The complicated access to medicines in Mexico and the economic implications

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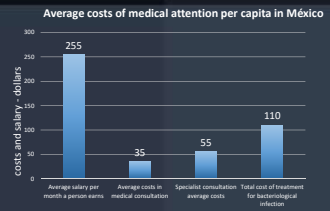
Abstract:

Mexico is experiencing a crisis in the health sector, both public and private. The public sector has excess of beneficiaries, lack of infrastructure and human personnel; Making this alternative an odyssey, where some patients are fortunate to be attended at the time, but others not, creating an epidemiologically risky asymmetry.

Even with the financial crisis facing Mexicans, people opt for private care, the great limitation in this regard is the cost of private health care for each person.

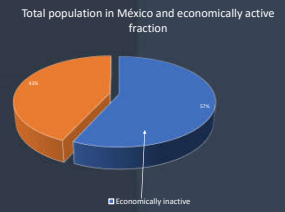
Analyzing the price of medical care in our country, the national unit cost per consultation of private family care has an average cost of $ 35 dollars; Consultation with a specialist can reach up to $ 55 dollars.

By contextualizing the problem and as an example, we could mention that a pathology of bacterial etiology that requires an antibiotic to fight it, it costs between $ 22 and $ 55 dollars, with a total between medical consultation and pharmacological treatment up to $ 110 dollars approximately.



Graphic 1. Average costs of medical care in México. In case of treatment of a simple infection, the total costs are about 55 dollars, not considering catastrophic expenses due to serious illness. In many cases, only one person contributes money to family expenses. .

On the other hand, from a social economic perspective, we observe that, of the country's 119 million inhabitants, only 50.7 million are economically active, that is, less than half the population; Of this fraction, 67.25% earn less than $ 255 dollars per month, and in many cases, only one person contributes money to family expenses.



Graphic 2: Total population in México, with 117 million inhabitants, and only 50.7 million are economically active (43%)

Then our question is, Who can really have access to health in Mexico?

Despite this disconcerting scenario, there are measures that can be applied from the medical consultation to the pharmacological dispensation, which could reduce the impact on the patient's family economy. This implies respecting the General Health Law on medicines and the Mexican pharmaceutical policy by all professionals involved in the health - disease cycle.

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