



## Universities Allied for Essential Medicines

### Policy brief – February 2016

Universities Allied for Essential Medicines (UAEM), a global student-led network rooted in academia, is calling on leading policymakers to advocate for an R&D Framework that is driven by public health needs and delivers medicines that are universally accessible and affordable.

In order to achieve this, we urge Member States of the World Health Organisation (WHO) to negotiate a much overdue agreement on global biomedical research and development (R&D Agreement).

**Context** – The global standard of research and development (R&D) for biomedical innovation has done little to ensure the affordability of medicines for all those in need. Prices of medicines are sharply rising each year and treatment costs have become unsustainable for health care budgets of developed and developing nations alike. New Hepatitis C cures such as sofosbuvir are marketed at an exorbitant \$84,000 (USD) per treatment course which is \$1,000 (USD) per pill. Meanwhile, innovation is lagging further behind while neglecting to address larger global burdens of disease: the past 10 years have seen only 25% of new medicines approved on the market provide a therapeutic benefit for patients (Revue Prescrire, 2015). **The current biomedical R&D system is no longer just failing the poor—it is progressively failing us all.**

**Background** - Since 2006, Working Groups at the WHO have discussed the development of a comprehensive, equitable, global plan of action to ensure biomedical R&D addresses global health needs. This finally resulted in the recommendations of the Consultative Expert Working Group (CEWG) published in 2010.

While these recommendations were well received and supported by many Member States, opposition by a few vocal members led to the discussions of an R&D agreement being postponed to the open ended meeting prior to the 69th World Health Assembly in 2016. Since the stalling of CEWG discussions in 2012, progress towards an equitable R&D Agreement that benefits patients has been limited.

During those 10 years of discussions, a number of alternative R&D initiatives have been proposed and implemented. While some of these initiatives represent potential building blocks for a new approach to biomedical R&D, many do not. The range of initiatives and differing effectiveness in actually providing access to medicines shows a deep lack of coherence and strategic direction. **A global agreement for an equitable approach to biomedical R&D can provide a solid foundation of guiding principles that maintain the focus on global health needs.** We strongly believe an R&D agreement among WHO Member States can provide the much-needed framework to bring together (1) the successful initiatives, which advance the needs of patients and are proven or reasonably expected to provide increased access to medicines for patients, and (2) create a much needed space for further innovation and collaboration.

We simply cannot afford to postpone these discussions any further.

We sincerely appreciate the recent efforts of the WHO in convening the High Level Panel on Access to Medicines and developing the R&D Blueprint to accelerate R&D in emergency response.

We believe that both initiatives will support advances in confronting current access to medicines challenges. However, these initiatives must not and cannot replace a WHO agreement on R&D. Without WHO discussions on a sustainable, effective and systemic change in the approach to R&D, the work of both bodies is at risk of adding to the myriad of ad hoc efforts that target the symptoms, but not the causes, of this world wide problem.

Therefore we are calling on WHO Member States, policymakers, and governments to ensure the open-ended meeting of WHO Member States prior to WHA69 in 2016 in Geneva seriously addresses this urgent situation. This open ended meeting must also include a broad range of civil society actors to contribute their expertise and experience to the discussions. The meeting should advance and inform Member States' decision on an agreement that will support a coherent, sustainable and needs-driven agenda for a new approach to biomedical R&D for all

## Who is UAEM?

UAEM is global organization that gathers students, graduates and researchers advocating for equal access to affordable medicines and for a new R&D model that puts patients over profits. We believe that our universities have an opportunity and a responsibility to improve global access to public health goods.

Many important medicines and public health technologies are developed in academic laboratories. Their accessibility in poor nations is profoundly affected by the research, patenting and licensing decisions made by universities. We try to ensure that university medical research meets the needs of people worldwide by changing norms and practices around academic patenting and licensing and we empower students to respond to the access and innovation crisis.



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A global R&D Agreement could cover the following key points:

A binding commitment of WHO Member states to:

- Develop a framework which focuses on patient needs and advances a needs-driven agenda. This should represent a clear policy shift away from the current profit-driven model of biomedical R&D.
- Ensure sustainable funding of R&D based on global health needs.
- Support and develop innovative mechanisms of biomedical R&D which incentivize true innovation and result in increased access to medicines for all patients. The key mechanisms which are needed in these initiatives are open data sharing, open access, de-linkage and use of innovative financing such as push, pull and pool mechanisms.
- Include provisions to encourage sharing of knowledge between researchers and across borders, enhancing the speed and efficiency of innovation.

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