UNDP and UNAIDS back efforts by least-developed countries to secure sustainable access to treatment

GENEVA, 21 May 2015—The United Nations Development Programme (UNDP) and the Joint United Nations Programme on HIV/AIDS (UNAIDS) would like to call attention to the urgent and compelling case for the international community to take all measures possible to protect the health of people living in least-developed countries (LDCs).

The proposal was put forward by Bangladesh on behalf of the LDCs group and is now before the WTO TRIPS Council. It requests an extension of the period under which LDCs are exempt from applying protections for pharmaceutical related patents and clinical data. The current waiver is due to expire in January 2016.

“Millions of people rely on access to affordable, assured quality generic medicines,” said Michel Sidibé, Executive Director of UNAIDS. “WTO Members have before them a critical opportunity to help least-developed countries to reach health and sustainable development goals—failure to support them could put millions of lives at risk.”

The classification of LDCs is contingent on a number of key human development indicators, including levels of poverty, literacy and infant mortality. Access to adequate healthcare, including affordable medicines, remains a key challenge in most LDCs affecting millions of lives. The flexible intellectual property arrangements currently available to LDCs are a crucial tool for improving health.

“While much progress has been made in scaling up access to HIV treatment, much more will be required in the post-2015 era to achieve the vision of a life of dignity for all, leaving no one behind,” said Helen Clark, UNDP Administrator.

The percentage of people living with HIV who are not receiving antiretroviral therapy has been reduced from 90% in 2006 to 63% in 2013. LDCs and developing countries have effectively used transition periods to scale up access to treatment for HIV and its co-infections by importing or manufacturing lower-cost generic medicines.

Access to medicines such as sofosbuvir used to treat chronic hepatitis C remains a grave challenge in LDCs because of high prices. Sofosbuvir can cost as much as US$ 84 000 for a 12-week course in developed country markets. Lower prices via generic licenses are being offered by the patent-holder in some developing countries, but would still place a considerable burden on health budgets. A company in Bangladesh, making use of its LDC status, has launched its own version for US$ 900 for the 12-week course. While this price is also out of reach of many patients in LDCs, with the possibility of other manufacturers emerging in LDCs there is potential for greater competition and further price reductions.

There is another transition period in place which UNDP and UNAIDS have previously backed, that exempts LDCs from implementing their WTO intellectual property obligations for all fields of
technology but this period expires in 2021. The proposed transition period on pharmaceutical products, for as long as an LDC remains an LDC, is necessary on top of that general transition period, for the longer-term security it would provide for patients, manufacturers, donors and LDC governments alike.

In accordance with the recommendations of the Global Commission on HIV and the Law, UNDP and UNAIDS urge all WTO Members to support the LDC request for a transition period on pharmaceutical related patents and clinical data for as long as a country remains an LDC.

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UNAIDS
The Joint United Nations Programme on HIV/AIDS (UNAIDS) leads and inspires the world to achieve its shared vision of zero new HIV infections, zero discrimination and zero AIDS-related deaths. UNAIDS unites the efforts of 11 UN organizations—UNHCR, UNICEF, WFP, UNDP, UNFPA, UNODC, UN Women, ILO, UNESCO, WHO and the World Bank—and works closely with global and national partners towards ending the AIDS epidemic by 2030. Learn more at unaids.org and connect with us on Facebook and Twitter.

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