



## Department of Health CTA

---

# Essential Medicine List- 2025

The Essential Medicine List (EML) ensures the consistent availability of safe, effective, and affordable medicines across health facilities. First launched by the Department of Health, Central Tibetan Administration (CTA) in 2020 for its Unit Hospitals and Primary Health Centers, the EML has now been revised to meet current clinical needs, add newly recognized essential medicines, and remove outdated or banned drugs.

Earlier this year, settlement medical officers reviewed the 2020 EDL and provided recommendations based on disease trends, treatment priorities, and updated regulations. These were consolidated by Ms. Pema la, Pharmacist at Mundgod DTR Hospital, and further refined by Dr. Tsetan Dorjee, Chief Medical Officer at Delek Hospital, with input from Dr. Sonam Topgyal and Dr. Tenzin Tsundue. The Department sincerely appreciates the valuable contributions of all doctors and pharmacists involved.

The revised EML-2025 will apply to Unit TVHA Hospitals and Tibetan Primary Health Centers. All health facilities are strongly encouraged to maintain at least the minimum stock of listed medicines as per the prevalent DCGI rules and regulations. Medical officers and pharmacists should promptly inform any missing essential medicines to ensure the list remains relevant. Through this effort, the Department of Health reaffirms its commitment to equitable and accessible healthcare for all.

### **Essential Medicine List Reviewed by following TVHA doctors and Pharmacist: -**

1. Dr. Tenzin Yangchen – Bylakupee Tsojhe Hospital
2. Dr. Tashi Phuntsok- Kollegal DVT Hospital
3. Dr. Tenzin Chonyi-Phende Hospital
4. Dr. Tenzin Wangdak- TPHC Dekyiling
5. Dr. Tenzin Kyizom- Menlha hospital, Odisha
6. Dr. Yonten Tsomo - TPHC Bir
7. Dr. Tsering Sonam – Mainpat TPHC
8. Ms. Tenzin Pema – Pharmacist DTR Hospital

### **Expert Review done by:**

1. Dr. Tsetan Dorji Sadutshang- Chief Medical Officer, Delek hospital
2. Dr. Tenzin Tsundue – Chief Administrator, Delek Hospital
3. Dr. Sonam Topgyal- Senior Medical Officer, Delek Hospital

**1. ESSENTIAL MEDICINE LIST (EDL):-** As per the WHO, Essential drugs or medicines are those that satisfy the priority health care needs of a population. The list is made with consideration to the disease prevalence, efficacy, safety and comparative cost effectiveness of the medicines. Such medicines are intended to be available in adequate quantity, in appropriate dosage forms and strengths with assured quality. They should be available such that an individual or a community can be able to afford.

**2. The objective of the Essential Medicine List (EML) is to provide: -** Better health care, Better drug management, Lower drug cost and Easy availability.

### 3. CRITERIA FOR INCLUSION OF MEDICINE IN EML:-

- The medicine should be approved/licensed in India.
- The medicine should be useful in diseases which is a public health problem in India.
- The medicine should have proven its efficacy and safety based on valid scientific evidence.
- The medicine should be aligned with current treatment guidelines for the disease.
- The medicine should be cost effective and stable under the storage conditions in India.
- Price of the total treatment to be considered and not the unit price of a medicine.
- When more than one medicine is available from the same therapeutic class, preferably one prototype/medically best suited medicine of that class to be included after due deliberation and careful evaluation of their relative safety, efficacy, cost-effectiveness.
- Fixed dose combination (FDCs) are generally not included unless the combination has unequivocally proven advantage over individual ingredients administered separately, in terms of increasing efficacy, reducing adverse effects and/or improving compliance. The listing of medicine is based according to the level of health care, i.e. Tibetan primary health center (TPHC) and hospital (H) because the treatment facilities, training, experience and availability of the health care personnel differ at these levels.

### 4. CRITERIA FOR EXCLUSION OF DRUGS FROM EML: -

- The medicine has to be banned in India.
- There are reports of concern on the safety profile of a medicine with better efficacy or favorable safety profile and better cost-effectiveness is now available.
- The disease burden for which a medicine is indicated is no longer a national health concern in India.
- In case of antimicrobials, if the resistance pattern has rendered a medicine ineffective in Indian context.

DRUGS ADDED IN EDL 2025-TPHC		DRUGS WITHDRAWN FROM EDL 2025-TPHC	
1	Loratadine	1	Levetiracetam
2	Atropine Sulphate	2	Tranexamic acid
3	Diazepam	3	Enema
4	Sodium Valproate SYRUP	4	Hydrocortisone
5	Midazolam		
6	Ivermectin		
7	Spironolactone		
8	Clopidrogrel		
9	Atorvastation		
10	Antacid		
11	Loperamide		
12	Salbutamol		
13	Pyridoxine		
14	Thiamine		

NEW DRUGS ADDED IN EDL 2025- Hospital		DRUGS WITHDRAWN FROM EDL 2025- Hospital	
1	Atropine Sulphate	1	GLYCERIN
2	Cefadroxil	2	FLUOXETINE
3	Ceftriaxone		
4	Pipercillin (A) + Tazabactam		
5	Meropenem		
6	Itraconazole		
7	Tinidazole		
8	Diltiazem		
9	Isosorbide mononitrate		
10	Spironolactone		
11	Hydrochlorthiazide		
12	Apixaban		
13	Clopidogrel		
14	Antacid		
15	Glycerine Suppository		
16	Rifaximin		
17	Neomycin		
18	Progesterone/ Medoxy progesterone 10mg		
19	Lorazepam		
20	Beclomethasone		
21	Salbutamol		
22	Prednisolone		
23	Theophylline		
24	Potassium Chloride		
25	Calcium Gluconate		
26	Pyridoxine		
27	Mefloquine		
28	Artesunate+Lumefantrine		
29	Levofloxacin		
30	Clarithromycin		
31	Rafibutine		
32	Dapsone		
33	Inactivated Influenza vaccine		
34	Pneumococcal vaccine 23		
35	Adrenaline bitartrate		