International Journal of Pharmacology and Clinical Research 2025; 7(2): 352-358

International Journal of Pharmacology and Clinical Research



ISSN Print: 2664-7613 ISSN Online: 2664-7621 Impact Factor: (RJIF) 8.29 IJPCR 2025; 7(2): 352-358 www.pharmacologyjournal.in Received: 14-07-2025

Accepted: 18-08-2025

Ankit Raj

B.Pharmacy, 4th Year Student, IIMT College of Pharmacy, Uttar Pradesh, India

Bablu

B.Pharmacy, 4th Year Student, IIMT College of Pharmacy, Uttar Pradesh, India

Anupam Kumar

B.Pharmacy, 4th Year Student, IIMT College of Pharmacy, Uttar Pradesh,

Ravi Kumar

Assistant Professor, Department of Pharmaceutical Chemistry, IIMT College of Pharmacy, Uttar Pradesh, India

Dr. Nikul Gupta

Professor, Department of Pharmacology, IIMT College of Pharmacy, Uttar Pradesh, India

Corresponding Author: Ankit Raj B.Pharmacy, 4th Year Student, IIMT College of

Pharmacy, Uttar Pradesh, India

The impact of generic drugs on healthcare: A review

Ankit Raj, Bablu, Anupam Kumar, Ravi Kumar and Nikul Gupta

DOI: https://doi.org/10.33545/26647613.2025.v7.i2e.129

Abstract

This article explores the multifaceted impact of generic drugs on global healthcare systems, highlighting their crucial role in reducing costs, improving access to essential medicines, and promoting equitable treatment outcomes. It traces the historical evolution of generics, from early pharmaceutical practices to modern regulatory frameworks such as the U.S. FDA's Abbreviated New Drug Application (ANDA) process and WHO's Prequalification Programme. The article examines regulatory standards across major regions-including the U.S., India, Japan, and Africa-while addressing disparities in oversight and quality control. It underscores the economic benefits of generics, both at the systemic and individual levels, and reviews evidence confirming their clinical effectiveness. Attention is given to the roles of pharmacists, nurses, and other healthcare professionals in fostering trust and adherence to generics. Finally, the article identifies persistent challenges—such as patent barriers, public skepticism, and regulatory inconsistencies—and outlines future opportunities in digital health, regulatory harmonization, and sustainable manufacturing. Overall, the paper emphasizes that generic drugs are indispensable to building cost-effective, resilient, and inclusive healthcare systems worldwide.

Keywords: Generic drugs, global healthcare, cost reduction, access to medicines, equitable treatment, regulatory frameworks, FDA ANDA

Introduction

Healthcare systems around the world are grappling with a dual crisis: rapidly rising costs and increasing demand for equitable access to medical care. While breakthroughs in medical science have led to highly effective treatments, the high price of branded pharmaceuticals continues to create barriers, especially in low- and middle-income countries (LMICs) and even among underinsured populations in wealthier nations. In this context, generic drugs have emerged as a vital tool for achieving cost-effective, equitable, and sustainable healthcare delivery.

Healthcare systems around the world are grappling with a dual crisis: rapidly rising costs and increasing demand for equitable access to medical care. While breakthroughs in medical science have led to highly effective treatments, the high price of branded pharmaceuticals continues to create barriers, especially in low- and middle-income countries (LMICs) and even among underinsured populations in wealthier nations. In this context, generic drugs have emerged as a vital tool for achieving cost-effective, equitable, and sustainable healthcare delivery.

Despite their clear benefits, the path of generic drugs has not been without challenges. Issues related to quality control regulatory oversight patient trust, and patent law complexities continue to influence their adoption and impact. Misconceptions regarding efficacy and safety, along with aggressive tactics by brand-name pharmaceutical companies to delay generic competition, have further complicated their widespread acceptance.

Moreover, the global landscape of generic drug regulation is fragmented. While countries like the United States and members of the European Union have established rigorous approval pathways, many developing nations struggle with inconsistent enforcement, inadequate quality assurance systems, and regulatory bottlenecks. This discrepancy can lead to disparities in generic drug quality and availability worldwide.

Historical Background of Generic Drugs

The story of generic drugs is intrinsically tied to the evolution of modern healthcare,

pharmaceutical innovation, and regulatory reform. While the concept of producing equivalent medicines dates back centuries, the formal development, regulation, and widespread use of generic drugs is a relatively modern phenomenon, shaped significantly by policy shifts, legal battles, and public health needs.

Early Roots and Pre-Regulatory Period

Before the establishment of standardized pharmaceutical regulations, most medications were compounded by pharmacists based on physician prescriptions. This era lacked consistent quality control, and the concept of a brand-name or generic product was largely absent. As industrialization advanced, pharmaceutical companies began producing branded drugs with consistent formulations, and the distinction between proprietary and non-proprietary medicines began to take form.

In the early 20th century, with increasing concerns about drug safety and consistency, regulatory frameworks began to emerge. The Pure Food and Drug Act of 1906 in the United States marked one of the first major government efforts to regulate medication content. This laid the groundwork for future policies that would shape the generic drug industry.

The Rise of Branded Pharmaceuticals

From the 1920s through the 1960s, the pharmaceutical industry was dominated by brand-name drugs. Companies invested heavily in research and development (R\&D), patent protections, and aggressive marketing. Branded drugs were often seen as superior, and the concept of producing cheaper, therapeutically equivalent alternatives remained underdeveloped.

However, this period also witnessed a growing awareness of the need for more affordable medications. Particularly in post-war economies and emerging nations, the cost of branded drugs posed significant barriers to healthcare access. This led to calls for the development of a regulated system that would allow the production of high-quality, lower-cost alternatives once patent protections expired.

The Kefauver-Harris Amendments (1962)

A major turning point in U.S. drug policy came with the Kefauver-Harris Drug Amendments in 1962, prompted by the thalidomide tragedy. These amendments mandated that drugs must be proven effective (not just safe) before receiving FDA approval. They also required manufacturers to demonstrate the efficacy of both brand-name and generic drugs.

This legislation began to lay the foundation for a more structured approval process for generics, although true regulatory pathways for generics would not emerge until two decades later.

Regulatory standards across countries

While the Hatch-Waxman Act revolutionized the U.S. market, other countries soon followed with similar reforms. Europe developed the European Medicines Agency (EMA) and national equivalents to oversee generic approval. Canada, Japan, and Australia also created abbreviated regulatory pathways, allowing for a controlled but efficient approval process.

Emerging markets began to see generics not just as economic tools but as lifelines for public health. In countries

like India Brazil and South Africa generics became central to national healthcare strategies, particularly in the treatment of HIV/AIDS tuberculosis and malaria India, in particular, emerged as a global powerhouse in generic manufacturing, earning the moniker the pharmacy of the developing world.

United States – The FDA Model

The U.S. Food and Drug Administration (FDA) sets a globally recognized benchmark for drug approval, including generics. Under the Abbreviated New Drug Application (ANDA) process, a generic drug must demonstrate:

- Bioequivalence to the reference listed drug (RLD)
- Same active ingredients, dosage form, strength, route of administration
- Comparable safety and efficacy profiles
- Strict manufacturing standards under Current Good Manufacturing Practice (cGMP)

Importantly, the ANDA pathway does not require preclinical (animal) studies or extensive human clinical trials if bioequivalence can be established. This significantly reduces the cost and time for approval while maintaining safety and quality. In 2022 alone, the FDA approved over 1000 generic drug applications helping reduce treatment costs for millions of Americans.

India - CDSCO and Global Manufacturing

India is a global leader in the manufacturing of generic drugs. The Central Drugs Standard Control Organization (CDSCO) is the national regulatory authority overseeing drug approval, supported by the Drugs Controller General of India (DCGI).

Regulatory requirements in India include:

- Demonstration of bioequivalence (for many but not all generics)
- Adherence to Schedule M of the Drugs and Cosmetics Act (similar to cGMP)
- Periodic inspections and product recalls if standards are violated

India supplies over 40% of generic drugs consumed in the U.S. and is home to WHO-prequalified manufacturers that support global health programs. However, the regulatory system faces challenges, including underfunding, limited staff, and occasional concerns over data integrity and batch quality

Japan – PMDA and Quality-Driven Standards

Japan's Pharmaceuticals and Medical Devices Agency (PMDA) has traditionally favored branded drugs, but the government has aggressively promoted generics in recent years to combat rising healthcare costs.

Japanese regulations emphasize:

- Rigorous bioequivalence trials
- Stability testing under Japan-specific climate conditions
- Manufacturing under GMP guidelines with Japanspecific adaptations

Canada – Health Canada

Canada's regulatory body, Health Canada follows processes similar to the U.S. FDA. Generic drugs must meet standards for:

- Bioequivalence
- GMP-compliant manufacturing
- Labeling and packaging regulations under Canadian law

Canada has streamlined pathways for generic approvals and also participates in international harmonization initiatives.

WHO Prequalification Programme

For many low- and middle-income countries that lack robust national regulatory authorities, the World Health Organization (WHO) Prequalification Programme serves as a critical quality assurance mechanism. Established in 2001, it helps international donors and procurement agencies identify high-quality generic drugs, particularly for treating HIV/AIDS tuberculosis malaria and reproductive health

Drugs approved through this program must:

- Meet international standards for efficacy, safety, and quality
- Be manufactured in inspected facilities
- Undergo post-market surveillance and pharmacovilance

WHO prequalification has enabled access to affordable, safe generic drugs in over 100 countries and is widely respected in global health circles.

Africa - NAFDAC, SAPHRA, and Harmonization Efforts

In Africa, regulatory capacity varies widely. Countries like South Africa and Nigeria have relatively strong authorities SAPHRA and NAFDAC respectively—but others struggle with fragmented systems.

Key challenges include

- Inconsistent enforcement
- Weak border control and counterfeit risks
- Limited lab testing infrastructure
- Dependency on WHO prequalification

However, there are ongoing harmonization efforts such as the African Medicines Agency (AMA) and African Medicines Regulatory Harmonization (AMRH) initiative, aiming to streamline approvals, share data, and build local capacity.

International Harmonization – ICH, PIC/S, and Beyond

ICH (International Council for Harmonization of Technical Requirements for Pharmaceuticals for Human Use) Creates guidelines for quality, safety, and efficacy

PIC/S (Pharmaceutical Inspection Co-operation Scheme) Promotes GMP standards and international inspections IMDRF (International Medical Device Regulators Forum)Expanding into drug-device combinations

Economic Significance of Generic Drugs

The economic significance of generic drugs cannot be overstated. They are a cornerstone in the global effort to reduce healthcare costs while expanding access to treatment. As pharmaceutical spending continues to rise especially for chronic and life-threatening conditions—generic medications offer governments, insurers, healthcare providers, and patients a practical solution to budgetary constraints without compromising therapeutic outcomes.

Cost Savings in Healthcare Systems

The primary economic benefit of generic drugs is cost reduction. Because generic manufacturers do not bear the high costs associated with drug discovery, clinical trials, and aggressive marketing, they can offer the same medications at a fraction of the price of branded drugs.

Economic Impact on Patients and Households

Beyond system-level savings, generics significantly reduce out-of-pocket spending for patients. In countries lacking universal health coverage, or where insurance schemes are limited, this can mean the difference between treatment adherence and abandonment.

In developing countries generic medications enable millions of patients to afford long-term treatments for conditions such as diabetes, hypertension, epilepsy, and asthma.

In low-income households cost is a key barrier to prescription fulfillment. Studies show that patients are twice as likely to adhere to generics compared to branded medications due to affordability.

Boosting Pharmaceutical Competition

The introduction of generic versions increases market competition which not only reduces the price of the generic drugs themselves but often compels brand-name manufacturers to lower their prices as well.

Economic Outcomes

- Massive cost savings for patients with chronic illnesses:
 e.g., generic insulin, heart medications, and antibiotics.
- PMBJP has saved Indian consumers an estimated ₹18,000 crore since its inception.
- It has created jobs in distribution, logistics, and pharmacy services, contributing to economic development.
- The success of this program demonstrates how state intervention and strategic planning can dramatically improve affordability and accessibility.

Economic and Health Outcomes

- ART coverage expanded from a few thousand patients in 2000 to over 18 million in Sub-Saharan Africa by 2020
- Mortality and transmission rates dropped dramatically.
- Economic productivity in affected countries improved, with people living longer, healthier lives.

This success was made possible by a combination of compulsory licensing WHO prequalification and international funding (PEPFAR, Global Fund) all of which relied on cost-effective, quality-assured generics

Economic Impact on the Pharmaceutical Industry

Generic drugs also play a role in shaping the pharmaceutical industry itself:

Branded companies often experience revenue loss due to generic competition but are incentivized to invest in new drug development Some major companies have entered the generic market themselves or formed alliances with generic manufacturers to diversify revenue streams.

The rise of biosimilars generic versions of biologic drugs—is creating new economic opportunities and challenges.

Clinical Effectiveness and Patient Trust

While generic drugs offer undeniable economic advantages, their clinical effectiveness and the trust they garner among healthcare providers and patients are equally critical to their overall impact on public health. A medication that is affordable but not perceived as effective—or not trusted by patients can lead to poor adherence, suboptimal outcomes, and persistent health disparities.

Clinical Effectiveness: What the Evidence Shows

The clinical effectiveness of a generic drug is fundamentally tied to its bioequivalence to the branded reference product. Regulatory agencies such as the U.S. FDA EMA and WHO require that generic drugs demonstrate:

Numerous peer-reviewed studies and meta-analyses have confirmed that, when properly manufactured and approved generic drugs are just as clinically effective as their branded counterparts across a wide range of therapeutic areas.

The Issue of Narrow Therapeutic Index (NTI) Drugs

There is some clinical concern about Narrow Therapeutic Index (NTI) drugs—medications where small changes in blood concentration can lead to toxicity or loss of efficacy. Examples include:

- Warfarin (anticoagulant)
- Levothyroxine (thyroid hormone)
- Carbamazepine (antiepileptic)

In such cases, switching between different generics or between brand and generic may require close monitoring, but this is a regulatory and management issue—not an indictment of the clinical quality of generics themselves. Regulators in the U.S. and EU have specific guidelines for NTI generics, often requiring tighter bioequivalence ranges and more robust testing.

Patient Trust: A Complex Social and Psychological Issue

Despite scientific validation, patient trust in generic medications varies significantly across demographics and cultures. Some patients believe generics are:

- Less effective
- Lower quality
- Associated with more side effects

In the U.S., although generics are widely used, surveys have shown that only about 70% of patients believe generics are as effective as brands—despite scientific evidence.

6. Role of Pharmacists and Health Care Professionals

Generic drugs have proven their economic and clinical value, but their success in real-world practice depends heavily on the healthcare professionals who prescribe, dispense, and educate patients about them. Among these professionals, pharmacists, physicians, and nurses play vital and complementary roles in ensuring that patients receive appropriate medications, adhere to their treatments, and feel confident in the quality and effectiveness of generics.

Pharmacists: Gatekeepers of Generic Drug Utilization

Pharmacists are often the **first point of contact** for patients receiving medications. Their unique position in the healthcare system allows them to play a critical role in:

- Generic substitution
- Medication counseling

- Patient reassurance and education
- Monitoring for adverse drug reactions

Generic Substitution Authority

In many countries, pharmacists have the legal authority to substitute a brand-name drug with a generic equivalent without consulting the prescriber, unless the prescription is marked "dispense as written" (DAW) or "no substitution." This power is a key driver of generic drug uptake.

- In the United States, laws differ by state, but generic substitution is generally encouraged and widely practiced.
- In the European Union, countries like France and Germany have national policies supporting substitution.
- In India, pharmacists are often expected to dispense generics, especially under government schemes like Jan Aushadhi.

Substitution must be done with care, especially for narrow therapeutic index (NTI) drugs, where changes in formulation could lead to altered drug levels.

Nurses and Allied Health Professionals: Support and Adherence Monitoring

Nurses, especially in primary care and community settings, also contribute significantly by:

- Educating patients on the correct use of medications
- Monitoring adverse reactions and compliance
- Supporting medication reconciliation during hospital admissions and discharges

They often bridge the communication gap between the physician's prescription and the pharmacist's counseling, reinforcing trust and encouraging continued use of generics.

Overcoming Professional Skepticism

While the majority of healthcare professionals support the use of generics, a minority still express reservations. These often stem from:

- Historical experiences with substandard generics, particularly in poorly regulated settings
- Concerns about manufacturing transparency or batchto-batch variability
- Mistrust in international suppliers

Addressing Skepticism

- Transparent communication from regulators about approvals and recalls
- Professional development to update clinical understanding of generics
- Involvement in policy development to build trust and ownership among healthcare workers

7. Challenges and Barriers

While generic drugs offer immense benefits in terms of cost savings and accessibility, their widespread adoption and impact face several challenges and barriers at various levels of the healthcare ecosystem. These obstacles range from regulatory hurdles to public perception issues, and from market dynamics to technological constraints. Understanding these challenges is critical for policymakers, healthcare professionals, and industry stakeholders to devise effective strategies to overcome them.

Regulatory and Quality Control Challenges Variability in Regulatory Frameworks

The quality, safety, and efficacy of generic drugs depend heavily on stringent regulatory oversight. However, regulatory capacity varies widely across countries, leading to:

- Inconsistent approval standards: Some countries may lack robust bioequivalence requirements or rigorous inspection protocols, risking substandard generics entering the market.
- **Delays in generic approvals**: Bureaucratic inefficiencies or resource constraints can slow down the market entry of generics.
- Lack of harmonization: Differences in standards between countries complicate international trade and global supply chains.

Quality Assurance and Manufacturing Issues

- Substandard or counterfeit generics: Especially in low- and middle-income countries (LMICs), counterfeit drugs and poor manufacturing practices undermine patient trust and health outcomes.
- Supply chain vulnerabilities: Dependency on a limited number of manufacturers for active pharmaceutical ingredients (APIs) can cause shortages or quality lapses.

Intellectual Property and Legal Barriers

- Patent Evergreening: Brand-name companies use minor modifications to extend patent protections, delaying generic competition.
- "Pay-for-Delay" Settlements: Agreements where brand manufacturers pay generics to postpone market entry.
- Data Exclusivity: Restrictions on generic manufacturers using clinical trial data from the innovator, delaying approval.
- Trade-Related Barriers: "TRIPS-plus" provisions in trade agreements can impose stricter intellectual property rules than the WTO's TRIPS agreement, limiting generic drug production.

Economic and Market Dynamics Market Consolidation

- Generic manufacturer consolidation has reduced competition, resulting in price increases and fewer suppliers.
- Smaller manufacturers may be unable to compete, limiting innovation and reducing supply diversity.

Reimbursement and Pricing Policies

- Lack of effective incentives for physicians and pharmacists to prescribe and dispense generics.
- Reimbursement policies sometimes favor brand drugs, especially in fee-for-service models.
- Patients may face higher out-of-pocket costs due to copayment structures or lack of insurance coverage for generics.

Technical and Clinical Barriers

 Narrow Therapeutic Index (NTI) drugs pose challenges due to the need for tight bioequivalence and monitoring when switching between products.

- Biologics and biosimilars require complex manufacturing and regulatory frameworks, limiting rapid generic uptake.
- Polymorphism and excipient differences may affect drug release and patient tolerability.

Healthcare System and Infrastructure Limitations

- Inadequate pharmacovigilance systems limit detection of adverse effects or quality issues with generics.
- Limited healthcare professional education on generic substitution and equivalence reduces confidence.
- Fragmented supply chains complicate quality assurance and consistent availability.
- Limited access in rural or underserved areas, where generic drugs could have the greatest impact.

8. Future Prospects

The future of generic drugs in healthcare looks promising, buoyed by advances in science, technology, policy innovation, and evolving global health needs. While challenges remain, emerging trends suggest generics will play an increasingly pivotal role in shaping affordable, equitable, and sustainable healthcare systems worldwide..

Regulatory Harmonization and Innovation

- Global initiatives aim to harmonize bioequivalence and quality standards, reducing duplication and accelerating approvals.
- Emerging economies are strengthening regulatory agencies, supported by WHO and regional partnerships, improving confidence in generics.
- Real-world evidence (RWE) and pharmacovigilance data will increasingly inform generic drug policies and approvals.

Digital Health and Artificial Intelligence

- AI-driven drug formulation and bioequivalence modeling can speed up generic development.
- E-prescribing systems integrated with decision support will default to generics, reducing prescriber bias.
- Patient-facing apps will provide information and reminders, improving adherence to generic therapies..

Addressing Social and Educational Barriers

- Training programs for healthcare professionals will increase confidence in prescribing and dispensing generics.
- Enhanced public education campaigns will continue to reduce stigma around generics.
- Community health workers will expand outreach to educate underserved populations.

Environmental and Sustainability Considerations

- Generic drug manufacturing is adopting greener practices, reducing chemical waste and energy consumption.
- Circular economy models and recycling of packaging materials will reduce environmental footprint.

Impact of Global Health Crises

• The COVID-19 pandemic highlighted the critical need for resilient generic supply chains.

- Lessons learned will drive investment in diversified sourcing and local manufacturing.
- Rapid generic production of essential medicines during emergencies will become a standard part of preparedness plans.

9. Conclusion

Generic drugs have fundamentally transformed healthcare by providing safe, effective, and affordable alternatives to brand-name medicines. Over the decades, they have evolved from being perceived as inferior substitutes to becoming cornerstones of modern pharmaceutical care worldwide. Their impact is felt not only in cost savings for patients and health systems but also in expanding access to essential medications, improving therapeutic adherence, and supporting public health goals.

This article has explored the historical development, regulatory landscapes, economic significance, clinical effectiveness, and roles of healthcare professionals in the generics domain. It has also delved into the global policy perspectives, challenges hindering their broader adoption, and promising future trends.

References

- 1. European Medicines Agency (EMA). Guidelines on Bioequivalence Studies [Internet]. 2022. Available from: https://www.ema.europa.eu/en/human-regulatory/research-development/scientific-guidelines
- 2. Kesselheim AS, Misono AS. The Hatch-Waxman Act and generic drug competition. N Engl J Med. 2020;362(2):106-13.
- 3. World Health Organization (WHO). Access to Medicines and Vaccines: Essential Medicines List [Internet]. 2021. Available from: https://www.who.int/medicines/publications/essentialmedicines/en/
- 4. Aitken M, Kleinrock M, Stoller M. Global medicine spending and usage trends: Outlook to 2023. IQVIA Institute for Human Data Science. 2019 [Internet]. Available from: https://www.iqvia.com
- 5. Danzon PM, Furukawa MF. Prices and availability of pharmaceuticals: Evidence from nine countries. Health Aff. 2011;30(11):2190-9.
- 6. Medicines Patent Pool. Annual Report [Internet]. 2023. Available from: https://medicinespatentpool.org
- 7. Wirtz VJ, Hogerzeil HV, Gray AL, et al. Essential medicines for universal health coverage. Lancet. 2017;389(10067):403-76.
- 8. Simoens S. Generic medicines market dynamics in Europe: A comprehensive review. Pharmacoeconomics. 2011;29(12):1053-64.
- 9. Kaplan W, Laing R. Local production of pharmaceuticals: Industrial policy and access to medicines. World Health Organization; 2005.
- 10. Dabbous F, Abou Jaoude A, Wakim P. Patient perceptions and attitudes towards generic medicines in the Middle East. Patient Prefer Adher. 2019;13:2375-84.
- 11. World Trade Organization (WTO). Declaration on the TRIPS Agreement and Public Health (Doha Declaration) [Internet]. 2001. Available from: https://www.wto.org/english/tratop_e/trips_e/doha_declaration e.htm

- 12. Hill A, Gotham D, van de Putte L. Generic competition and drug prices in the United States. J Generic Med. 2018;15(1):20-25.
- 13. National Pharmaceutical Pricing Authority (NPPA), India. Price Control Orders [Internet]. 2023. Available from: https://www.nppaindia.nic.in
- 14. World Bank. Pharmaceutical sector development and access to medicines [Internet]. 2022. Available from: https://www.worldbank.org
- 15. Morgan SG, Boothe K. Universal prescription drug coverage in Canada. Healthc Policy. 2016;12(4):58-69.
- 16. WHO Prequalification Programme. Guidelines and Policies [Internet]. 2023. Available from: https://extranet.who.int/prequal
- 17. Pedersen HS, et al. Barriers to generic medicine substitution: Physician perspectives. Eur J Clin Pharmacol. 2017;73(3):295-302.
- 18. Shrank WH, et al. The impact of generic drug use on medication adherence. Arch Intern Med. 2011;171(4):331-7.
- 19. Babar ZUD, et al. Generic medicines policy in emerging markets: Lessons from the Middle East. PharmacoEconomics Open. 2019;3(4):459-68.
- 20. European Commission. Pharmaceutical Strategy for Europe [Internet]. 2021. Available from: https://ec.europa.eu/health/human-use/strategy en
- 21. National Health Service (NHS) UK. Generic Medicines and Prescribing Guidance [Internet]. 2023. Available from: https://www.nhs.uk/conditions/medicines/generic
 - https://www.nhs.uk/conditions/medicines/generic-medicines/
- 22. Biotechnology Innovation Organization (BIO). Biosimilars: Opportunities and Challenges [Internet]. 2020. Available from: https://www.bio.org
- 23. World Health Organization (WHO). Global Action Plan on Antimicrobial Resistance [Internet]. 2023. Available from: https://www.who.int/publications/i/item/978924150976
- 24. International Generic and Biosimilar Medicines Association (IGBA). Annual Report [Internet]. 2023. Available from: https://www.igbamedicines.org
- 25. Rathi H, Biyani M. Knowledge, attitude, and perception of Indian population about generic versus branded medicines: A web-based study. Asian J Pharm Clin Res. 2021;14(2). doi:10.22159/ajpcr.2021.v14i2.40088
- U.S. Food and Drug Administration (FDA). Generic Drugs: Questions and Answers [Internet]. 2023. Available from: https://www.fda.gov/drugs/generic-drugs
- 27. Ahire et al. Patient knowledge, perceptions, and acceptance of generic medicines: a comparative study of science background vs general population in India. DoveMed Press. (Full text)
- 28. Exploring knowledge and perceptions of generic medicines among drug retailers and community pharmacists. Survey in Tamil Nadu, India. (PubMed)
- 29. The Impact of Generic Substitution on Health and Economic Outcomes: A Systematic Review. (PubMed/PMC)
- 30. Estimating Savings Opportunities From Therapeutic Substitutions of High Cost Generic Medications. (PubMed/PMC)

- 31. Dash A. Assessment of patient satisfaction with generic medication in emerging economy using the Treatment Satisfaction Questionnaire for Medication. SAGE Journals. 2021.
- 32. Opinion of primary care physicians regarding prescription of generic drugs: A cross-sectional study. (PMC)
- 33. Opinion of patients seeking primary care regarding prescription of generic drugs: A cross-sectional study. (PMC)
- 34. Knowledge and perception of consumers towards generic medicines in Saudi Arabia. (DovePress/PPA)
- 35. Generic prescribing in India: a stumbling block. Int J Res Med Sci. (msjonline.org)
- 36. Awareness about generic drug prescription amongst practitioners: a knowledge attitude practice survey at rural set-up. Int J Basic Clin Pharmacol. (IJBC Pharmacol)
- 37. Systematic reviews for the update of the WHO guideline on country pharmaceutical pricing policies. (WHO/NCBI Bookshelf)
- 38. Medical students' perceptions of generic medicines. J Prim Care Specialties. (Ovid)
- 39. Patient-level savings on generic drugs through the Mark Cuban Cost Plus Drug Company. (PMC/NCBI)
- 40. Reasons of generic medicines avoidance by patients in India: A quantitative investigation. Int J Psychosoc Rehabil.
- 41. Real world evidence in effectiveness, safety, and cost savings of generic levothyroxine: A systematic review. (PubMed) 2021.
- 42. The Impact of Generic Substitution on Health and Economic Outcomes: A Systematic Review. Appl Health Econ Health Policy. 2015.
- 43. Cost effectiveness analyses of antihypertensive medicines: A systematic review. 2017.
- 44. Perceptions of generic medication in the general population, doctors and pharmacists: A systematic review. 2015.
- 45. Assessment of patient satisfaction with generic medication in emerging economy using the TSQM scale (India). SAGE Journals. 2021.
- 46. Impact of generic drug entry on cost-effectiveness analysis. 2005.
- 47. Comparative analysis of cost and effectiveness of generic vs brand name antibiotics for uncomplicated UTIs. 2016.
- 48. What do users of generic medicines think of them? A systematic review of consumers' and patients' perceptions & experiences. 2016.
- 49. Evaluating public's knowledge, attitude and experiences towards generic medications in building healthcare policy. 2024.
- 50. Prospects and challenges of generic medicines adoption in India: Consumer and physician perspectives. Int J Life Sci Pharma Res.
- 51. Determinants of drug prices: A systematic review of comparison studies. 2021.
- 52. Do cost-effectiveness analyses account for drug genericization? A literature review and assessment of implications. 2021.
- 53. Potential clinical and economic impact of switching branded medications to generics. (PMC)

- 54. Comparison of generic and branded drugs on cost effective and cost benefit analysis (ceftriaxone in enteric fever in India). Annals Int Med Dent Res. 2017.
- 55. Anandhasayanam A, Kannan S, Rajamurugan R. A pharmacoeconomic study on Jan Aushadhi generics versus branded pharmaceutical formulations in India. Indian J Community Health. 2024. Available from: https://imsear.searo.who.int/handle/123456789/243421
- 56. Mohith N, Nalini GK, Deepak P. Analysis of cost between branded medicines and generic medicines in a tertiary care hospital (India). Available from: https://imsear.searo.who.int/items/96771521-448b-4896-ae29-b364048b911f/full
- 57. Vadgama VK, Gaekwad VL. Cost minimization analysis of generic and innovator formulations of antihypertensive drugs. Int J Basic Clin Pharmacol.
- 58. Cost comparison and economic implications of commonly used originator and generic chemotherapy drugs in India. 2013.
- 59. Ghooi RB, Kale VV, Sovani VB. Cost of medicines in India branded, generics and branded generics. Indian J Pharm Pharmacol. 2025.
- Cost of medicines for cardiovascular risk factors at ICMR Rational Use of Medicine Centre Hospitals of India
- 61. Cost analysis of various branded versus generic chemotherapeutic agents used for the treatment of early breast cancer India.
- 62. Government generic drug stores helped save 40% of medical bills for households: study about PMBJP/Jan Aushadhi stores in Assam & Rajasthan, India.
- 63. With pooled procurement, cancer drugs cost 82% less in India. Science Chronicle article summarising WHO bulletin
- 64. Patented drugs less affordable in India, but cheaper, says study. Economic Times.
- 65. Bhosle D, Sayyed A, Bhagat A, et al. Comparison of generic and branded drugs on cost effective and cost benefit analysis.
- 66. Welink G, Stahl M. Selection of the comparator product in the WHO Prequalification of Medicines Programme. SAGE Journals. 2013.
- 67. Bioequivalence | WHO Prequalification of Medical Products guidance on what is required to show multisource (generic) products are interchangeable with originator. WHO Extranet.