



Medicine Brand Changes

Patient acceptance of a medicine brand change can be influenced by many factors including their own beliefs, the attitudes of health professionals, misunderstandings and lack of information about the change.

The introduction to the market of a generic medicine, especially when replacing the innovator counterpart, is often met with suspicion and concern by health care providers and patients. Concerns mainly involve issues of effectiveness and safety. Generic medicines may be perceived as inferior due to their lower cost and country of origin.

When an innovator product is replaced with a generic alternative, there are many issues that must be taken into consideration.

Prescribers attitudes towards generic substitution are most often related to their general prescribing behaviour, perception of therapeutic efficacy, beliefs about generic medicines and previous experience with using generic alternatives, including any negative effects.¹

Pharmacists may consider the overall quality of the medicine as well as the potential for patient confusion and their comfort with a brand change.

Patients undergoing a brand change to a generic are generally most concerned about potential changes in therapeutic effects, adverse effects and practical issues relating to use (e.g. size, shape, appearance). Increasing age is associated with less favourable attitude towards generic medicines and patients are often less accepting of using a generic medicine to treat a serious disease.²

Differences in appearance, and brand loyalty

Generic medicines often differ in appearance and packaging from the innovator product which may cause anxiety and confusion in patients. Those receiving pharmacological treatments for psychological disorders may be especially vulnerable to this.³ Changing the colour, taste or form of a medicine can result in non-adherence. Although there is no evidence that generic medicines are inferior to innovator products, patients may often resist changing from a brand they know well to a generic equivalent which may look different.⁴ Patients prefer to stick to a brand name medicine if they have already been familiarised with it.¹ The longer a generic brand has been available, the more likely it is used by pharmacists and prescribers. Prescriber and pharmacist habits and preferences may be influenced by informational constraints, loyalties to pharmaceutical companies and desire to satisfy patients.²

Colour and form and public acceptance of brand change- Losec to Losec MUPS

The importance of colour and form for the acceptance of a product was clearly demonstrated in the Netherlands when Losec was switched to Losec MUPS. Both branded products originated from the same company and bioequivalence and pharmacodynamic studies had established that they were therapeutically equivalent. However, shortly after the introduction of Losec MUPS a large number of adverse reactions – about 25% were of reduced therapeutic effect- were reported to the Netherlands centre for pharmacovigilance.

Although subtle changes in pharmacokinetics and patient response cannot be completely excluded, this example does provide good evidence that form and shape are important in the perception of a difference between two brands of an equivalent medicine.⁵

Generic Medicines & Brand Change

Resources

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