Weighted average prices of ARVs in low and middle income countries in 2005

Compiled by the AMDS secretariat.

Data contributed by:

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- JSI/Deliver;
- MSH;
- WHO/CPS;
- WHO staff working in different countries.

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/
Weighted average price paid by low income countries for selected 1st line ARV formulations in 2005

<table>
<thead>
<tr>
<th>Formulation</th>
<th>Price (US$/patient/year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stavudine (d4T) 30 mg</td>
<td>40</td>
</tr>
<tr>
<td>Stavudine (d4T) 40 mg</td>
<td>45</td>
</tr>
<tr>
<td>Lamivudine (3TC) 150 mg</td>
<td>65</td>
</tr>
<tr>
<td>Zidovudine (ZDV) 300 mg</td>
<td>183</td>
</tr>
<tr>
<td>Nevirapine (NVP) 200 mg</td>
<td>219</td>
</tr>
<tr>
<td>Efavirenz (EFV) 600 mg</td>
<td>341</td>
</tr>
<tr>
<td>Efavirenz (EFV) 200 mg</td>
<td>513</td>
</tr>
<tr>
<td>d4T/3TC 30/150 mg</td>
<td>72</td>
</tr>
<tr>
<td>d4T/3TC 40/150 mg</td>
<td>84</td>
</tr>
<tr>
<td>ZDV/3TC 300/150 mg</td>
<td>208</td>
</tr>
<tr>
<td>d4T/3TC/NVP 30/150/200 mg</td>
<td>144</td>
</tr>
<tr>
<td>d4T/3TC/NVP 40/150/200 mg</td>
<td>148</td>
</tr>
<tr>
<td>ZDV/3TC/NVP 300/150/200 mg</td>
<td>156</td>
</tr>
</tbody>
</table>

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/
Weighted average price paid by middle income countries for selected 1st line ARV formulations in 2005

** This is due the fact that d4T 30 mg was bought in small quantities, with high transaction costs, while d4T 40 mg was bought in bigger quantities, and had lower transaction costs

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/
Weighted average price paid by low income countries for selected 2nd line ARV formulations in 2005

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/
Weighted average price paid by middle income countries for selected 2nd line ARV formulations in 2005

* Taken in combination with ritonavir as booster which cost on average US$ 539 patient year

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/
Weighted average price paid for d4T/3TC/NVP 40/150/200 mg in 2005

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/
Weighted average price paid for lamivudine (3TC) 150 mg 2005

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/
Weighted average price paid for stavudine 40 mg in 2005

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/
Weighted average price paid for d4T/3TC/NVP 30/150/200 mg in 2005

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/
Weighted average price paid for zidovudine 100 mg in 2005

This finding can be explained by the fact that low income countries bought this formulation in small quantities (high transactional costs) while middle income countries procured in bigger quantities with low transactional costs.

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/
Weighted average price paid for efavirenz (EFV) 50 mg in 2005

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/
Weighted average price paid for stavudine (d4T) 30 mg in 2005

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/
Weighted average price paid for efavirenz (EFV) 200 mg in 2005

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/
Weighted average price paid for ZDV/3TC 300/150mg in 2005

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/
Weighted average price paid for nevirapine (NVP) 200 mg in 2005

This finding can be explained by the fact that low income countries heavily procured from Boehringer Ingelheim while middle income countries opted for cheaper generic version.

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/
Weighted average price paid for zidovudine (ZDV) 300 mg in 2005

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/
Weighted average price paid for efavirenz (EFV) 600 mg in 2005

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/
Weighted average price paid for didanosine 400 mg in 2005

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/
Weighted average price paid for nelfinavir (NFV) 250 mg in 2005

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/
Weighted average price paid for didanosine (ddI) 100 mg in 2005

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/
Weighted average price paid for abacavir (ABC) 300 mg in 2005

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/
Weighted average price paid for didanosine (ddI) 200 mg in 2005

This finding can be explained by the fact that low income countries heavily procured from Bristol-Myers Squibb. While middle income countries opted for cheaper generic versions.

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/
Weighted average price paid for saquinavir (SQV) 200 mg in 2005

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/
Weighted average price paid for tenofovir (TDF) 300 mg in 2005

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/
Weighted average price paid for indinavir (IDV) 400 mg in 2005

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/
Weighted average price paid for ritonavir (RTV) 100 mg in 2005

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/
Weighted average price paid for lopinavir/ritonavir (LPV/r) 133/33 mg in 2005

Source: Global Price Reporting Mechanism http://www.who.int/3by5/amds/price/hdd/