

# THE EUROPEAN UNION AND ACCESS TO MEDICINES



# EU access to medicines commitments

- Millennium Development Goals
- Doha Declaration on TRIPS and Public Health (November 2001)
- World Health Assembly resolutions
- UNITAID
- EU commitments for aid to health

# The EU: Following and even exceeding the U.S trade agenda

- USA (2002-7) imposed strict IP rules via:
  - Free trade agreements
  - Special 301 report
  - Economic inducements/threats (GSP status)
- Despite MDGs, Doha Declaration, congressional mandate
- 2008 Congressional report (GAO) affirms and recounts US trade agenda

# Consequences for public health?

- Oxfam: US-Jordan FTA study
  - Delayed generic competition for numerous classes of medicines due solely to FTA
  - 2 to 10 fold increases in prices for key cancer and heart disease medicines.
- US-Guatemala FTA study:
  - Increases in medicine prices of 2 to 58 times due to delays in generic competition
  - Delays in generic competition resulted in introduction of medicines in the U.S. before Guatemala

# Changes to the US approach?

- May 2007 FTA re-negotiation
  - Linkage and patent term extensions voluntary
  - 5 year limit on data exclusivity with compulsory licensing exception
  - Not sufficient, but step in the right direction
- Compulsory licensing
  - High-level Congressional support for use of compulsory licensing in Thailand.
  - Warns Bush administration of exerting undue pressure on developing countries

# EU FTAs w/Thailand and India

- Thailand
  - Significant efforts to provide free health care, including use of compulsory licensing.
  - World Bank (2006) warned that FTA with strict IP rules would jeopardize free HIV treatment.
- India
  - ‘Pharmacy of the developing world’
  - 67% of its generic medicines (80% of ARVs) exported to developing countries
  - FTA would have significant consequences for millions in India and around the world

# 2006 FTA protests in Thailand



# Research and Development

- ‘Mixed’ bag:
  - Noteworthy initiatives – European Clinical Trials and Development Partnership (ECTDP)
- Yet...
  - Inadequate public spending on research and development for ‘neglected’ diseases
  - Aggressive lobbying against new, ‘public-health’ approaches to innovation at the World Health Organization



# Guilty of a double standard?

- Domestic policies to improve access to medicines
  - Competition Commission inquiry
  - EU Member State price controls/reference pricing
- Domestic policies to improve industry-based innovation
  - Innovative Medicines Initiative

# Lack of coherence?

- Do EU innovation and access policies undercut EU development assistance for health?
  - ‘Health in all policies’
  - Policy Coherence for development