



# DRUG SHORTAGES A PERSONAL MATTER

Martin Lush talks with local pharmacist Rory Towler

Rory Towler is a pharmacist who, together with his wife Jo, runs our community pharmacy in Kirkbymoorside not far from our UK office. Filling over 1,000 prescriptions weekly, they are on the frontline of community health care. To some, “drug shortage” is just a headline, but to Rory and Jo, and pharmacists like them, it’s personal.

**Martin:** *How long have shortages been an issue?*

**Rory:** Shortages vary in magnitude and type, from the complete stock out to delays of weeks or months. We started noticing problems about 10 years ago, but shortages have dramatically worsened in the last five years. In any given week there may be 20 to 30 product items we struggle to get hold of. Some shortages resolve in a few weeks but it can be months before supplies are available. HRT shortages are a good example. In 2019, 30 to 40 product types were completely unavailable. We’ve also recently experienced extreme difficulty getting hold of adrenaline pens (used to treat anaphylaxis), naproxen (pain relief) and nifedipine (hypertension) to name but a few.

**Martin:** *So, what do you do?*

**Rory:** On average we make 20 to 30 phone calls every week to manufacturers and wholesale suppliers to try and source out-of-stock medicines. We’re rarely told why there is a supply problem or given a reliable delivery date. This makes it impossible for us to plan and to provide the reassurance our patients need. On some occasions the manufacturer blames the wholesaler



and vice versa. We are often left caught in the middle. When stock becomes available, we must be quick; it can sell out within minutes. When stock is unavailable for months, the impact, on already over-worked GPs, is considerable. Take nifedipine as an example; clinically its recommended patients are kept on the same generic brand. If unavailable, GPs may be forced to switch patients over to another brand or drug with potential clinical consequences.

**Martin:** *How can the pharma industry help you better?*

**Rory:** Three things come to mind.

Number one: Please remember we’re your customer and we’re just trying to do our job to the best of our ability. On many occasions the people we speak to (manufacturers and wholesalers) are ill informed and disengaged.

Number two: Please provide us with accurate and reliable information so we can plan ahead and provide reassurance to both patients and GPs.

Number three: Although it may be just a supply issue to you, it’s personal to the rest of us. The pharmacist, GP and most importantly – the patient.

For more information, contact [pharmamail@nsf.org](mailto:pharmamail@nsf.org) or visit [www.nsfpharma.org](http://www.nsfpharma.org)

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