Health Action International (HAI) welcomes the opportunity to share our position on the design, development and role of the WHO Regional Office for Europe Access to Novel Medicines Platform (NMP), as referred to in the Draft Concept Note. Access to health technologies has become a major policy concern shared by all countries. Pricing, availability and, as the COVID-19 pandemic has shown, resilience are the main challenges to which a policy response is urgently needed.

The Oslo Medicine Initiative (OMI) attempted to identify ways to strike a balance between incentives for innovation and requisites for access of health technologies through solidarity, transparency and sustainability. This desire for a new social contract that governs access to innovation is shared by many.

It is our strong conviction that the principles espoused by OMI must also guide the establishment of NMP. Solidarity between Member States is at the core of WHO and one of the pillars to achieve Universal Health Coverage; regarding access to novel medicines and other health technologies, solidarity would imply sharing know-how and enabling technology transfer both within European countries and beyond, through existing structures and initiatives. NMP must set the goal of reducing disparities when it comes to availability, predictability and reliability of supply and pricing of novel medicines, especially cancer treatments, in the European region.

Meanwhile, economic sustainability of public health systems is increasingly threatened by excessively high prices of medicines. This situation is exacerbated by the misuse and abuse of intellectual property protection measures—from frivolous patent granting to the undue extension of market exclusivity and other anticompetitive practices. The NMP should take a strong stand to make the systematic use of WHO-endorsed flexibilities of the Trade Related Aspects of Intellectual Property (TRIPS) Agreement, a milestone of public interventions on excessive pricing, lack of competition and other unacceptable practices by pharmaceutical companies.

We note positively the willingness to include all relevant actors but must share our concern regarding the inclusion of private sector representatives in discussions with governments or as part of a formal exchange and dialogue structure. The distinction between Non-State Actors (NSA) is blurred, and public-interest non-governmental organisations (NGOs) are grouped together with commercially sponsored NGOs and business entities with a vested interest in the outcome of deliberations. For the sake of transparency, a stringent Conflict of Interest policy should be instated and made public for all taking part in NMP proceedings.

The NMP constitutes a good opportunity for WHO Euro to renew its leadership in pharmaceutical policy discussions in the European region, assisting Member States in exchanging information, adapting WHO resolutions into domestic legislation and harnessing national research capabilities for common regional and global purposes. Antimicrobial resistance, medicine shortages and opacity of pharmaceutical pricing and procurement are some of the challenges awaiting us. As are many other public interest organisations, HAI is at the ready to share insights, knowledge, and experience.