Objective. The pharmaceutical market (PM) is an important part of the system of pharmaceutical provision of the country. In modern conditions, the PM performs many functions, among which the social function is one of the most important.

Materials and methods. We conducted dynamics analysis of pharmacy sales development in retail sector of PM (2011-2018). That's why we used the data analytical research system ("PharmXplorer"/"Фармстандарт", "Pharmstandard").

Results. As a result of studies we have found that during 2011-2018 the retail segment of Ukrainian PM had zigzag-shaped development dynamics. We distinguished three main stages of its development. So, during the first stage (2011-2013), we observed positive growth dynamics of pharmacy sales expressed in UAH, USD, and package pieces. What is more, increase of pharmacy sales' indicators, expressed in UAH and USD, did not differ significantly. The second, the most difficult, period lasted for two years (2014-2015). This period was characterized with decrease of sales' volume, expressed in USD and in natural indexes (package pieces). In 2015 the lowest indexes of pharmacy sales, expressed in USD (22.75 million USD), and in natural indexes (1507.1 million of package pieces), were observed. Increase (38.0%) of sales' volumes, expressed in UAH, which was observed in 2015, was due to devaluation of national currency. The third stage of PM development started in 2016 and is continuing still. In the retail segment an increase in volume of pharmacy sales, expressed in UAH – by 22.0%, in USD – by 4.0%, and in package pieces - by 6.0%, has been observed from 2016. In the conditions of relative stabilization of USD rate in 2017, growth of sales' volume in USD was 17.0%, and in natural indexes - only 5.0%. Gradual slowdown of one sale weighted average cost growth, beginning in 2016, is an important positive characteristic of pharmacy sales market development. For example, in 2015 this index grew by 41.0%, in 2016 - by16.0%, and in 2017 – only by 10.0%. and in 2018 – only by 9.0%. Of special note is the fact of gradual increase of sales' volume per capita, expressed in USD. For example, in 2015 this index was 36.04, in 2016 – 37.24, and in 2017 – 44.09 USD.

Conclusions. Retail segment of Ukrainian PM, in the conditions of political and socio-economic crisis in the country, has shown the complex nature of its development.

RESULTS OF COMPARATIVE ANALYSIS OF INDICATORS OF «WILLINGNESS TO PAY» FOR USING INNOVATIVE TECHNOLOGIES IN HEALTH CARE IN THE COUNTRIES OF MEDIA ASIA AND UKRAINE

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Department of Social pharmacy, Faculty of Pharmacy National University of Pharmacy, Kharkiv, Ukraine lyubov.ter2017@gmail.com **Objective**. In order to assess the financial and economic possibilities of introducing various innovative technologies in medicine and pharmacy, various approaches and methods are currently used. Among these methods, the use of «Health Technology Assessment» (HTA) should be especially noted. Currently, the HTA envisages the use of a whole range of methods and approaches, among which the assessment of the potential of a public resource to introduce new innovative technologies using the WTP analysis (willingness-to-pay analysis – WTP) is becoming more common. The study of the WTP indicator is of particular relevance for countries that are in the process of reforming health systems. These countries include Ukraine and the countries of Central Asia (Uzbekistan, Tajikistan, Kazakhstan, Kyrgyzstan, Turkmenistan).

Materials and methods. In the study of the WTP indicator, we used the methodology proposed by the WHO Commission on Macroeconomics and Health Economics in 2002. This method is recommended for macroeconomic calculations and the appropriate analysis of the WTP indicators. It is based on the analysis of data on the nominal GDP of the country and the number of inhabitants. To calculate WTP indicators, data from the International Monetary Fund, World Bank for Reconstruction and Development were used, as well as statistical data presented on the official websites of relevant ministries and departments of reference countries. Calculated averaged over eight years in arbitrary units (international dollars).

Results. As a result of our research, we have established that Kazakhstan retains leading positions in terms of WTP indicator (24099 \$), Turkmenistan is in the second position – 22893 \$, and Uzbekistan – in the third position (5347 \$). In Kyrgyzstan, the value of the indicator WTP is 2920 \$. The lowest rate was observed in Tajikistan (2694 \$). Ukraine is in fourth position with a score of 5131 \$. Thus, the variation scale of the WTP indicator in reference countries is in absolute value of indicators 21405 \$. Thus, the WTP indicator in Kazakhstan is 8.9 times higher than in Tajikistan. If we compare the data of reference countries with WTP indicators in other EU countries and the USA, the results show a significant run-up of indicators. For example, the WTP indicator in Australia is 183402 \$, in the USA – 162972 \$, and Canada –150128 \$.

Conclusions. It should be noted that a significant run-up of WTP values is a consequence of a number of reasons, among which the level of economic development of a state is important. The obtained WTP indicators demonstrated various financial capabilities of national health care systems and pharmaceutical support for the population of reference countries in the process of introducing innovative drugs into the pharmaceutical market.