

Alberta Doctors' Digest

Drug shortages in a world of shifting trade

Drug shortages are no longer rare disruptions – they are a defining feature of modern health care. The problem spans specialties and geographies. In recent years, oncologists have been forced to ration cisplatin and carboplatin, two cornerstone chemotherapy agents. Hospitals have scrambled to source amoxicillin and penicillin during winter surges of infections. Even intravenous saline bags – once considered too mundane to worry about – became scarce across North America after hurricanes crippled production facilities in Puerto Rico.

These episodes underscore an unsettling truth: our access to essential medicines is only as stable as the global trade networks that supply them.

Why shortages are worsening

The pharmaceutical supply chain was built for efficiency, not resilience. Decades of cost-cutting concentrated production in a small number of overseas plants. The system works – until it doesn't. A single factory shutdown, export ban or natural disaster can cascade into shortages worldwide.

Layer onto this the fragility of just-in-time inventories, which keep warehouses lean but leave no cushion for disruption. Add in geopolitical tensions and climate-related disasters, and what once looked like isolated breakdowns are now recurring crises.

A physician's perspective

For those of us in practice, these shortages are not abstract. At least once a month I encounter a patient whose care is directly affected – whether it is an antibiotic unavailable at the pharmacy, an inhaler suddenly backordered or a substitution that requires recalculating doses and re-explaining treatment. Each of these encounters erodes trust and adds complexity to already strained care. The human cost of a fragile supply chain is measured in delayed therapies and the quiet anxiety of families who cannot find the medications they rely on.

Canada's response so far

Canada has taken steps to mitigate the problem, though they remain largely reactive.

- **Mandatory reporting:** Drug makers must now disclose current and anticipated shortages to the public *Drug Shortages Canada* database.
- **Emergency importation:** Health Canada has repeatedly relied on foreign-labeled products to fill urgent gaps – most visibly during the 2022-23 shortage of children's acetaminophen and ibuprofen.

What more Canada could do

The challenge is not just to manage shortages, but to prevent them. That will require treating the drug supply as a matter of national security.

- **Rebuild at home:** Canada still relies heavily on imports for basic generics. Incentives for domestic and regional manufacturing could help insulate the system from external shocks.
- **Create a safety net:** While Canada stockpiles medicines for pandemics, it lacks reserves of essential everyday drugs. A national critical medicines list could guide the development of a standing stockpile to protect against routine disruptions.

The bigger picture

Drug shortages sit at the crossroads of patient care and global trade. Left unchecked, the problem is likely to worsen as climate events and geopolitical rivalries intensify. But the trajectory is not fixed. The choice now is whether to treat medicine shortages as a recurring inconvenience or as a solvable threat to national health security.

Editor's note

The views, perspectives and opinions in this article are solely the author's and do not necessarily represent those of the AMA.

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