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EST. 1837



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11.3.2025

The Secretary

WHO Expert Committee on Selection and Use of Essential Medicines
Department of Health Products Policy and Standards
World Health Organization, Geneva

Dear World Health Organization,

Re: Adding Prednisolone 1mg tablets to the Essential Medicines List

We are writing in support of the submission put forward from Professor Karim Meeran from Imperial College London to include Prednisolone 1mg tablets for patients with primary, secondary and tertiary adrenocortical insufficiency.

Currently hydrocortisone is on the list for these indications.

The cost of hydrocortisone for a month's supply is higher than prednisolone, and many countries are using prednisolone 5mg tablets off licence. Prednisolone is licenced at higher doses for autoimmune diseases, but we need lower doses for adrenal insufficiency. Emerging evidence suggests that lower doses pose less cardiovascular risk than higher doses. The availability of 1mg tablets will allow careful and more accurate replacement for such patients.

In Greece prednisolone 5 mg is the only dose tablet of Prednisolone that is available and therefore there is a limitation in prescribing patients who require lower doses.

In particular

Oral hydrocortisone 20 mg costs 3.48 E (for 30 tablets) so for a mean daily dose of 20 mg the cost is 0.116E
Oral prednisolone 5 mg cost 4.63 E (for 30 tablets) the cost for the 1 mg dose is estimated at 0.0257 E

Therefore if there is a change for patients with adrenal insufficiency from hydrocortisone 20 mg to prednisolone 1m the cost will be 0.0903 E less per day that represents 77% roughly reduction of the cost of hydrocortisone with considerable reduction of the cost on the healthcare burden.

Sincerely yours

Professor Gregory Kaltsas MD FRCP (Lon)

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