



REVOLUTION

AVANCES Y DESAFÍOS EN EL TRATAMIENTO DEL VIH

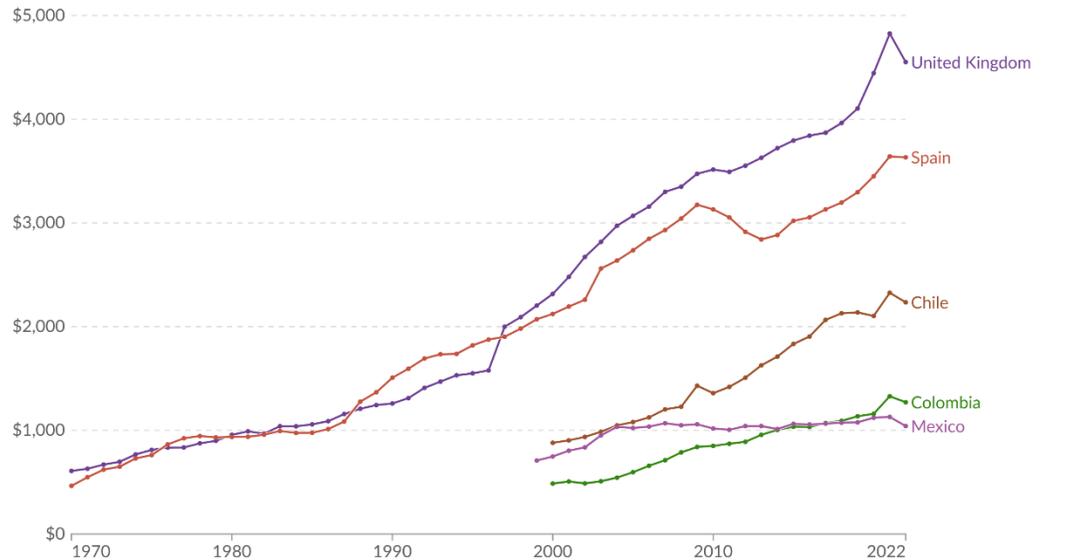
Índice

- Contexto
- Sostenibilidad
- Colombia, un éxito con matices
- Un sesgo por la esperanza

Gasto en salud: 7% PIB y us\$1000

Health expenditure per capita, 1970 to 2022

Health expenditure includes all financing schemes and covers all aspects of healthcare. This data is adjusted for inflation and differences in living costs between countries.



Data source: OECD Health Expenditure and Financing Database (2023)

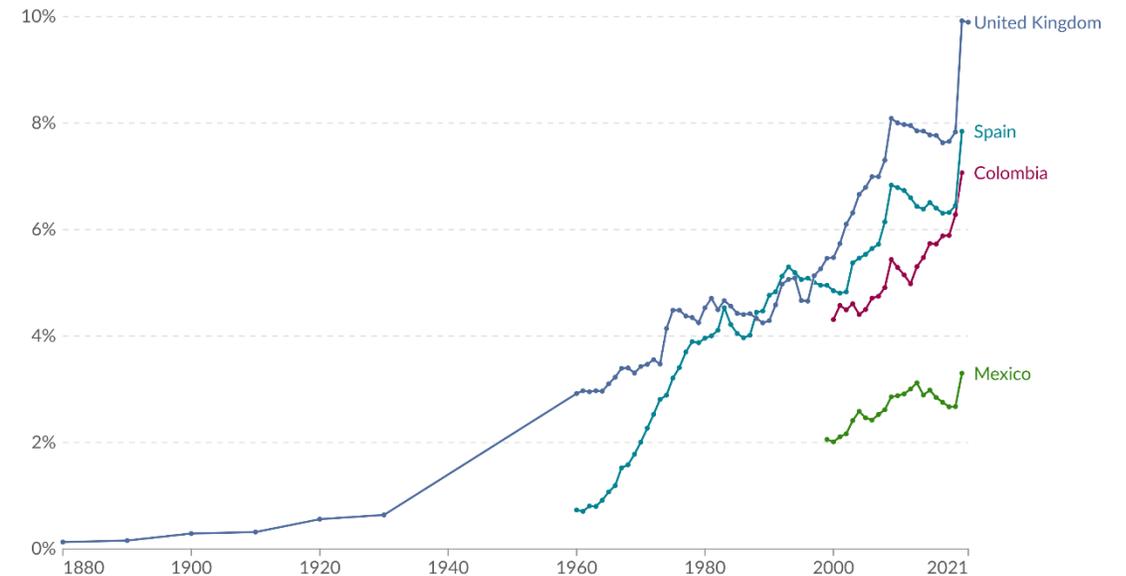
Note: This data is expressed in international-\$¹ at 2015 prices.

OurWorldinData.org/financing-healthcare | CC BY

1. **International dollars:** International dollars are a hypothetical currency that is used to make meaningful comparisons of monetary indicators of living standards. Figures expressed in international dollars are adjusted for inflation within countries over time, and for differences in the cost of living between countries. The goal of such adjustments is to provide a unit whose purchasing power is held fixed over time and across countries, such that one international dollar can buy the same quantity and quality of goods and services no matter where or when it is spent. Read more in our article: [What are Purchasing Power Parity adjustments and why do we need them?](#)

Government health expenditure as a share of GDP, 1880 to 2021

This metric captures spending on government funded health care systems and social health insurance, as well as compulsory health insurance.



Data source: Our World In Data based on Lindert (1994), OECD (1993), OECD Stat

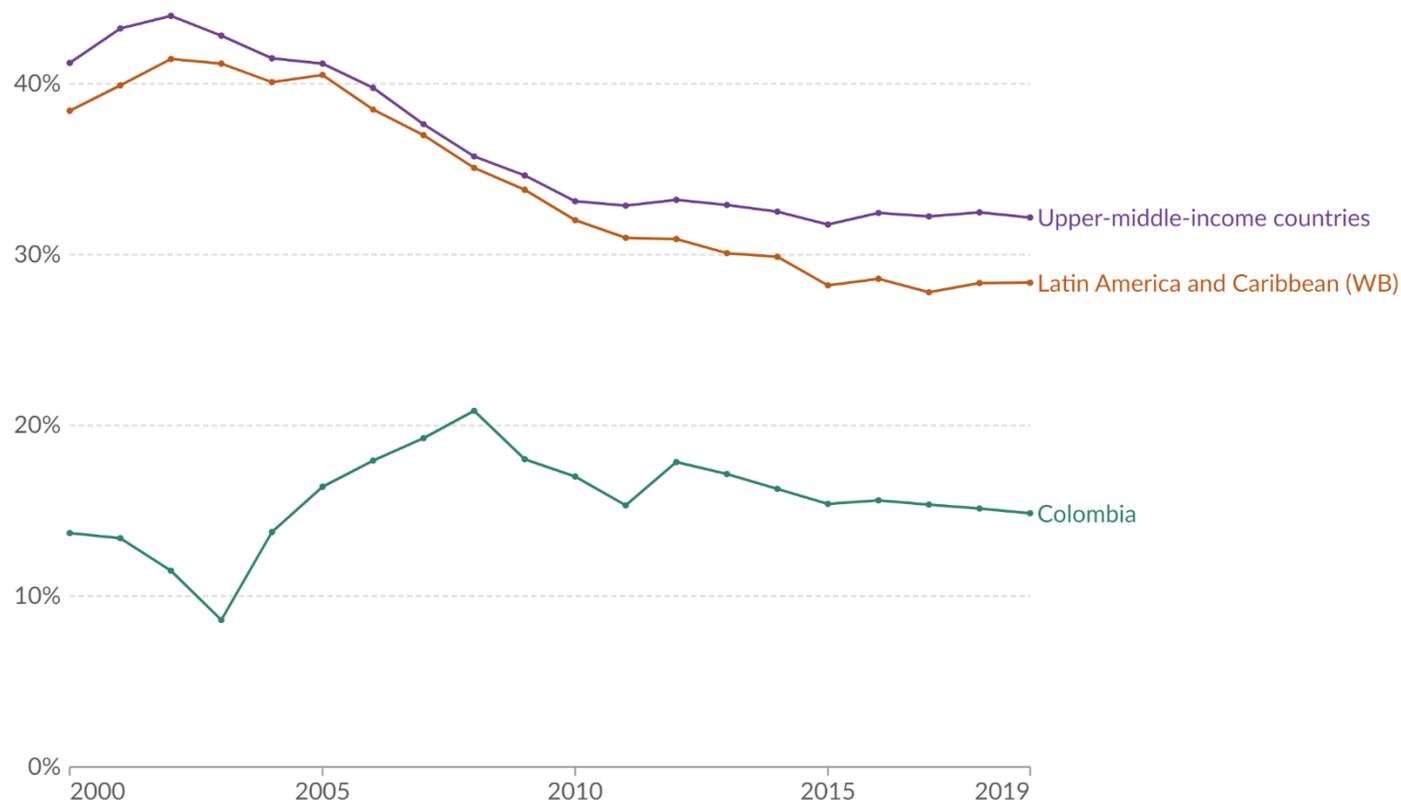
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Note: Health spending includes final consumption of health care goods and services (i.e. current health expenditure). This excludes spending on capital investments.

Caída del gasto de bolsillo: el mayor avance social de los últimos 30 años

Share of out-of-pocket expenditure on healthcare, 2000 to 2019

Out-of-pocket expenditure on healthcare as percent of total current healthcare expenditure.



Data source: World Health Organization (via World Bank)

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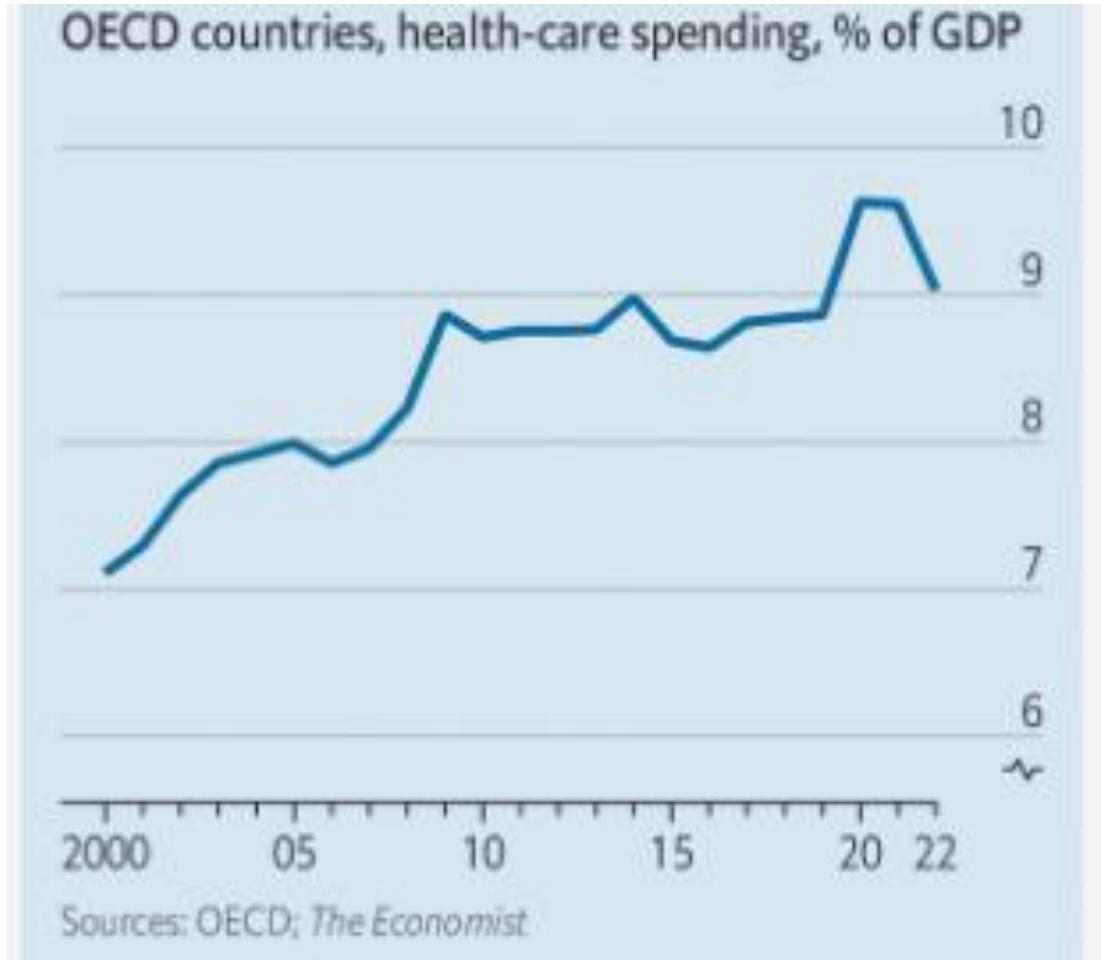
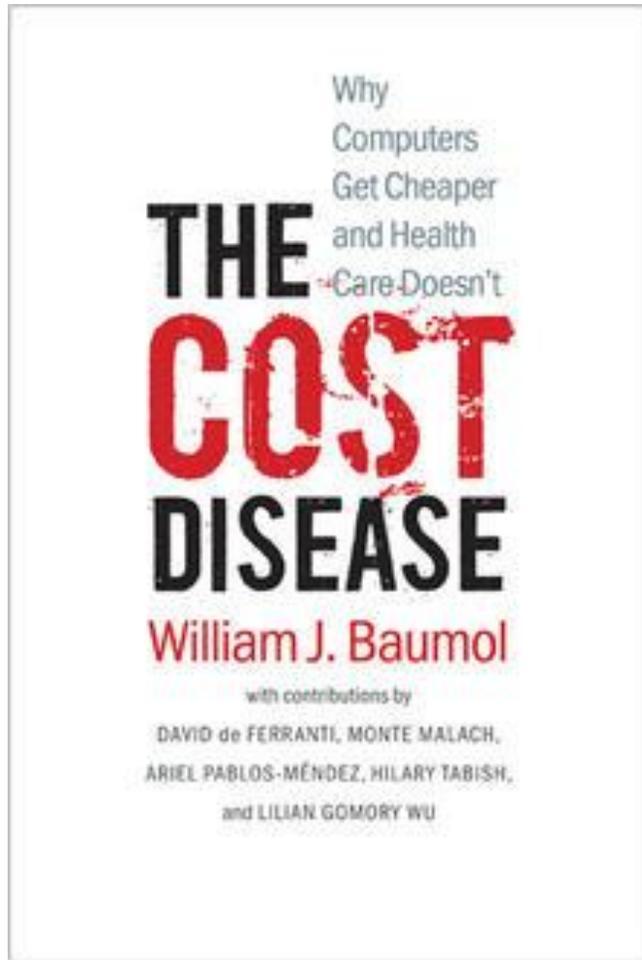
Note: 'Out-of-pocket' refers to direct outlays made by households to healthcare providers.



El desafío de la
sostenibilidad

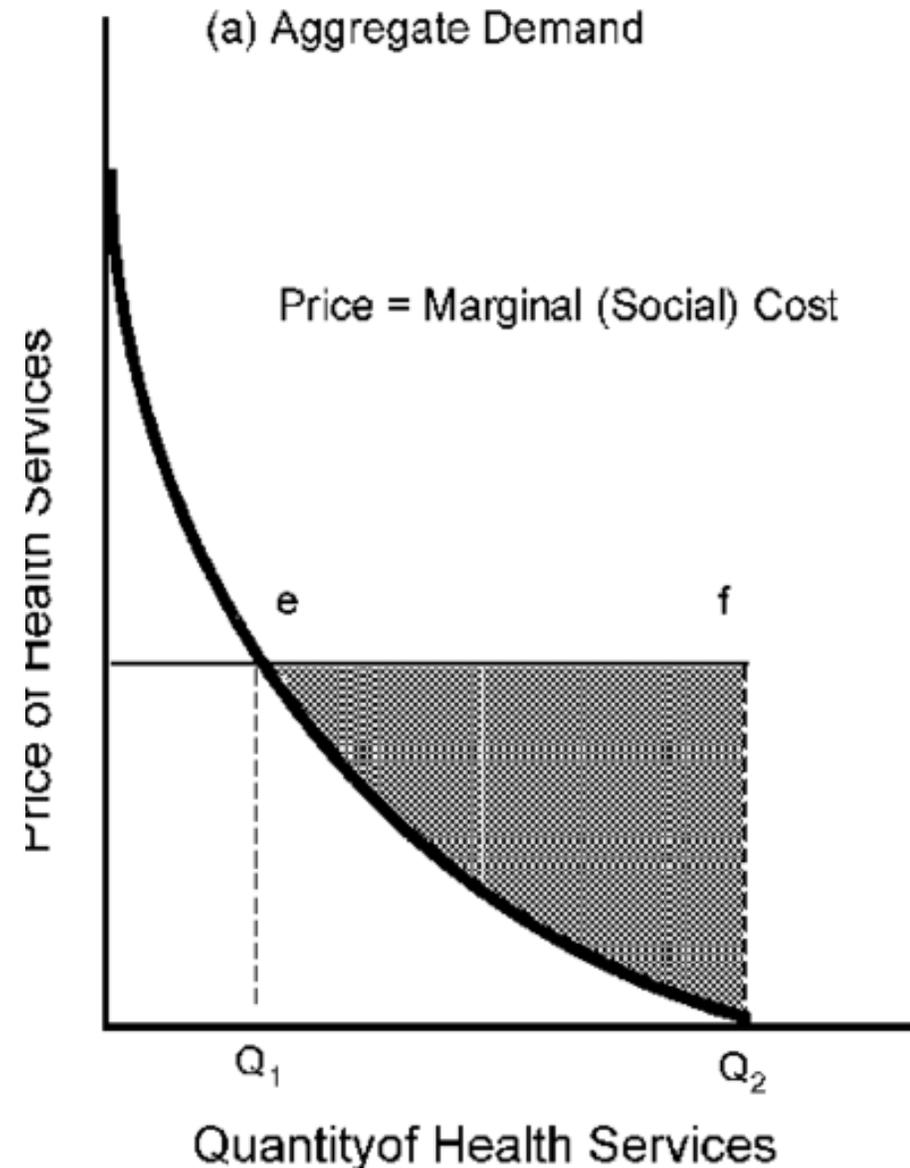
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1. Canadá: Collapse of the Canadian Healthcare System
2. México: El Sistema de Salud mexicano: ¿camino del colapso?
3. Inglaterra: NHS chiefs warn that hospitals in England are on the brink o
4. Chile: Colapsa la red pública de salud metropolitana
5. Puerto Rico: Understanding Puerto Rico's Healthcare Collapse
6. Brasil: 'Saúde caminha para um colapso', diz ministro
7. España: Colapso generalizado en los hospitales públicos



Victor Fuchs:

El precio cero genera aumentos no siempre justificados en la demanda



Cancer Drugs Hit Market at Ever-Higher Prices

The median monthly cost for new cancer drugs in the U.S. has soared since the 1970s despite an increasing number of available brands.



Note: Costs are monthly Medicare prices for each drug the year it was introduced, adjusted for inflation; drugs approved through early December 2014 are included.
Source: Peter Bach and Geoffrey Schnorr at Memorial Sloan Kettering Cancer Center

Source: BloombergBusiness

- Los precios de los medicamentos crecen exponencialmente

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DRUG REGULATION

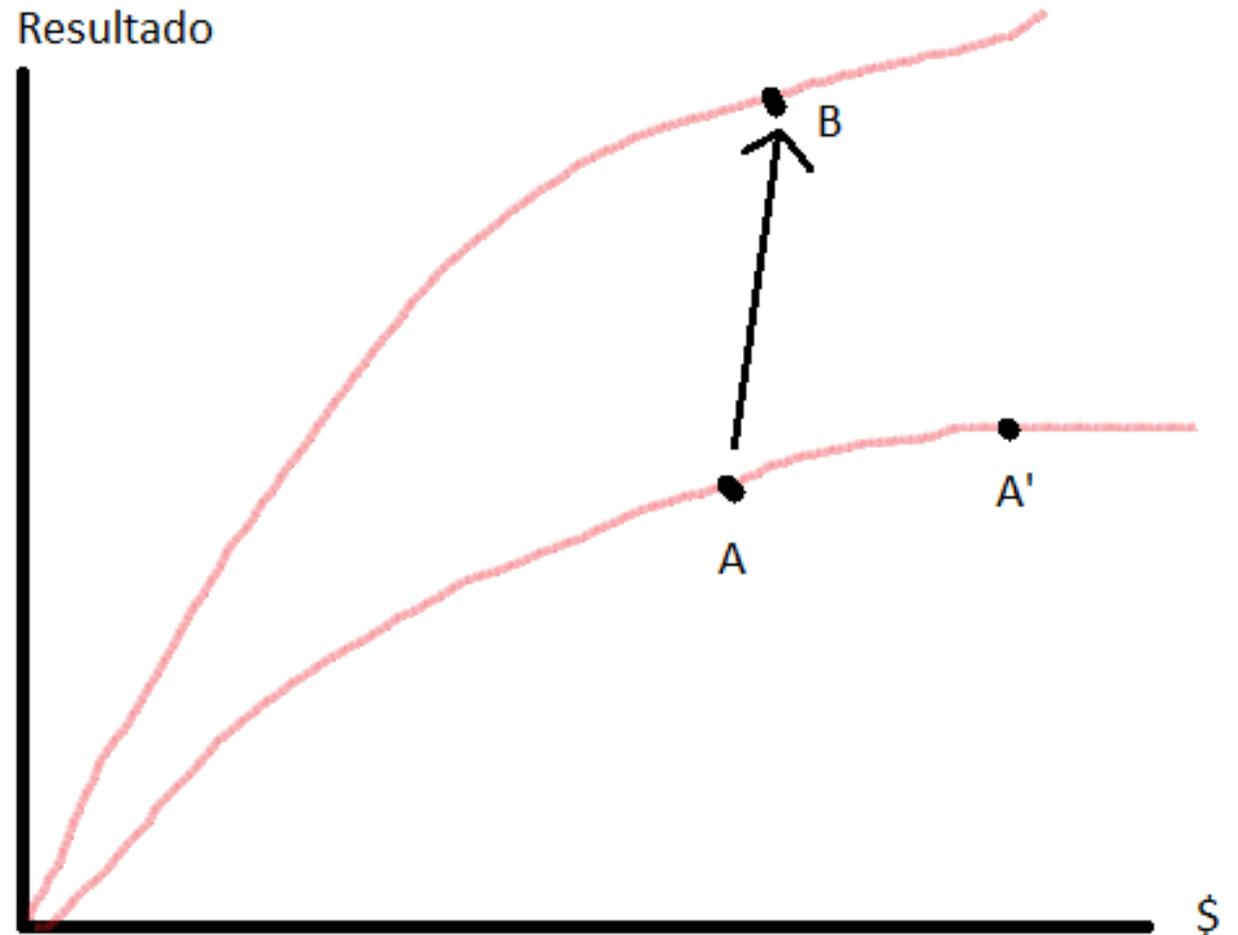
Cancer drugs: high price, uncertain value

 OPEN ACCESS

A study published in *The BMJ* this week shows how most new cancer drugs are failing to deliver any clinically meaningful benefit. It's time for Europe to raise the evidence bar before market approval, finds **Deborah Cohen**

Deborah Cohen *associate editor, The BMJ*

La innovación
tecnológica en
salud no
siempre es
costo-efectiva



REVOLUTION

BUSINESS

A \$2 Million Drug Is About to Hit the Market

Insurers, drugmakers grapple with new payment models for gene therapies that can cure diseases in one treatment

By Denise Roland

Updated May 7, 2019 6:21 p.m. ET

A new treatment for an infant muscle-wasting disease is about to go on sale at a potential cost of \$2 million, a record price tag likely to fuel the continuing scrutiny of how companies price their drugs and how insurers pay for them.

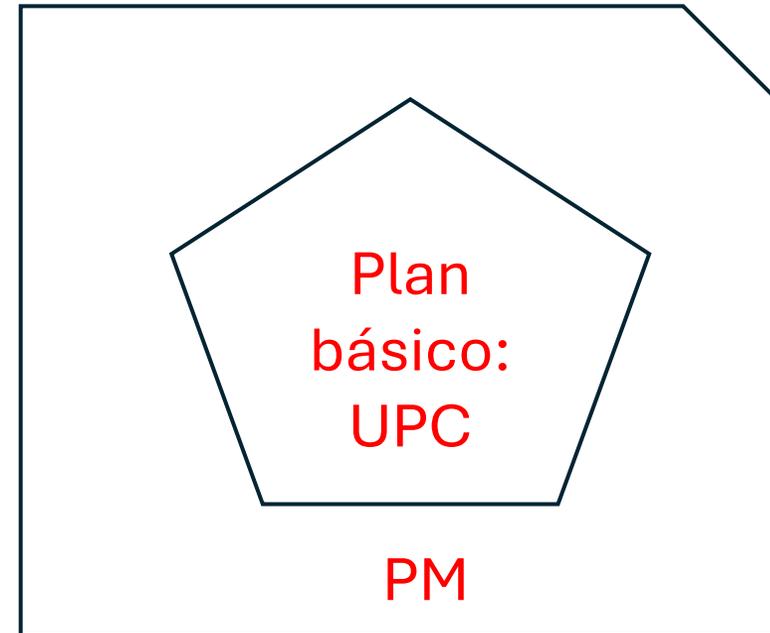
THE AI EXPECTATIONS GAME

What's the key to navigating successful digital transformation?

Sistema demasiado abierto, vulnerable a la presión tecnológica

Prestación de alta complejidad es casi toda privada

Integración vertical



¿Cómo lidiar con la presión tecnológica?

- Regulación de precios: medicamentos monopólicos.
- Ley Estatutaria y exclusiones explícitas
 - Construcción legítima del no.
- Competencia de biosimilares
 - Obstáculos innecesarios en autorización de mercado
- DIP por razones de precio
- Evaluación de tecnologías
- Ingeniería de normas sociales

Debates bioéticos en carne propia



Puntos clave

- Presión tecnológica puede ser devastadora
- ¿Hacia un sistema segregado?
 - Aumento de gasto de bolsillo.
- El sistema se va a ajustar en contra de la gente

El debate actual se ha enfocado en otros temas

¿Pagador único?

Aseguramiento
público vs. privado

Salud preventiva
vs. curativa

¿Qué puede hacerse?

- Aumento del gasto en salud
- Regulación basada en valor
- Conversación ética y científica sobre presión tecnológica
 - Involucrar a los médicos
- Evitar el peor escenario, una falla sistémica