



The **PERILS of Substitute or Generic Drugs**

My Personal Experience



Background:

Existing Medical Practices

One of the biggest challenges to growing older is learning how to work the healthcare system. Medicare and supplemental insurance programs control the pathways to extended health.

Understanding how to maneuver your way around the system determines how long and how well you can or will live.

My goal is to live to be 93 years old and lie down, go to sleep, and wake up on the “other side!” I decided this plan of action 40+ years ago and have made it to almost age 75 by believing in preventative medicine.

I have a general practitioner, a heart doctor, a foot doctor, an eye doctor, a dermatologist, a dentist and, of course, access to specialists in all fields. The system of maintaining contact with all of these special people is in constant change. There are no more house calls, and office visits are determined by what Medicare will allow. This is the new norm.

In an emergency situation, going to the Emergency Room is acceptable, but you better be ready for a LONG wait period. However, shouting “I have great insurance, and I can pay!” can do wonders time wait-wise! If you have someone with you who can speak for you if you’re not able, that is also a great help.

You cannot just call up the doctor’s office and get a quick appointment!

New groups, such as Prompt Care, have been set up to cover Non-Emergency problems. All of these separate groups work together and once you learn the system (nobody explains it to you, you just have to figure it out on your own), it can work very well.





Brand-name Medicine vs. Generic Medicine

Doctors, lawyers, and Indian chiefs will tell you that there is no difference between brand-name medicines and generic drugs.

Insurance companies push generic drugs because they are much cheaper than the brand-names. Company-sponsored retirement plans like them because cheaper prices translate into cheaper health care costs for them. **Follow the money!**

Granted, costs do need to be considered. And perhaps most generic medications are “close enough” to the same exact formula as the brand-named medications. **But**, in some cases, even a slight deviation from the brand-name medication formula can prove to be fatal! **And, there is a difference between brand-name medications** for the same diagnosis for treatment.

For example: cholesterol medicine control levels are wide, but blood pressure medicine control levels are narrower, since they affect many different health issues - any one of which can prove to be a major problem. A generic eye drop medication for glaucoma must also be exact to be safe.

I have had at least three incidents with blood pressure control medications. During the first two, I experienced low blood pressure and low energy levels while taking a substitute brand-name medication or a generic brand of the medication. Within days of changing back to the original brand-name medication, my blood pressure was back to normal with no long term effects.

Recently however, my third incident was much worse! During this one, I experienced low blood pressure, low energy levels and swelling of the lower legs and ankles. Doctors suspected blood clots in my lungs and legs and ran tests to look for these dangerous conditions, but none were found. However, once I made a change back to the original brand-name drug I had been taking for high blood pressure, in less than two weeks I was back to “normal.” **Lesson learned - again!**



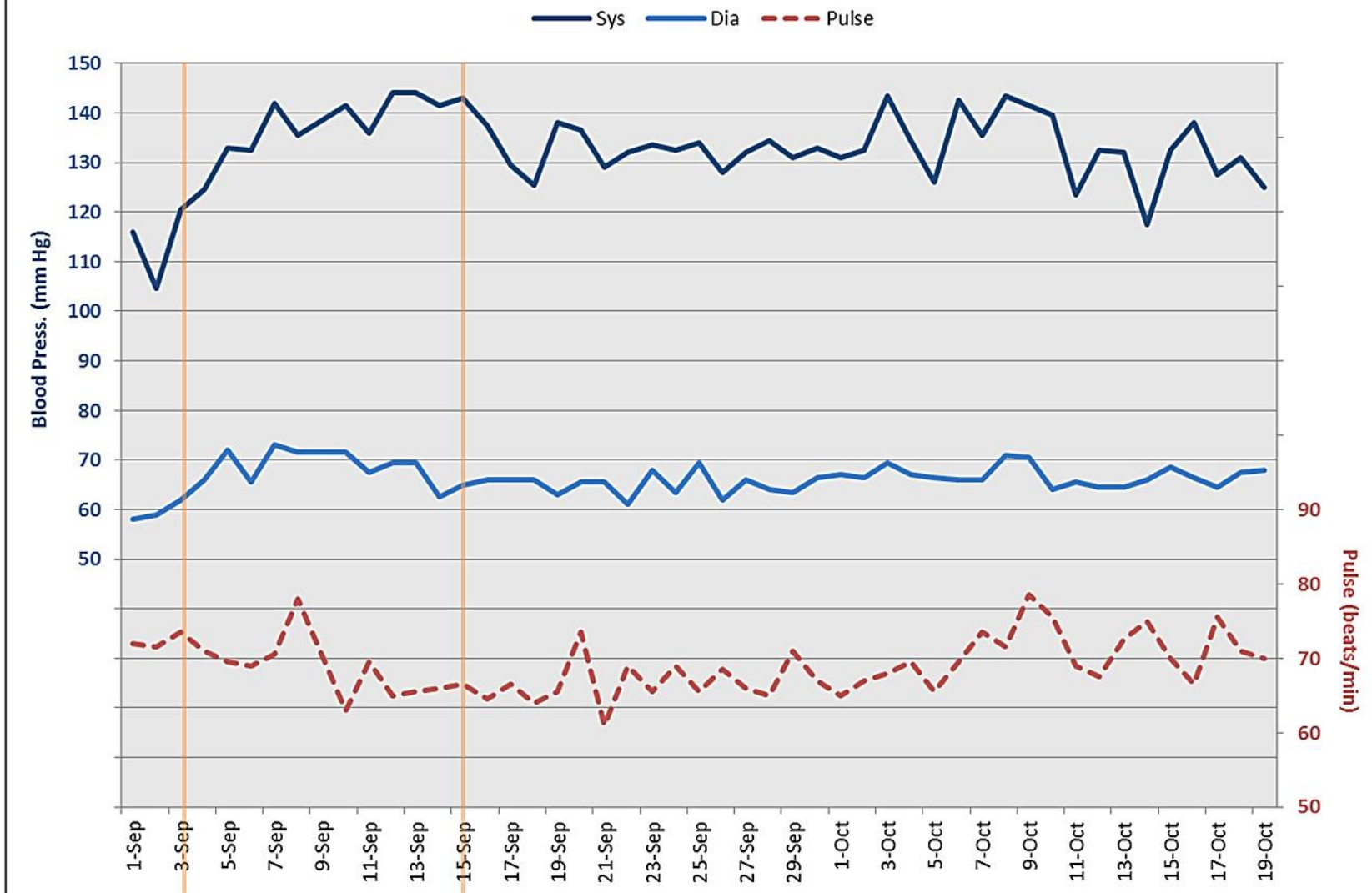


Timetable of my Problems with BP Medication - 2014

2014 Date	Medication Status	Observations and Notes
June	Taking brand-name BP med.	
Late June	Switched to a substitute brand-name BP med.	
July 2	Continued taking substitute BP med.	Swelling in legs and ankles. Doctor visit at Prompt Care. Had to start using support hose.
August		Continued problems with leg swelling while on 2-week vacation. Used support hose.
September 3	Stopped taking ANY BP med.	Started measuring and recording BP and pulse data on Sep 1 (see graph on p.5).
September 8		Leg swelling required one day of support hose.
September 15	Re-started on original brand-name BP med.	Some swelling.
September 18	Continued on original BP med.	Very little leg swelling.
September 24		No leg swelling.
October		No leg swelling; feeling "normal"



Blood Pressure and Pulse Data: Sep., Oct. 2014



On **substitute** brand-name medication since late June.

No medication

On original **brand-name** medication since Sept. 15.



Conclusions and Notes

Main points learned:

1. While on a substitute brand-name med, low blood pressure, low energy levels and swelling of the lower legs and ankles all occurred. (*Note that the Systolic data varied more than the Diastolic and the pulse rate data.*)
2. The substitute BP medicine did not control water retention in body. The original brand-name medicine did!
3. Medicine that is not protected by tin foil packaging is much more susceptible to moisture than brand-name medicines that are.

Conclusion:

I plan to take only brand-name medications that I have used successfully before for treating blood pressure!

If that medication should no longer be available, I will assess any substitute brand-name or generic drug by taking only a 90 day supply and monitoring the results and/or side effects carefully.

Any time someone must change the medicines they are taking, they need to do their own research on-line and monitor all of their body reactions such as blood pressure, water retention, rashes, dizziness, temperature, etc. and notify their physician of any complications.

The time has come for the patient to be responsible and proactive in their medical health. The health care system of today demands it!

I would like to add that I have excellent doctors, nurses, all types of staff and supporting employees.

I have very good medical and hospital insurance.

The whole community of health that I live and work in is excellent.

It would certainly be a shame for me or anyone to die unnecessarily because we took a generic medicine or a substitute brand-name medicine when we have the funds to pay for the brand-name drugs that work best for our particular body chemistry!



Final Thoughts and Contact Info

Notes and Thoughts about Aging Patients

Things affecting Rx drug uses:

- Sleep deprivation (amount of sleep needed varies)
- Moisture pickup in pills not protected
- Time of day medicine is to be taken
- Side effects of medications vary among patients
- Generic versus brand-name Rx drugs
- Maneuvering within the medical system (specialists, general practitioners, therapists, prompt care, emergency rooms, etc.)

Suggestion:

Have some type of hand-out sheet for patients and their caregivers that addresses the above items.

Highly recommended movie:

Dallas Buyers Club

- a good look at how our government feels and acts toward the general public.



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