South African Society of Psychiatrists

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STATEMENT ON PSYCHOTROPIC DRUGS SHORTAGES IN THE COUNTRY

The South African Society of Psychiatrists has been receiving reports from its members in the recent months regarding the shortage of essential medications for the treatment of mental disorders in the public health sector. These shortages seem to affect the whole country, but most reports have been received from our members in the Gauteng, KwaZulu Natal, Western Cape and Eastern Cape provinces.

Almost all mental disorders are affected by the drug shortages but of particular concern is that there are several drug stock outs for the treatment of severe mental illness such as schizophrenia, bipolar disorder and major depressive disorder. Some psychiatrists report that the management in some hospitals prohibit their psychiatrists from issuing private prescriptions for families who want to consider purchasing some drugs from private pharmacists when there are psychotropic drug stockouts. While psychiatrists could consider alternative drugs for the treatment of mental disorders, these medications are very limited and are soon to run out too. For instance, psychiatrists have used the more expensive amisulpride when there is a shortage of olanzapine for the treatment of schizophrenia but amisulpride is in limited supply and runs out as well. In some cases, even if such an alternative is considered, patients may still relapse as they are only responsive to their usual medication.

The impact of the psychotropic drug shortages is devastating to the patients, the health facilities as well as the community at large. The relapses that patients are at risk of are harmful to the patients' overall health and prove to be even more difficult to treat. When patients relapse there is increased utilisation of hospital beds that are already a scarce resource. Patients are then left waiting for beds in emergency departments of hospitals for hours to even days. Patients who are waiting for beds in emergency departments suffer a variety of human rights abuses as emergency departments are not designed to be hospital wards, the emergency staff is not trained to nurse patients with mental illness, and the processes of emergency departments are not suitable for inpatient care. The use of emergency departments as waiting areas for psychiatric beds compromises the care of patients with other medical emergencies.

The management of hospitals and the provincial departments of health have provided several explanations for the drug shortages but none seem to sufficiently explain why so many drugs made by different pharmaceutical companies for multiple disease areas would run out at once. We call on the minister of heath to investigate this disastrous situation and provide a speedy resolution for the sake of our patients and the community at large. The South African Society of Psychiatrists is available to engage with the minister of health in this regard and assist where it is possible to do so.

Dr Mvuyiso Talatala

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