

Misuse of drug patenting could cost the health system billions

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(Medical Xpress)—Companies may be misusing the drug patenting system in order to gain control over high-cost drugs in Australia, research from the Melbourne Law School has found.

The research, published in *PLOS ONE* on Saturday, looked at patents on 15 high-cost or "blockbuster" drugs in Australia over the last 20 years.

It found an average of 50 patents covered each [blockbuster drug](#), most of which were owned by companies that did not invent the drug.

Lead author Professor Andrew Christie, Foundation Chair of Intellectual Property at Melbourne Law School, said while there was much concern about companies abusing the [patent system](#) to keep drugs expensive, the research suggests that the blame may be being placed on the wrong party.

"It is the non-originator drug companies – those that do not develop [new drugs](#) – that are taking out the most patents. We are not sure why, but we suspect it is to ride on the coat tails of the drug's success, such as by owning an alternative formulation or delivery mechanism for the drug", he said.

With high and increasing drug costs in Australia, the potential misuse of the patenting system may come at a high cost for the health system.

"The 15 drugs in our study cost the country more than \$17 billion over

two decades. There are suspicions that abusive patenting by the big pharmaceutical companies is keeping that cost high."

"Our research shows that patenting by [generic manufacturers](#) and other players may be just as important."

The team of researchers also includes Professor David Studdert of the Melbourne Law School and School of Population and [Global Health](#) and Professor Peter McIntyre of the Health Innovations Research Institute at RMIT University.

The research paper, "Patents Associated with High-Cost Drugs in Australia," can be found on the *PLOS ONE* website.

More information: www.plosone.org/article/info%3Adoi%2F10.1371%2Fjournal.pone.0060812

Provided by University of Melbourne

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