100	100mg	TAB	30	83.01	2.77	Generic	8.44	0.28	Not Avail
Aurobindo Pharma (Pty) Ltd	Auro Losartan 100 mg	100mg	TAB	30	80.41	2.68	Generic	8.18	0.27	Not Avail
Aurobindo Pharma (Pty) Ltd	Rasol 100	100mg	TAB	30	86.76	2.89	Generic	8.82	0.29	Not Avail
Austell Laboratories (Pty) Ltd	Austell Losartan 100	100mg	TAB	30	81.05	2.70	Generic	8.24	0.27	Not Avail
Cipla Life Sciences (Pty) Ltd	Cipla-Losartan 100	100mg	TAB	30	92.07	3.07	Generic	9.36	0.31	Not Avail
Cipla Medpro (Pty) Ltd	Ciplazar 100	100mg	TAB	30	86.93	2.90	Generic	8.84	0.29	Not Avail
Lasara Traders (Pty) Ltd	Hytenza 100	100mg	TAB	30	75.98	2.53	Generic	7.73	0.26	Not Avail
Pharma Dynamics (Pty) Ltd	Zartan 100 Mg	100mg	TAB	30	90.04	3.00	Generic	9.16	0.31	Not Avail
Ranbaxy (SA)(Pty) Ltd	Losartan Unicorn 100	100mg	TAB	30	76.48	2.54	Generic	7.78	0.26	Not Avail
Specpharm (Pty) Ltd	Spec Losartan 100	100mg	TAB	30	83.01	2.77	Generic	8.44	0.28	Not Avail
MSD (Pty) Ltd	Cozaar	50mg	TAB	30	90.45	3.02	Originator	9.20	0.31	0.02
Specpharm (Pty) Ltd	Spec Losartan 50	50mg	TAB	30	73.50	2.45	Generic	7.47	0.25	0.02
Unichem SA (Pty) Ltd	Renicard 50	50mg	TAB	30	64.04	2.13	Generic	6.51	0.22	0.02
Winthrop Pharmaceuticals (Pty)	Losartan-Winthrop 50Mg	50mg	TAB	30	73.92	2.46	Generic	7.52	0.25	0.02
Adcock Ingram Limited	Lepitrin 50 Mg	50mg	TAB	30	40.62	1.35	Generic	4.13	0.14	0.02
Aurobindo Pharma (Pty) Ltd	Auro Losartan Tablets 50 mg	50mg	TAB	30	70.89	2.36	Generic	7.21	0.24	0.02
Aurobindo Pharma (Pty) Ltd	Rasol 50	50mg	TAB	30	77.23	2.57	Generic	7.85	0.26	0.02
Austell Laboratories (Pty) Ltd	Austell Losartan 50	50mg	TAB	30	71.38	2.38	Generic	7.26	0.24	0.02
Cipla Life Sciences (Pty) Ltd	Cipla-Losartan 50	50mg	TAB	30	88.78	2.96	Generic	9.03	0.30	0.02
Cipla Medpro (Pty) Ltd	Ciplazar 50	50mg	TAB	30	86.93	2.90	Generic	8.84	0.29	0.02
Lasara Traders (Pty) Ltd	Hytenza 50	50mg	TAB	30	66.98	2.23	Generic	6.81	0.23	0.02
Pharma Dynamics (Pty) Ltd	Zartan 50 Mg	50mg	TAB	30	83.52	2.78	Generic	8.49.	0.28	0.02

Losartan

Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originator/ Generic	SEP(US\$)	Unit Price (US\$)	IRP(US\$)Unit Price
Ranbaxy (SA)(Pty) Ltd	Losartan Unicorn 50	50mg	TAB	30	69.82	2.32	Generic	7.10	0.24	0.02
Sandoz Sa (Pty) Ltd	Los-Arb 50	50mg	TAB	30	72.86	2.43	Generic	7.41	0.25	0.02
Specpharm (Pty) Ltd	Spec Losartan 50	50mg	TAB	30	73.50	2.45	Generic	7.47	0.25	0.02

Irbesartan

Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originator/ Generic	t\SEP(US\$)	Unit Price (US\$)	IRP(US\$)Unit Price
Sanofi-Aventis South Africa (Pty)Ltd	Approvel 150 Mg	150mg	TAB	28	228.41	8.16	Originator	23.23	0.83	Not Avail
Winthrop Pharmaceuticals (Pty) Ltd	Irbewin 150	150mg	TAB	28	153.48	5.48	Originator	15.61	0.56	Not Avail
Brimpharm SA (Pty) Ltd	Irtanel 150	150mg	TAB	28	110.00	3.93	Generic	11.19	0.40	Not Avail
Pharma Dynamics (Pty) Ltd	Dynarb 150 Mg	150mg	TAB	30	90.46	3.02	Generic	9.20	0.31	Not Avail
Sanofi-Aventis South Africa (Pty)Ltd	Approvel 300 Mg	300mg	TAB	28	223.62	7.99	Originator	22.74	0.81	Not Avail
Winthrop Pharmaceuticals (Pty) Ltd	Irbewin 300	300mg	TAB	28	153.48	5.48	Originator	15.61	0.56	Not Avail
Brimpharm SA (Pty) Ltd	Irtanel 300	300mg	TAB	28	110.00	3.93	Generic	11.19	0.40	Not Avail
Pharma Dynamics (Pty) Ltd	Dynarb 300 Mg	300mg	TAB	30	103.73	3.46	Generic	10.55	0.35	Not Avail

Valsartan

Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originator/ Generic	SEP(US \$)	Unit Price (US\$)	IRP(US\$)Unit Price
Novartis SA (Pty) Ltd	Diovan	160mg	TAB	28	209.96	7.49	Originator	21.35	0.76	Not Avail
Novartis SA (Pty) Ltd	Tareg 160	160mg	TAB	28	104.71	3.74	Generic	10.653	0.38	Not Avail
NOVARTIS SOUTH AFRICA (PTY) LTD	Zomevek 160	160mg	TAB	28	104.71	3.73	Generic	10.65	0.38	Not Avail
Ranbaxy (SA) (Pty) Ltd	Diolo 160	160mg	TAB	28	35.00	1.25	Generic	3.56	0.13	Not Avail
Ranbaxy (SA)(Pty) Ltd	Valsartan Unicorn 160	160mg	TAB	28	89.83	3.21	Generic	9.14	0.33	Not Avail
NOVARTIS SOUTH AFRICA (PTY) LTD	Migroben 160	160mg	TAB	28	104.71	3.73	Generic	10.65	0.38	Not Avail
Novartis SA (Pty) Ltd	Diovan	80mg	TAB	28	209.96	7.49	Originator	21.35	0.76	Not Avail
Novartis SA (Pty) Ltd	Tareg 80	80mg	TAB	28	104.71	3.74	Generic	10.65	0.38	Not Avail
NOVARTIS SOUTH AFRICA (PTY) LTD	Zomevek 80 Tablet	80mg	TAB	28	104.71	3.73	Generic	10.65	0.38	Not Avail
Ranbaxy (SA) (Pty) Ltd	Diolo 80	80mg	TAB	28	35.00	1.25	Generic	3.56	0.13	Not Avail
Ranbaxy (SA)(Pty) Ltd	Valsartan Unicorn 80	80mg	TAB	28	89.83	3.21	Generic	9.141	0.32	Not Avail
NOVARTIS SOUTH AFRICA (PTY) LTD	Migroben 80 Tablet	80mg	TAB	28	104.71	3.73	Generic	10.65	0.381	Not Avail

Telmisartan

Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originator/ Generic	SEP(US\$)	Unit Price (US\$)	IRP(US\$)Unit Price
Ingelheim Pharmaceuticals (Pty) Ltd	Micardis 40 mg	40mg	TAB	28	233.16	8.33	Originator	23.71	0.85	Not Avail
Ingelheim Pharmaceuticals (Pty) Ltd	Pritor 40 mg	40mg	TAB	28	135.50	4.84	Originator	13.78	0.49	Not Avail
Ingelheim Pharmaceuticals (Pty) Ltd	Micardis 80 mg	80mg	TAB	28	233.16	8.33	Originator	23.71	0.85	Not Avail
Ingelheim Pharmaceuticals (Pty) Ltd	Pritor 80 mg	80mg	TAB	28	135.50	4.84	Originator	13.78	0.49	Not Avail

Verapamil

VCTapanin										
Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originato r/ Generic	SEP(US\$)	Unit Price (US\$)	IRP(US\$)Unit Price
Sandoz Sa (Pty) Ltd	Sandoz Verapamil Hci 120	120mg	TAB	50	98.82	1.98	Generic	10.05	0.20	Not Avail
Sandoz Sa (Pty) Ltd	Sandoz Verapamil Hcl 120	120mg	TAB	250	494.12	1.98	Generic	50.25	0.20	Not Avail
Abbott Laboratories SA Pty Ltd	Tarka	180mg	SRC	30	284.96	9.50	Generic	28.98	0.97	Not Avail
Abbott Laboratories SA Pty Ltd	Isoptin SR	240mg	SRT	30	176.62	5.89	Originator	17.96	0.60	0.1164
Merck (Pty) Ltd	Ravamil Sr 240 Mg	240mg	TAB	30	155.09	5.17	Originator	15.77	0.53	0.1164
Pharma Dynamics (Pty) Ltd	Calcicard Sr 240	240mg	SRT	30	146.59	4.89	Generic	14.91	0.50	0.1164
Sandoz Sa (Pty) Ltd	Verahexal 240 Sr	240mg	SRT	30	120.61	4.02	Generic	12.27	0.41	0.1164
Sandoz-Hexal (a Novartis company)	VeraHexal	240mg	SRT	100	379.98	3.80		38.64	0.39	0.1164
Abbott Laboratories SA Pty Ltd	Isoptin 40mg	40mg	TAB	100	90.07	0.90	Originator	9.16	0.09	0.034
Pharmacare Limited, Woodmead	Vasomil	40mg	TAB	100	43.82	0.44	Generic	4.46	0.04	0.034
Pharmacare Limited, Woodmead	Vasomil	40mg	TAB	500	219.15	0.44	Generic	22.29	0.04	0.034
Sandoz Sa (Pty) Ltd	Sandoz Verapamil	40mg	TAB	30	11.35	0.38	Generic	1.15	0.04	0.034
Pharmacare Limited, Woodmead	Vasomil	80mg	TAB	100	93.73	0.94	Generic	9.53	0.10	0.0327
Pharmacare Limited, Woodmead	Vasomil	80mg	TAB	250	234.35	0.94	Generic	23.83	0.10	0.0327
Sandoz Sa (Pty) Ltd	Sandoz Verapamil Hcl 80	80mg	TAB	250	212.18	0.85	Generic	21.58	0.09	0.0327
Sandoz-Hexal (A Novartis Company)	Sandoz Verapamil	80mg	TAB	50	42.44	0.85	Generic	4.3158	0.09	0.0327

Diltiazem

Applicant Name	Proprietary Name	Strength	Unit	Pack Size	Single Exit Price (Rands)	Unit Price (Rands)	Originator/ Generic	SEP(US\$)	Unit Price (US\$)	IRP(US\$)Unit Price
Pfizer Laboratories (Pty) Ltd	Tilazem 180 Cr	180mg	SRC	30	262.98	8.77	Originator	26.75	0.89	Not avail
Pfizer Laboratories (Pty) Ltd	Tilazem 240 Cr	240mg	SRC	30	276.33	9.21	Originator	28.10	0.94	Not avail
Adcock Ingram Limited	Adco-Zildem 240 Sr	240mg	SRC	30	217.63	7.25	Generic	22.13	0.74	Not avail
Pharmacare Limited, Woodmead	Dilatam	60mg	TAB	60	83.87	1.40	Generic	8.53	0.14	0.02
Sandoz Sa (Pty) Ltd	Sandoz Diltiazem	60mg	TAB	50	51.50	1.03	Generic	5.24	0.10	0.02
Sandoz Sa (Pty) Ltd	Sandoz Diltiazem	60mg	TAB	250	257.48	1.03	Generic	26.16	0.10	0.02
Adcock Ingram Limited	Adco-Zildem 60	60mg	TAB	50	121.26	2.43	Generic	12.33	0.25	0.02
Adcock Ingram Limited	Adco-Zildem 60	60mg	TAB	60	145.53	2.43	Generic	14.80	0.25	0.02
Adcock Ingram Limited	Adco-Zildem 90	90mg	TAB	60	333.46	5.56	Generic	33.91	0.56	0.02

Comparison of Median Price Ratio values and International Reference Price values

	Originator Unit Price (US\$)	Lowest Price Generic unit Price (US\$)	IRP Unit Price (US\$)(Buyer Price)	Originator Unit Price (US\$) /IRP Unit Price (US\$)(Buyer Price)	Lowest Price Generic unit Price (US\$)/IRP Unit Price (US\$)(Buyer Price)
Captopril 25mg	0.29	0.02	0.01	25.41	2.16
Enalapril 10mg	0.16	0.10	0.01	28.71	18.78
Enalapril 20mg	0.29	0.14	0.01	38.03	18.02
Perindopril 4mg	0.46	0.13	0.04	11.98	3.48
Nifedipine 20mg Sr	0.94	0.06	0.02	62.36	4.27
Amlodipine 10mg	0.72	0.21	0.01	55.93	16.48
Amlodipine 5mg	0.51	0.12	0.01	47.59	11.11
Propranolol 10mg	0.16	0.01	0.05	3.28	0.16
Propranolol 40mg	0.41	0.01	0.01	52.64	1.79
Atenolol 100mg	1.02	0.08	0.01	99.83	7.88
Atenolol 50mg	0.63	0.05	0.01	115.97	9.79
Carvedilol 12.5mg	0.47	0.21	0.05	9.64	4.29
Carvedilol 25mg	0.47	0.27	0.05	8.79	4.92
Carvedilol 6.25mg	0.45	0.17	0.09	4.94	1.90
Furosemide 40mg	0.44	0.01	0.01	65.09	1.82
Spironolactone 100mg	0.70	0.70	0.09	8.026	8.03
Spironolactone 25mg	0.11	0.11	0.03	3.37	3.22
Losartan 50mg	0.31	0.14	0.02	16.57	7.44
Verapamil 40mg	0.09	0.038	0.03	2.69	1.13
Verapamil 240mg SR	0.59	0.39	0.11	5.14	3.32

Consumption Data per unit drug from January 2012 –June 2013: IMS Health (Proprietary) Limited (South Africa) information service

Bisoprolol												
	Jan 12	Feb 12	Mar 12	Apr 12	May 12	June 12	July 12	Aug 12	Sept 12	Oct 12	Nov 12	Dec 12
Lowest Priced Generic	22,999	25,220	25,076	32,615	20,761	23,806	26,262	22,682	17,671	26,744	20,374	18,140
Originator Generic	10,694	12,831	11,776	14,863	12,397	12,835	13,997	14,443	14,860	14,794	15,507	15,887
Originator	17,989	18,917	19,095	20,543	19,013	18,497	19,271	18,079	19,870	19,120	18,236	19,849
Verapamil 240mg SR												
Vorapanni 240mg orc	Jan 12	Feb 12	Mar 12	Apr 12	May 12	June 12	July 12	Aug 12	Sept 12	Oct 12	Nov 12	Dec 12
Lowest Priced Generic	12,677	12,605	13,467	17,783	15,302	13,431	15,101	19,518	19,532	18,016	19,362	15,990
Originator Generic	2,511	2,826	2,757	3,033	2,636	2,681	3,195	3,093	3,671	3,487	6,018	3,386
Originator	1,259	1,198	1,244	1,394	1,198	1,323	1,139	1,436	1,382	1,415	1,391	1,305
Telmisartan												
	Jan 12	Feb 12	Mar 12	Apr 12	May 12	June 12	July 12	Aug 12	Sept 12	Oct 12	Nov 12	Dec 12
Originator Generic	15,966	15,573	18,104	19,127	17,524	18,222	20,353	16,946	19,845	19,065	22,607	19,844
Originator	3,651	3,588	3,324	3,705	3,089	3,108	3,219	3,160	3,088	2,995	3,058	3,119
Irbesartan												
	Jan 12	Feb 12	Mar 12	Apr 12	May 12	June 12	July 12	Aug 12	Sept 12	Oct 12	Nov 12	Dec 12
Lowest Priced Generic	0	0	0	0	0	0	0	0	0	0	280	34
Originator Generic	6,018	6,404	6,132	8,338	6,260	6,432	8,090	6,713	8,567	7,209	6,649	10,048
Originator	3,088	3,268	2,786	3,280	2,705	2,833	2,847	2,686	2,578	2,915	2,480	2,564

Bisoprolol						
	Jan 13	Feb 13	Mar 13	Apr 13	May 13	June 13
Lowest Priced Generic	21,496	30,201	19,335	18,201	20,232	22,151
Originator Generic	14,610	14,535	18,821	14,312	15,391	16,984
Originator	17,613	16,850	23,625	15,580	16,198	17,619
Verapamil 240mg SR						
	Jan 13	Feb 13	Mar 13	Apr 13	May 13	June 13
Lowest Priced Generic	15,958	9,182	14,747	22,744	10,111	17,664
Originator Generic	3,296	3,635	7,996	5,962	6,397	5,293
Originator	1,179	1,238	2,223	1,380	1,217	1,754
Telmisartan						
	Jan 13	Feb 13	Mar 13	Apr 13	May 13	June 13
Originator Generic	17,582	18,553	19,379	22,186	19,860	22,573
Originator	2,757	2,374	2,505	3,705	2,279	2,569
Irbesartan						
	Jan 13	Feb 13	Mar 13	Apr 13	May 13	June 13
Lowest Priced Generic	68	1,035	325	476	436	553
Originator Generic	5,598	6,731	8,229	6,253	6,513	8,764
Originator	2,441	2,400	2,350	2,365	2,146	2,270

Ethical Clearance Documentation



12 April 2013

Professor Fatima Suleman 621698 School of Health Sciences Westville Campus

Protocol reference number: HSS/0154/013

Project title: Assessment and evaluation of South Africa's private sector pricing and public sector pharmaceutical policies, strategies and other interventions on access to and appropriate use of quality medicines – lessons for LMICs

Dear Professor Suleman

I wish to inform you that your application has been granted full approval.

Expedited Approval

Any alteration/s to the approved research protocol i.e. Questionnaire/Interview Schedule, Informed Consent Form, Title of the Project, Location of the Study, Research Approach and Methods must be reviewed and approved through the amendment/modification prior to its implementation. In case you have further queries, please quote the above reference number. Please note: Research data should be securely stored in the school/department for a period of 5

I take this opportunity of wishing you everything of the best with your study.

Yours faithfully

Professor Steven Collings (Chair)

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Humanities & Social Sc Research Ethics Committee Professor S Collings (Chair) Westville Campus, Govan Mbeki Building

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Medical School

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Westville



University of KwaZulu-Natal

HPCSA CPD Accreditation No:
A003/005/10/2005
Category 4
No. of CPD Points = 10

HEREBY ACKNOWLEDGES THAT

Mrs Varsha Bangalee

MP0017419

HAS COMPLETED A COURSE IN

Human Subject Research Ethics

Completed On 30 - 7 - 2012

Valid Until 7 - 2015



THE FOLLOWING MODULES WERE COMPLETED IN THIS COURSE

Research Ethics in South Africa - An Overview
Guiding Principles of Ethical Research
Informed Consent
Research Vulnerabilities
Researcher Responsibilities



University of KwaZulu-Natal

HEREBY ACKNOWLEDGES THAT

Mrs Varsha Bangalee

HAS COMPLETED A COURSE IN

RESEARCH POLICY V: RESEARCH ETHICS

<u>Completed On</u> 30 - 7 - 2012

<u>Valid Until</u> 7 - 2015



THE FOLLOWING SUBJECTS WERE COMPLETED IN THIS COURSE

- RESEARCH ETHICS POLICY

-CODE OF CONDUCT FOR RESEARCH



