

Monopolizing Medicine

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Canadians face the prospect of medication shortages due to pharmaceutical companies prioritizing profit. In 2018, a shortage of Epi-Pens, monopolized by Pfizer, underscored the risks of pharmaceutical monopolies to public health. This highlights the critical need to address monopolistic practices for the safety and well-being of Canadians.

Key Findings

- Patents grant exclusivity for brand-name pharmaceutical companies, leading to monopolies over drug sales.
- Brand-name pharmaceutical companies utilize legal tactics and evergreening strategies to protect patents.

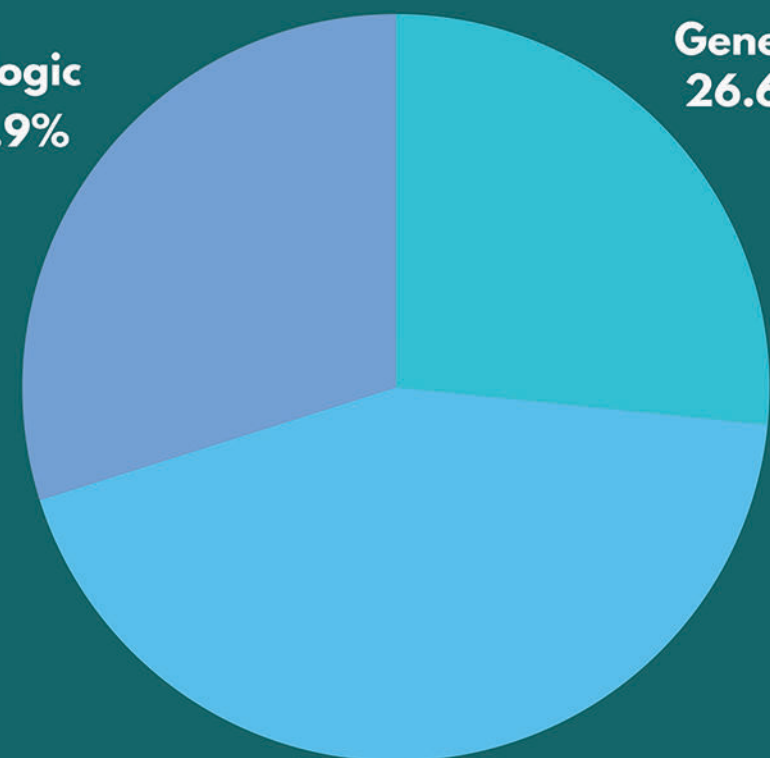
- In 2021, it was reported that pharmaceutical expenses in Canada have risen by 7.2% annually since 1987, exceeding healthcare expenses and inflation rates.
- High drug costs lead to underinsurance, limited coverage, or prescription abandonment among Canadians.

How is the pharmaceutical industry's monopolization of certain drugs impacting Canadian healthcare?

Brand-name medications are granted up to eight years of exclusive market access, leading to a bias in drug coverage program allocations and impeding both affordability and innovation in treatment development. Resulting is higher public spending for brand names in comparison to generic and biologic drugs.

Biologic
29.9%

Generic
26.6%



Brand name
43.5%

Public drug spending within Canada in 2022

Recommendations

- Increase pharmaceutical market competition for affordable and varied medication options.
- The federal government must consider broadening the new Canada-wide pharmacare plan to cover a wide range of in-demand drugs.
- During shortages, other pharmaceutical companies should be mandated to provide essential life-saving medication to prevent accessibility issues for Canadians.