

Interview with Daphn   Lecomte-Somaggio, Director General, AFIPA    Association Fran  saise de l   Industrie Pharmaceutique pour une Autom  dication Responsa

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July 2008 libre ac  ss (free access,) for OTC market was implemented    a measure where some selected OTC products were made available over the counter within the pharmacy. Could you explain to us why it took so long in France to implement such a measure, while in most developed markets this measure has already been in place, and, what has the impact been for the OTC companies?

This is a measure which the AFIPA fought for a very long time to obtain. In 2003 L   Afipa produced a white paper, which was based on a series of measures which were primarily based on a report by Professors Baumelou and Coulomb and free access was one of the possibilities proposed to make the self-medication market progress in France. What happened was that for whatever reason, there was a government crystallization on this measure, and what came out of this was in September 2007 Minister Bachelot announced was that she was ready to introduce free access; since then we worked together to put this into action in 2008. Hence once the decision was made, it was carried out very quickly. This is something which we have much hope for since the implementation was so rapid.

In France, until recently, self-medication was not very popular with the authorities. Doctors did not consider that patients had the ability to identify and analyse symptoms and take decisions by choosing products to heal benign affections.

Taking into account the considerable economic evolution, notably with the increased importance of internet with websites like Doctissimo, which has millions of visitors, you can see that patients are taking an active role in their health, in seeking information and are capable of taking decisions for themselves; as a result self-medication becomes a possibility. It also becomes a possibility to manage the social security costs. This is not our official communication. In a healthcare system such as we have in France, where many things are    free   -or rather seem to be free as we have to pay for them in a different way- this message is hard to maintain in a time of crisis. The French healthcare system has to evolve. We have to take into account pathologies which have a high cost but for benign illnesses self-medication should be sufficient.

The healthcare system in France works so well that people do not understand why there needs to be a change. However, today the shift is also driven by a change in demography of healthcare professionals. In the past you would have your doctor visit you at home, but nowadays you need to make an appointment and sometimes it takes 4 or 5 days to see a doctor and you have to go to the office. Therefore, self-medication becomes a practical solution in benign cases.

In terms of impact, while OTC consumption is on the rise, these drugs can still only be distributed through pharmacies. Moreover, the free-access is optional in these establishments and at the end of 2008 only 26% of pharmacies had made such an area available. Does this mean we are seeing some resistance? Or in certain cases, is it just not practical to implement the system?

Today it is more than 26 % - closer to 50%. The latest figures available were in June 2009, at 44%, and we are waiting for the next figures to come out at the end of November. You have to understand the figures come out on July 1, 2008 then August comes, we all go on vacation and everything shuts down, so really this was put in place in September 2008, when we had about 20 % , 39 % in May 2009 and 44 % this June. So, as you can see, it has developed.

It is also true that pharmacies belonging to "groupements" have been very active. 65- 80 % of pharmacies belonging to a groupement have introduced a free access counter. However, with the independent firms, this is a different story. Often you have to reorganize the shop which has a cost and would also sometimes face a shortage of space.

An IPSOS study made for AFIPA shows that 89% of French people know about free access and one out of four French people have already bought a product under libre accès. Another study from March 2008 found that once people start using "free access" they do so again. We are very confident.

For pharmacists it was also a great change as for the first time they had to come around the counter to show the client where he could get the medicine.

The measure was also chosen in a move to counter the project being undertaken by supermarket chains. At the time, a very important retailer - Michel Edouard Leclerc- was asking for medication to be sold in their shops. The AFIPA, is not supporting this. Free access was implemented to counter this movement, so that medication could not be distributed out of pharmacy stores.

It's actually quite a surprise because in many countries, some OTC medicine can be distributed in different channels, and associations similar to AFIPA support this. Why not the same approach in France?

You probably know that the French love to choose the "troisième voie" a third option that is unique. Ours is the "free access" in pharmacies. And this will work. We not only stretch out the importance of free access but also of the importance of the pharmacist's advice. Sales need to be backed up by advice, and it's actually one of the key to success, and a very important moment for the pharmacists to enhance their role. Free access is not a first step towards the exit, but on the contrary a good measure to anchor drugs within pharmacies.

Free access is definitively a sign of evolution of mentalities but is it not also a sign that drugs are becoming a banal product, just like any other?

If that was what we were aiming for, we would have chosen to enlarge distribution channels. It is merely recognition that today's patients are better informed than in the past. We cannot consider that today's patients just visit their general practitioner, get a prescription and purchase whatever product without question. Today they have become players in the market themselves.

We would like the list of products available for list access to be extended. The current list encompasses 302 products; we would like more products to have a more homogeneous list.

What was the impact of this measure for the laboratories?

For the moment we have no figures from the pharma companies. But from the pharmacists's perspective, they signal about a 10% rise in sales once a product is placed under free access.

Last year the OTC market grew faster than the rest of the industry. In 2009 this is a market that should have been directly impacted by the economic crisis since a large part is "out of the pocket expenses".

For the first six months some elements show the market is stable, which is a good sign in a crisis period. What I can say is that behaviour is changing and self-medication is accepted much more than before. We receive an increasing amount of information requests from every type of stakeholder.

Self-medication is no longer something shameful. What is important to signal is that responsible self-medication is becoming a tendency. With the rise of internet, where anyone can buy anything, people are now aware that there are two types of self-medication, one which is responsible and which is irresponsible. People are now aware that purchasing on the internet, or taking left over antibiotics, is not responsible behaviour and can be dangerous. Besides people are also becoming aware that the strains on our social security systems are huge and that we need to change. The average price of a self-medication drug in France is 5,40 euros, which is really cheap and should be compared with Germany for example where it is around 9 euros.

Our goal is to ensure that free access becomes a real success during 2009-2010. This is extremely important for us and is why we are putting a lot of resources in that direction (studies, press and internet campaigns). We are collaborating with the AFSSAPS on the evolutions of rules and regulations and in order to smooth some rules and red tape. Lastly we are involved in thinking about self-medication, as in France this only encloses drugs whereas elsewhere it also includes medical devices, food supplements etc.

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