As a result of a survey of pharmacists and pharmacy visitors, we found the following problems: queues for a prescription physician and drug reception in the pharmacy; low professionalism (competence in this matter); lack of medicines in pharmacies; small area coverage; irrational choice of drugs (some drugs are not used or received other doses abroad). As ways of solving the problem, it is proposed to create favorable conditions for pharmacies in order to attract them to the pilot project; holding seminars for medical and pharmaceutical workers; wide public awareness, viewing the list of drugs.

Conclusions. In the absence of medical insurance and limited resources for health protection, pilot projects allow the development of mechanisms for compensating for the cost of treatment. Go to the reference pricing system will reduce prices, increase the availability of medicines and rational use of limited resources.

ANALYSES OF THE LEBANON'S PHARMACEUTICAL SECTOR FUNCTIONING

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Introduction. The pharmaceutical sector in Lebanon is complex and the high medicines bill could be due to many overlapping elements. The Lebanon's economics is at the stage of transformation. But reforms alone are not the goal of the republic's development. Their main task is to ensure the growth of the well-being of citizens, which requires the rapid turn of the reform vector towards their social orientation. Many health problems remain urgent, such as improving the effectiveness of the functioning of medical institutions, as well as ensuring accessibility, efficiency, safety and rational use of medicines.

Aim. In connection with the foregoing the aim of this study is to study of the current state of health and the pharmaceutical sector in Lebanon.

Materials and methods. Information base of research includes literary data, data of statistical reporting, official statistic data of the WHO, legislative and regulatory acts. Among the methods that were used include: statistical, historical, analytical methods and comparison analyses.

Results and discussion. The majority of registered medicines in Lebanon are imported, mostly from Europe and the USA. They account for about 90% share (value) of the pharmaceutical market and are imported by 131 importers. Local pharmaceutical production is weak due to the high costs involved. As a result, Lebanon is the leading market for imported pharmaceutical drugs in the Levant.

According to BMI (Business Monitor International) estimations, pharmaceutical sales in Lebanon reached $1.63B in 2015 and $1.75B in 2016. Thus, the pharmaceutical market in Lebanon is valued at over USD one billion, with potential growth of more than five percent yearly.

Patented drugs constitute around 50 percent of the market, and over-the-counter (OTC) and generic drugs constitute around 25 percent each. There are 9 manufacturers of drugs, 39 Drug Stores in the country all operating below capacity and achieving a share of only10% of the local market. Over the Counter medicines are largely under promoted in Lebanon and their share in the total market is expected to drastically decline for two main reasons: the first is the fact that prescription drugs are taking over most of the market and the second is the enforcement of stricter manufacturing and promotional requirements of herbal and nutritional products. Moreover, the Lebanese consumer is not one to seek self-medication but would rather consult a doctor and get a prescription instead.

In 2015, the spending on OTCs amounted to $339M or 20.8% of the total market and will grow slightly to $343M in 2016. Through 2020, the OTC market is expected to register a meager CAGR of 1% to reach $346M in 2020 and will register only 15.7% of the total market. The best-selling categories in the OTC segment are analgesics in first place and cough and cold treatments in second place. BMI notes that Lebanon has the capacity to produce most of the basic OTCs domestically but imports are still the consumers' favorites. Most Lebanese opt for the painkiller Panadol from GlaxoSmithKline instead of a local equivalent.

A fixed price for marketed drugs is set according to the law and reaches 1.7 times the original price. The price structure is broken down as such: The ex-factory price (100), the shipping and insurer expenses

(7.5%), custom clearing and commission (11.5%), as well as the profit margins for importers (10%) and pharmacists (30%).

Lebanon's very large number of pharmacists and physicians, most of them working in the private sector contribute to escalating medicine costs. Lebanon has 2,490 pharmacies and 4673 pharmacists distributed 6,059 drugs currently present in the Lebanese Market over the 10425 km2 of Lebanese territory. Of these 6,059 drugs, 1,218 are of Lebanese origin and the rest (4,841) produced in the United Kingdom, France and Germany. From the 1,218 products originating in Lebanon, only 196 are sold with licenses from the innovative brand companies. The remaining 1,022 are classified as generic drugs. This large number has a direct impact on the availability of medicines, but not necessarily on accessibility and affordability. The campaign promoting the use of generic drugs is fairly recent in Lebanon, therefore patented drug sales are still dominant on the Lebanese market. In 2015, sales of patented drugs reached $800M and as such accounted for 61.8% of prescription drug sales and 49% of the total market and will still represent 51% of total medicine sales in 2020 and 52.2% by 2025.

Despite its consistent growth over the past decade, Lebanon's pharmaceutical sector is still facing several challenges. A particular challenge relates to the high cost of pharmaceuticals. Analysis of the basic principles and methods of state regulation of prices for medicines shows that price regulation is the most important aspects of government regulation for pharmaceutical companies. In addition, counterfeit pharmaceuticals and registration of fake medicaments remains a major issue. Furthermore, the legal framework that governs the pharmaceutical market remains weak, thus hindering foreign investments in the sector.

Lebanon's reliance on imports and lack of large-scale local pharmaceutical production is not in favor of the patient in terms of healthcare costs. The main problem of the pharmaceutical sector is that majority of registered medicines in Lebanon are imported, mostly from Europe and the USA.

The promotion of generic drugs should be developed further and the respect and protection of intellectual property rights ought to be established in order to attract foreign direct investment in the country.

Conclusions. The main problem of the pharmaceutical sector have been identified: the majority of registered medicines in Lebanon are imported, mostly from Europe and the USA. They account for more than 80% share (value) of the pharmaceutical market. There are 9 manufacturers of drugs, 39 Drug Stores in the country all operating below capacity and achieving a share of only 10% of the local market. Prices are considerably higher in the private sector and innovator brands are possibly used more extensively as there are no incentives to prescribe and sell generic equivalents. The taxes, tariffs and mark-ups are relatively high and contribute to making many medicines unaffordable for the majority of patients. The results show that the medicine promotion and the medicine selection process in Lebanon require more legislation and regulations to regulate and enforce transparent and efficient practices. Other functions of the pharmaceutical sector need to achieve greater levels of transparency by making the procedures followed and decisions taken publicly accessible to all.

STATISTICAL INDICATORS OF OCCUPATIONAL INJURIES

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Introduction. One of the important tasks in the field of health and safety of workers is the risk assessment. A qualitative assessment of the probability of an accident can be performed using reliable statistical data. Information on the state of occupational injuries and occupational diseases is collected and published by the relevant departments. In Ukraine it is the State Service of Ukraine for Labor and Social Insurance against Accidents and Occupational Diseases in the Workplace

In the world, information is collected by the International Labor Organization, which receives it from official government bodies. A generalized model assessment of the International Labor Organization exists. According to it, every developed country in the world annually loses more than 4% of its GDP as a result of industrial accidents and occupational diseases.