



كلية الصيدلة  
College of Pharmacy  
QATAR UNIVERSITY جامعة قطر  
عضو في الصحة **HEALTH**

القطاع الدوائي في قطر: يداً بيد في مواجهة الحصار

## Medication Sector in Qatar: Hand in Hand Facing the Blockade



WHO Model List Of Essential Medicines and countries Health response during Embargo

**Dr. Mohd Alhajri**

**EPRD - MOPH**

**MBBCH, ABCM, MPH, DTM, MFTM RCPS(Glasgow), IDHA,**



كلية الصيدلة  
College of Pharmacy  
QATAR UNIVERSITY جامعة قطر  
عضو في الصحة **HEALTH**

# Disclosure of Conflict of Interest

**Presenting Authors Have No Relationships  
to Disclose**



# Outline

- A. Challenges and barriers to medicines availability in crisis.
- B. Access to domestic and global market of generic medicines.
- C. WHO Model List Of Essential Medicines.
- D. Case example and the way forward from Cuba and Qatar (next presentation).



## A. Global Challenges and barriers to medicines availability in crisis:-

- Stock is always dynamic and moving.
- Unpredictable consumption trends and physician preferences.
- Expansion of health care facilities.
- Donation to foreign countries (during crisis) and medical campaigns.
- Some items have very short shelf-life and it is very difficult to keep such items for one year.
- Global shortages and supply constrain for items such as crash cart items and some vaccines.
- Tender regulations procurement process.
- Manufacturers deal on the basis of lead time. Some companies refuse to confirm supplies 3 to 4 months from the date of issue on purchase order.
- The shortage of skilled staff.



## B. Access to domestic and global market of generic medicines compared to Brand medicines.

- Selections.
- Source.
- when, why, how long...etc.



## C. WHO Model List Of Essential Medicines.

- It is a Model and dynamic.
- 10,000 people for 3 months.
- countries tailor it to suite their needs.....etc.
- Updated regularly.
  
- Partnerships and WHO prequalified medicines sources.





## D. Case examples

- Cuba.
- Qatar (next presentation).



# Setting Overarching National Policy Goals:-

- For their part, the newly organized health authorities began developing a single national public health system under the following principles, later enshrined in the 1976 Constitution adopted by national plebiscite and the 1983 Public Health Law:
- Health care is a right, available to all equally and free of charge.
- Health care is the responsibility of the state.
- Preventive and curative services are integrated.
- The public participates in the health system's development and functioning.
- Health care activities are integrated with economic and social development.
- Global health cooperation is a fundamental obligation of the health system and its professionals.







Cuban Health  
Policy:-

Medical  
Institutes  
(12)

Hospitals  
(265)

Community Polyclinics  
(488)

Basic Work Teams

Family Doctor-and-Nurse Team

Families  
(375)

Individuals  
(1500)

Community (1)



- The Cuban strategy effectively resolved health risks during the crisis. In times of serious socio-economic constraints, a well conceptualized public health policy can play an important role in maintaining the overall well-being of a population.
- **lower IMR, almost the same live expectancy..etc.**
- <http://onlinelibrary.wiley.com/doi/10.1111/j.1365-3156.2011.02941.x/full>
- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1550691/>
- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3464859/>





كلية الصيدلة  
College of Pharmacy  
QATAR UNIVERSITY جامعة قطر  
عضو في **HEALTH** الصحة

THANKS

