

To establish a list of essential medicine (EM) in a rich country is not of the same nature that in a poor country, like that was made by the WHO. It is a question here of giving the priority to what is necessary and sufficient to treat effectively 95 % of the patients and additionally to save money. The objective is above all to the advantage of the patients.

Such lists, which answer an economic concern, will be inevitably restricted (between 100 and 200 molecules of different active products).

Next to a list of EM has to exist a complementary list of necessary and sufficient medicines for the rarer affections (5 %).

It is advisable to manage three steps:

- 1) Establish a first list by a negotiation between a group of non-specialized practitioners and a group of internists.
- 2) Make adopt this list and widen gradually the number of prescribers among the general practitioners and the internists, then among the specialists, by making sure by a regular evaluation that the prescribing doctors perceive fully the interest of this orientation and apply it really in their prescriptions to more and more patients.
- 3) Inform in a criticize way all the healthcare professionals and the patients.

More than ten thousand diseases do exist ( CIM10<sup>1</sup>) and six-eight thousand medicines are available.

An increasing number of patients, especially among the old subjects, suffers simultaneously from several diseases (comorbidity).

How to help the general practitioners to optimize the prescriptions and the follow-up of each? The help software for the prescription should gradually put in preferential position the EM.

Every doctor prescribes at most hundred different medicines. This datum must be confirmed. It is likely that this comes true in different countries.

The medium-term objective would thus be to make coincide the list of EM and the list limited by every general practitioner and in a later time, of every specialist.

It would be necessary to know with more precision the structure of these prescriptions.

(Distribution of the pathologies, and distribution of medicines - current state) in connection with the prescriptive intensity and with the intensity of the commercial promotion to which the doctors are exposed.

These knowledges are at hand.

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<sup>1</sup> Classification statistique internationale des maladies et des problèmes de santé connexes