May 3, 2017

Re: Feasibility study of delinkage of R&D costs from cancer medicine prices

Dear WHA delegates,

We are writing to urge you to support the feasibility study of delinkage of R&D costs from cancer medicine prices, proposed in OP2.5ter in the draft resolution on cancer, which reads:

(OP2.5ter) [to conduct a [preliminary] (Brazil) feasibility study of creating a multi-country push and pull fund for cancer R&D, as an alternative to incentives-based intellectual property rights and/or regulatory monopolies and to progressively delink cancer R&D costs from product prices:] (India)

It is our understanding that some governments have objected to this text or more generally the notion of delinking R&D costs from cancer medicine prices.

Our position is as follows. Cancer medicine prices are too high, they are not affordable or sustainable, and access to new cancer medicines is unequal and unfair. None of the 56 novel cancer medicines approved by the US FDA from 2010 to 2016 are included in the WHO Model List of Essential Medicines (EML), and many are rationed or not reimbursed even in high income countries, because of the price. This includes very important and effective medicines, such as the breast cancer medicine Kadcyla/TDM-1, and severe limits on off label use of expensive medicines.

Delegates to the World Health Assembly need be open to alternative R&D models that do not rely on unaffordable medicine prices as the predominant way to fund cancer drug innovation.

To accomplish this, WHO should fulfill its leadership role as the appropriate global institution capable to initiate a feasibility study of alternative R&D modelling that invalidates the need for unaffordable high prices for cancer medicines. The alternative is to dismiss the proposal, and bend to the power of large pharmaceutical corporations and their agents, that have a vested interest in defending a system that puts the price of medicine above the interest of the patient. The WHA must not allow this to happen.

Sincerely,

Non governmental organizations working on access to medicine

Access to Medicine Ireland
AIDS Fonds, The Netherlands
Alliance for Public Health (Ukraine)
All-Ukrainian Network of PLWHA
Campaign for Affordable Trastuzumab (India)
Chasing Zero (UK)
Commons Network
Corporación Innovarte (Chile)
Dying for a Cure (UK)
Health Action International (HAI)
Health and Trade Network
Health Poverty Action (UK)
Health Projects for Latvia
Hepatitis Scotland
Just Treatment (UK)
KEI Europe
Knowledge Ecology International (KEI)
La fundación IFARMA (Colombia)
MdM (Médecins du Monde) / DotW (Doctors of the World)
Misión Salud (Colombia)
Oxfam
People of Faith for Access to Medicine (USA)
Public Eye (Switzerland)
Salud por Derecho (Spain)
Social Security Works (USA)
STOPAIDS (UK)
UAEM
Union for Affordable Cancer Treatment (UACT)
Wemos (the Netherlands)

The three co-chairs of the Lancet Commission on Essential Medicines Policies

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Other Health Professionals

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Reema Ramachandran, MD MPP, Assistant Scientist (Research Faculty), Department of International Health, Innovation + Design for Enabling Access (IDEA) Initiative, ReAct-Action on Antibiotic Resistance Strategic Policy Program, Johns Hopkins Bloomberg School of Public Health

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**Economists**


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Ellen ’t Hoen, Medicines Law & Policy and Global Health Unit, University Medical Center Groningen (The Netherlands)

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Leena Menghaney, Campaign for Affordable Trastuzumab (India)

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Other individuals, with identifications

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- Germán Holguín, Director General, Misión Salud (Colombia)
- Manon Ress, Knowledge Ecology International, UACT
- Marcus Low (Author of the Novel ‘Asylum’, South Africa)
- Melissa Barber, Public health researcher and advocate (South Africa)
- Natalie Sharpley, Head of Policy and Campaigns, Health Poverty Action, London
- Thiru Balasubramaniam, Geneva Representative, Knowledge Ecology International