

ESSENTIALS DRUG PRICE MONITORING SYSTEM

National Drug Policy

Department Of Health

Report for AUGUST 2005

ESSENTIALS DRUGS ITEMS	TYPE	PREVAILING PRICE			RANGE AUGUST-05		OUTLET W/ LOWEST PRICE FOR AUG 05		
		JUNE-05	JULY-05	AUGUST-05	LOW	HIGH	PRO	PVT.	GOVT.
ANTI-INFECTIVES									
Metronidazole 500 mg tab	G	10.00	10.00	10.00	1.00	10.55	4b,5,10		
	B	19.75	19.75	19.75	11.50	26.00			10,crg
Metronidazole 125 mg / 5 mL susp., 60 mL bottle	G	75.00	75.00	75.00	25.80	80.00	2,6		
	B	110.75	110.75	110.75	80.85	147.50			crg,12,11
Chloramphenicol 500 mg caps.	G	11.00	11.00	11.00	1.54	12.00	6,9,12		
	B	42.00	42.00	42.00	10.00	48.00		5,7,10	
Chloramphenicol 125 mg / 5 mL susp., 60 mL bottle	G	88.00	88.00	88.00	36.50	90.00			6,9,11
	B	NPM	NPM	NPM	23.00	479.90	5,9		
Doxycycline 100 mg caps.	G	NRS	NRS	NRS	1.50	55.00			4a,2,9
	B	57.10	57.10	38.00	4.00	139.75		5	
Cefalexin 500 mg caps	G	17.40	17.40	17.40	5.85	18.50	8		
	B	29.30	29.30	29.30	15.35	49.50		car	
Cotrimoxazole 800 mg SMZ + 160 mg TMP tab.	G	15.60	15.60	15.60	2.00	15.60			8
	B	28.75	28.75	28.75	5.10	38.25			car,12
Cotrimoxazole 200 mg SMZ + 40 mg TMP / 5 susp., 60 mL bottle	G	88.00	88.00	88.00	50.00	88.60		6,11	
	B	88.00	88.00	88.00	45.00	154.00	4b,9		
Amoxicillin 500 mg caps.	G	6.75	6.75	6.75	2.75	11.00			8
	B	14.00	14.00	14.00	10.40	18.75			11
Amoxicillin 250 mg / 5 mL susp., 60 mL bottle	G	75.00	75.00	75.00	0.35	97.90		12	
	B	126.00	120.00	120.00	87.40	168.00	crg		
Pen G. Benzathine 1.2 M u.I vial	G	n / a	135.50	NRS	145.00	145.00		6	
	B	205.00	205.00	NRS	175.00	205.15		5	
ANALGESIC / ANTIPYRETIC									
Paracetamol 500 mg Tab.	G	1.00	1.15	1.00	1.00	2.00	5,6		
	B	3.00	3.00	3.00	1.50	20.32			8,9,10
Paracetamol 250 mg / 5 mL syrup / susp., 60 mL bottle	G	NRS	NRS	NRS	22.50	29.25	4a,7,9		
	B	105.00	96.00	110.25	65.90	140.25		2,6,9	
NSAID									
Mefenamic Acid 500 mg tab/ caps	G	4.90	4.90	4.90	1.00	8.00	8,9,10		
	B	13.60	13.60	13.60	12.90	31.25		2,4b,6	
ANTI-TB									
Short-Course Chemotherapy (SCC) Drug Type 1 Blister pack (Rifampicin 450 mg caps Isoniazid 300 tab. Pyrazinamide 500 mg tab.	G	NPM	NPM	NPM	40.50	40.50	8,10,12		
	B	NRS	NRS	NRS	NRS	NRS		car,crg,7	
Type II Blister (Rifampicin 450 mg cap,Isoniazid 300 mg tab.)	G	NPM	NPM	NPM	1.90	1.90			8
	B	35.25	NPM	NPM	31.65	34.60		5	
Isoniazid 400 mg tab.	G	2.10	2.10	2.10	2.10	2.10			
	B	1.60	NRS	NRS	1.60	2.25		4a	
Rifampicin 450 caps / tab	G	13.75	13.75	13.80	7.80	19.50	6,8		
	B	29.60	29.60	29.60	13.75	33.90			7
Rifampicin 200 mg / 5 mL susp., 120 mL bottle	G	NPM	NPM	NPM	93.00	93.00			8,9
	B	394.50	394.50	350.00	112.10	468.75		2,3	
Ethambutol 400 mg Tab.	G	4.75	4.75	4.75	1.95	4.75	4b,5		
	B	10.25	10.25	10.25	8.80	10.80	7	10	
Pyrazinamide 500 mg tab / caps.	G	4.20	4.20	4.20	3.70	5.00			11,car
	B	6.45	4.75	6.45	4.05	7.40			crg
CARDIO-VASCULAR									
Metoprolol 50 mg tab.	G	NPM	NPM	NPM	3.70	5.00	5		8
	B	3.75	3.75	3.75	1.29	16.23			
Nifedipine 5 mg caps. / tab	G	NPM	NPM	NPM	10.00	10.00		9	
	B	12.15	12.15	18.00	4.75	19.40	4b		
Furosemide 40 mg Tab.	G	NPM	NPM	NPM	1.00	3.00	9		
	B	9.70	9.70	9.70	6.52	12.00		7	
Captopril 25 mg tab.	G	NRS	NRS	NRS	0.00	0.00		6	
	B	26.50	26.50	26.50	10.40	35.25	11		
Isosorbide Dinitrate 10 mg tab.	G	NRS	NRS	NRS	NRS	NRS		10	
	B	11.00	11.00	11.00	7.25	22.00		10,crg	
Digoxin 250 mcg tab.	G	NRS	NRS	NRS	NRS	NRS	12,crg		
	B	3.60	3.60	3.65	3.27	8.00	car,7		
Aspirin 80 mg tab.	G	NRS	NRS	NRS	NRS	NRS			5
	B	1.80	1.70	1.70	1.50	2.50			9
SERUM / VACCINE									
Live Attenuated Measles, Mumps & Rubella (MMR) Vaccine. Monodose Vial	G	NRS	NRS	NRS	NRS	NRS			12
	B	NPM	NPM	NPM	427.75	427.75			11,9
Anti - Tetanus 1,500 IU , 1.5 amp.	G	NRS	NRS	NRS	NRS	NRS			5
	B	168.75	168.75	168.75	20.00	300.25			4b,7
ANTISEPTIC									
Povidone - Iodine 10 % , 60 mL Bottle	G	80.00	80.00	80.00	80.00	80.00			6
	B	84.25	84.25	84.25	80.00	96.00			7,9

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		JUNE-05	JULY-05	AUGUST-05	LOW	HIGH	PRO	PVT.	GOVT.
ANTI-ASTHMA									
Salbutamol 100 mcg / dose X 200 doses, Metered dose Inhaler	G	NRS	NRS	NRS	NRS	NRS			8,crq
	B	345.75	345.75	345.75	246.8	379.3		5	
Terbutaline 250 mcg / dose x 200 Doses, Metered-Dose Inhaler	G	NRS	NRS	NRS	NRS	NRS		6	
	B	509.25	509.25	509.25	39.25	510.65			6
ORAL HYPOGLYCEMIC									
Regular insulin (Recombinant DNA Human) 100 IU . 10 mL vial	G	NRS	NRS	NRS	NRS	NRS			6
	B	1,058.00	1,058.00	1,053.00	100.3	1372			7
Glibenclamide 5 mg tab	G	NPM	NPM	NPM	1.2	1.2		4b	
	B	9.75	10.00	8.25	3.1	12.51		6	
CORTICOSTEROIDS									
Dexamethasone 500 mcg tab.	G	1.45	NRS	NRS	1.4	1.55			7
	B	4.60	6.00	6.00	3.1	20.85			9
Prednisone 5 mg tab.	G	3.00	3.20	3.20	0.75	4.8		5	
	B	3.00	2.15	2.15	2.15	9.25			2,11,crq

Legend:

- G - means "Generics"
- B - means "Branded"
- Prevailing Price - means the most Frequently observed price for the covered
- Range - means the lowest and highest price for the period covered
- PRO - means "Private Retail Outlet"
- Pvth - means "Pharmacy Of Private Hospital"
- Pubh - means "Pharmacy of Public Hospital"

NOTE: The number inside the cell under the heading " PRO" or "Pvth" or "Pubh" represent the region where the outlet with the lowest price recorded for the period is located.

- NRS - no report submitted
- NPM - means no prevailing mode

NOTE : Please contact the correspond center for Health Development for details of the Price of being monitored.

Prepared by:


JAY MARTINEZ

COMPUTER OPERATOR IV
NDP - PMU - 50

2/17/06
DATE

Reviewed by:


JASMIÑA A. ACBANG

PHARMACIST III
NDP - PMU - 50

Feb 17, 2006
DATE

Recommending approval:


DR. ROBERT LOUIE P. SO

PROGRAM MANAGER
NDP - PMU - 50

2/17/06
DATE

Approved for released:


ALEXANDER A. PADILLA
UNDERSECRETARY OF HEALTH
Project Executive Officer, Pharma - 50

2/20/06
DATE

REFERENCE:

Format and content of table

- Section 6, Rule IV, DTI, DA, DOH, DENR, Joint Administrative Order NO 1's 1993 entitled " Rules and Regulation implementing RA - 7581 - An Act providing protection to consumer by stabilizing the price of basic necessities during emergency situations and like occasions.
- DO NO.238 T's 2000 as amended by DO NO. 285 - H,s 2002 Memorandum NO. 124's 2003

Methodology; List of drugs

For details contact the following:

- EDPMS National Drug Policy Staff Department Of Health.
Tel no. (2) 7411366
- Standard Licensing and Regulation Division of the Center of Health Development nearest you.

* Based on the reports submitted by 13 Centers for Health Development for the month of August 2005

- 2. CHD- Tuguegarao
- 3. CHD - Pampanga
- 4. CHD - Calabarzon
- 4. CHD - Mimaropa
- 5. CHD - Bicol
- 6. CHD - Iloilo
- 7. CHD - Central Visayas
- 8. CHD - Eastern Visayas
- 9. CHD - Zamboanga Peninsula
- 10. CHD - Northern Mindanao
- 11. CHD - Davao
- 12. CHD - Socskargen
- Car
- Caraga