Guest: Hilary Daniel
Host: Tim Hoff
Transcript: Cheryl Green

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[00:00:03] TIM HOFF: Welcome to another episode of the Author Interview series from the American Medical Association Journal of Ethics. I'm your host, Tim Hoff. This series provides an alternative way to access the interesting and important work being done by Journal contributors each month. Joining me on this episode is Hilary Daniel, the senior regulatory affairs policy manager for US Pharmacopeia. She’s here to discuss her article, coauthored with Courtney Perlino and Dr Amy Cadwallader, “Which Drugs Should Be on the Essential Medicines List?,” in the April 2024 issue of the Journal, Global Medical Supply Chain Security. Hilary, thank you so much for being on the podcast. [music fades]

HILARY DANIEL: Thank you for having me.

[00:00:44] HOFF: So, what is the main ethics point of your article?

DANIEL: When drugs are in short supply, clinicians are often faced with making difficult decisions about how to treat their patients. They may switch out a patient’s medication to a different one with more side effects or other decisions that may have wide-ranging impacts or effects. Clinicians are not expected to understand the nuances of the supply chains that provide the resources they require to effectively help their patients, but it is something that they experience in the course of their work. Consideration of those drugs that are vulnerable because of supply chain risks will help to enable a more comprehensive strategy for preparedness initiatives, minimizing drug shortages and bolstering supply chain resiliency. This will ultimately help to ensure that more patients’ medicine needs are met, and clinicians face fewer of these difficult decisions.

[00:01:35] HOFF: And so, what should health professions students and trainees specifically take from this article?

DANIEL: The aims behind Essential Medicines Lists and a Vulnerable Medicines List are different. Essential Medicines Lists aim to address global health priorities, identify medicines that provide the greatest health benefits, and identify medicines that should be affordable to all, whereas Vulnerable Medicines Lists aim to identify those medicines that have an increased risk of shortage or supply chain vulnerability. Medicines that have vulnerable supply chains can be those that are already included on our Essential Medicines List, but they are not always. And there must be a broader recognition that medicines with vulnerable supply chains can cause patient harm. So, factoring vulnerable medicines into the conversations around drug shortages can potentially help to bolster visibility of these medicines, which have been notoriously present on Drug Shortage Lists and are needed to support patient care.

[00:02:31] HOFF: And finally, if you could add a point to this article that you didn’t have the time or space to fully explore, what would that be?
DANIEL: So, foundational mapping of the entirety of the pharmaceutical supply chain to identify vulnerabilities and threats along the links. Starting with drug key starting materials and continuing to include excipients, active pharmaceutical ingredients, and finished drug products is lacking. Many stakeholders involved in the medicine supply chain, stakeholders that are at the point of care, who prescribe, those that take medications or need medications do not have a clear picture of where the vulnerabilities are, and understanding where there are risks is needed as a first step to strengthen resiliency of the pharmaceutical supply chain, help to prevent and mitigate drug shortages, and to ensure medical products get to the patients that need them.

[theme music returns]

[00:03:23] HOFF: Hilary, thank you so much for being on the podcast today, and thanks to you and your co-authors for your contribution to the Journal this month.

DANIEL: Thank you so much for having me.

HOFF: To read the full article, as well as the rest of this month’s issue for free, visit our site, journalofethics.org. We’ll be back soon with more Ethics Talk from the American Medical Association Journal of Ethics.