Continue Oversight of Anesthesia Drug Shortages

Shortages of drugs used in anesthesia care prompted the American Association of Nurse Anesthetist (AANA) in 2012 to support Congress enacting the Food and Drug Safety and Innovation Act (FDASIA); one provision requires drug manufacturers to provide more advance notice to the Food and Drug Administration (FDA) of conditions that might lead to shortages. However, a survey of AANA members conducted in February 2013 reveals that anesthesia drug shortages remain widespread.¹ 90 percent of respondents reported “currently experiencing anesthesia related drug shortages,” comparable to survey results in September 2011 before the enactment of FDASIA. The specific drugs in shortage differed; half of the shortage drugs reported by over 30 percent of members in 2013 were different from the drugs similarly reported in shortage in 2011.

- Though Certified Registered Nurse Anesthetists (CRNAs) are working with their healthcare facilities and pharmacists to ensure patient safety in anesthesia care, that commitment to safety is affecting access to care and some healthcare costs. 12 percent of respondents reported that drug shortages prompted delay of procedures, 6 percent reported that the shortages resulted in cancellations, and 21 percent reported that drug shortages prompted changes that resulted in longer recovery room times – and recovery room time in a healthcare facility translates to the quality of the patient’s experience and to increased healthcare costs per procedure.

- Most drugs used in anesthesia care are old generic sterile injectable, inhalant or topical medications. Though some drugs AANA members reported in shortage are anesthesia drugs like propofol, other drugs reported in shortage are not anesthesia drugs.

- Effective communication among healthcare professionals, facilities and government agencies, as well as facility planning and coordination, was critical to smooth response to drug shortage conditions.

- Medicare and Medicaid pay for anesthesia drugs as a part of the ordinary facility fees, such as Medicare Part A, and do not pay for anesthesia drugs separately in any way. This payment system is different from the Medicare program for other drugs in shortage, such as oncology drugs, which have their own unique payment system related to cancer treatment.

ACTION FOR CONGRESS: Continue oversight on the implementation of the FDASIA, because widespread shortages of drugs used in anesthesia care continue. These shortages negatively impact patient experiences, lengthen recovery, and delay or cancel procedures, all of which increase healthcare costs.

¹ Members of the AANA were surveyed via email during February 2013. Of 10,000 emails sent, 9,376 (94%) were successfully received by members, and 2,500 responses were returned to the AANA, a response rate of 27%.

American Association of Nurse Anesthetists Office of Federal Government Affairs