

# Health system interventions for the cost containment of drugs used for cardiovascular diseases: A systematic review and exploration of how the results could be adapted to the Sri Lankan context

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## Background

- Cardiovascular disease (CVD) in low and middle-income countries (LMICs), accounts for over 80% of global CVD-related deaths
- The high cost of drugs is a major concern in not of managing CVD
- The **Intervention Scalability Assessment Tool (ISAT)** was developed to help policymakers and practitioners to assess the feasibility of scaling up health interventions

## Objectives

1. To systematically review existing literature on interventions for the cost containment of drugs used for CVDs
2. To explore the adaptability of identified interventions to Sri Lanka by using the ISAT, with participation from Sri Lankan healthcare stakeholders, that can also be adaptable to other LMICs

## Methodology

### Component one:

- A systematic search across three databases (MEDLINE, Web of Science and EMBASE) to identify relevant health system interventions
- (PROSPERO registration No: CRD42022367957)

### Component two:

- The ISAT assessed the feasibility of adapting the identified interventions to Sri Lanka
- Structured interviews with 25 Sri Lankan stakeholders representing five groups:



- Radar plots of each intervention theme were done based on participants ratings with ISAT
- Ethical approval – Ethics review committee at Post Graduate Institute of Medicine, Sri Lanka (ERC/PGIM/2022/193)

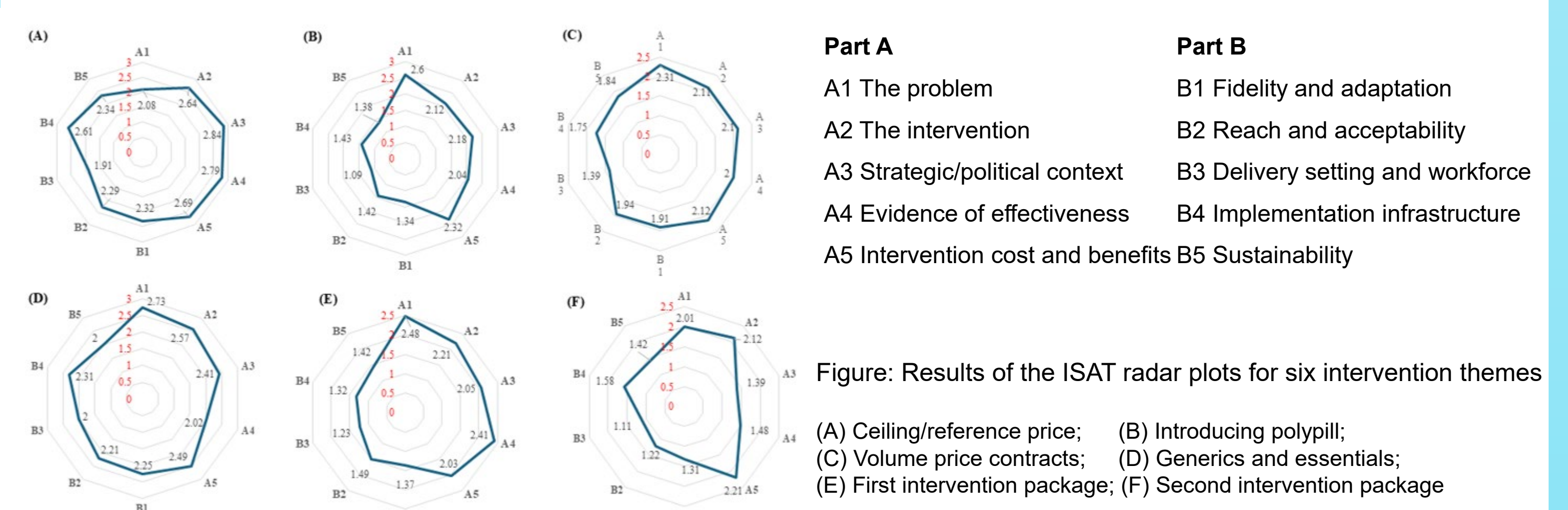
## Results

### Component one:

- Nine publications identified
- National scale (n=05), regional levels (n=04)
- Majority (n=07) were published in developed countries
- The identified interventions were categorised into six intervention themes:
  - Imposing a ceiling price or reference price;
  - Introduction of the polypill;
  - Introduction of volume price contract initiatives;
  - Prescribing generic and essential drugs;
  - First intervention package including generics, essential medicine, 90-day drugs, and free delivery; and
  - Second intervention package including discounts, rebates, cost-free medicine, and bundling.

### Component two:

- Radar plots showed methods of setting ceiling prices and controlling generic drug prescribing were the most popular intervention themes
- Other intervention themes were less popular



## Conclusion

- The study provides a roadmap for future interventions based on successful scaling, emphasising the importance of understanding contextual variables and encourages stakeholder participation in policy assessments and advocacy
- The findings highlighted the potential for enhancing the access to affordable CVD drugs not only in Sri Lanka, but also adaptable to other LMICs
- These outcomes can contribute to policy decisions, aimed at reducing the significant global burden of CVD