

Are we moving towards a new definition of essential medicines?

Sir,

At the outset, we take the opportunity to congratulate the editorial team for the timely editorial “Are we moving towards a new definition of essential medicines?” by Manikandan published in your reputed journal.^[1] The World Health Organization (WHO) published the first essential medicines list in 1977 and since then, the list has been revised every 2 years. The current one is the 19th model list published in April 2015. The importance of essential medicine list of WHO lies in the fact that it serves as a model for the development of national and institutional essential medicine list. There is paucity of criticism on WHO essential medicine list and in this perspective, the present editorial stands as a welcome initiative.

The editorial mentioned alcohol-based hand rubs are not superior to soap and water, but are more expensive.^[1] In this regard, WHO suggested that alcohol-based hand rubs are quick, simple, efficient, and handy and fulfill the highest standards of safety in relation to the prevention of cross-infection.^[2] Further, majority (90%) of studies also suggested that alcohol-based hand rubs are superior to soap and water hand washing and, hence, should be used as the first choice for hand hygiene (for non-soiled hands) whenever available.^[2]

The editorial also mentioned that daclatasvir and dasabuvir are investigational agents for treatment of hepatitis C infection that find a place in the 19th Model List of Essential Medicines.^[1] This brings to notice that daclastvir and dasabuvir have been already approved by the US Food and Drug Administration (US FDA) and the European Medicines Agency (EMA) to treat hepatitis C virus (HCV) infections.^[3-6]

The editorial also stated that the drug bedaquiline (for multidrug-resistant tuberculosis) has not been registered by any drug regulatory authority as yet.^[1] However, bedaquiline was approved by the USFDA in December 2012 for the treatment of adults with multidrug-resistant pulmonary tuberculosis for whom an effective treatment regimen is not otherwise available.^[7] On Dec 20, 2013, the EMA’s Committee for Medicinal Products for Human Use (CHMP) also granted a conditional marketing

authorization for bedaquiline for use as part of a combination therapy for pulmonary multidrug-resistant tuberculosis in adult patients.^[8] In a recent commentary in the Bulletin of WHO, Magrini *et al.* advocated the inclusion of bedaquiline owing to the public health relevance and severity of the condition and the lack of alternative treatment options.^[9]

This editorial invites further scrutiny of the WHO essential medicines list 19th version, which may prove beneficial for shaping our own National Essential Medicines List which is currently in the process of development.

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Conflicts of interest

There are no conflicts of interest.

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