

INDOMETACIN (Comment)**Priceless**

Indometacin is one of the world's most widely used over-the-counter nonsteroidal antiinflammatory drugs, and a wide range of pharmaceutical firms currently make generic formulations available for oral use. However indometacin has also been used, for nearly thirty years, to effect closure of the ductus arteriosus and, for this purpose, it has always been given intravenously. Indeed this has long been the only indication for giving the drug intravenously. It was work done by academic paediatricians that enabled the pharmaceutical company, Merk, to make this the first drug to ever win specific approval for use in infants from the American Food and Drug Administration.

The intravenous product has always cost rather more in the United States than it does elsewhere. Merk were, until recently, charging approximately \$100 for three one milligram vials, which is approximately double what hospitals pay for exactly the same product in Australia, Canada and most of Europe. However Ovation Pharmaceuticals acquired the American distribution rights for Merk's IV product in 2006, and they are now charging \$1875 for three 1mg vials. As the monopoly provider for a niche product in America they clearly believe they can charge what they like and get away with it. Given that the pharmaceutical industry played almost no part in the studies that first identified how useful this drug could be in the neonate, that the industry has not needed to undertake any further developmental work on the product since then, and has never needed to advertise the product in order to promote its use, this recent price hike can only be described as the extortionate and completely unacceptable behaviour of a monopoly provider. The cost of manufacture can't have suddenly increased almost twenty fold, and there can be no reason to believe that the companies that make the same product available elsewhere in the world are failing to recover their manufacturing costs. There is, therefore, no conceivable reason why this medicine should now cost more than **thirty times** as much in America as it does anywhere else in the world.

Ibuprofen is also being used as an alternative to indometacin to effect ductal closure now, but any American clinician tempted to turn to this product in order to avoid paying a quite disproportionate sum for three vials of indometacin will find that the market for IV ibuprofen in America is also the hands of Ovation Pharmaceuticals, and that the price charged in America (\$30 per milligram) is **ten times** what it is in Europe. Ovation Pharmaceuticals clearly believe that they can hold the American public to ransom with impunity, and that belief seems well founded. While this is probably an unusually florid example of the pharmaceutical industry's lack of accountability, it does highlight the fact that the price currently charged for many valuable and widely used drugs lacks any rational basis. Such thoughts may well encourage more clinicians to explore the efficacy of *oral* ibuprofen (Cherif *et al.*, 2007), which has long been widely available, and is immeasurably cheaper.

Many would argue that the market should normally be allowed to determine the price of everything but, because many important drugs are currently only available from one recognised, legally approved, source, there is no genuine 'market' for many important products. Few would deny a child essential, potentially life saving, treatment simply because the parents are unable to pay. In this situation society as a whole generally ends up underwriting the cost and, on this occasion at least, society as a whole is being 'taken for a ride'. It might not be happy if it knew.

Jobe AH. Drug pricing in pediatrics: the egregious example of indomethacin. *Pediatrics* 2007;**119**:1197–8.

Cherif A, Jabnoun S, Khrouf N. Oral ibuprofen in early curative closure of patent ductus arteriosus in very premature infants. *Am J Perinatol* 2007;**24**:339–45.