The purpose of *Essential drugs in brief* is to share information on the latest country support provided or coordinated by the extended Drug Action Programme team (country, regional and HQ offices).

It is an informal instrument aiming to share our experiences with colleagues within and outside WHO, who are active in the implementation of national drug policies at national and regional levels.

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**Historic Doha Declaration on the TRIPS Agreement and Public Health**

WT/MIN(01)/DEC/W/2

14 NOVEMBER 2001

The Doha Declaration is a major step in the campaign to ensure access to medicines for all. This was the first time in the 50-year history of the multilateral trading system that a separate Ministerial Declaration was considered on intellectual property and public health issues.

**Main points of the Declaration**

- “The declaration affirms that the TRIPS Agreement does not and should not prevent Members from taking measures to protect public health. Accordingly, while reiterating our commitment to the TRIPS Agreement, we affirm that the Agreement can and should be interpreted and implemented in a manner supportive of WTO Members’ right to protect public health and, in particular, to promote access to medicines for all.

In this connection, we reaffirm the right of WTO Members to use, to the full, the provisions in the TRIPS Agreement, which provide flexibility for this purpose.”

- The declaration asserts that “each provision of the TRIPS Agreement shall be read in the light of the object and purpose of the Agreement as expressed, in particular, in its objectives and principles”.

- The declaration categorically states that “[e]ach Member has the right to grant compulsory licences and the freedom to determine the grounds upon which such licences are granted”. In addition, Members are afforded the “right to determine what constitutes a national emergency or other circumstances of extreme urgency”.

- The declaration asserts that the “effect of the provisions in the TRIPS Agreement that are relevant to the exhaustion of intellectual property rights is to leave each Member free to establish its own regime for such exhaustion without challenge, subject to the MFN (Most-Favoured-Nation) and national treatment provisions of Articles 3 and 4”.

- Finally the declaration instructs the Council for TRIPS to find an expeditious solution in order to make effective use of compulsory licensing in countries with insufficient or no manufacturing capacities in the pharmaceutical sector.

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**Statement by the representative of the World Health Organization at the WTO Council for TRIPS**

5–7 MARCH 2002

“As we are taking the floor for the first time since the Doha Ministerial Declaration, WHO would like to congratulate WTO members for the attention and interest given to the health sector and to the access to essential medicines in particular. We would like also to welcome China as a new member of the WTO.”
Training workshop in computer-assisted drug registration software, SIAMED

Eight countries in the African Region benefited from a training workshop on computer-assisted drug registration, SIAMED, which was held in Geneva from 21 to 28 November 2001. The workshop was organized for countries which have succeeded in the use of SIAMED. National officers from eight drug regulatory authorities participated in this training.

The first week of training was for participants from English-speaking countries (South Africa, Tanzania, Uganda) while the second week was for those from the French-speaking countries (Benin, Cameroon, Niger and Tunisia). It was highly participatory with each participant working on a computer with country data and sharing experiences among themselves. Two participants from Kosovo participated in the workshop during the first week on an observatory basis since SIAMED is not yet operational in their country.

The course had a very positive impact on the users and providers of the software. Participants shared their experiences especially on common problems encountered with the use of SIAMED. This gave WHO useful feedback on how to move forward with this drug registration software.

The WHO has over the years introduced SIAMED software to facilitate the process of drug registration. SIAMED is an important tool in the quality assurance programme of Drug Regulatory Authorities. There has been an increased demand from countries for SIAMED. It should be noted that SIAMED is useful only where there is already a well set up manual drug registration system in place.

National courses on evidence-based pharmacotherapy teaching: the experience of Guatemala.

Courses on evidence-based pharmacotherapy teaching started in the Americas two years ago in the University of La Plata and, since then, several professionals from many countries are being trained in that methodology which is expected to be replicated throughout medical schools in the Americas. Six of the professionals trained during the past two years were from Guatemala. This group, with the assistance of La Plata University and the Scientific Network for Rational Drug Use also based in La Plata, conducted the first national course in pharmacotherapy teaching in Guatemala, 12 to 16 November 2001.

Several factors made this course possible: the political will of the Minister of Health and the commitment of medical schools to improve their curricula and teaching methodology strategies. The team responsible included a specialist on curriculum design, professors of pharmacology and the person responsible for continuing education.

When implemented at national level, these courses should take into account local characteristics and needs. In the case of Guatemala this first course was developed...
Assessment Mission Afghanistan

A WHO team conducted a preliminary assessment of the pharmaceutical situation in Afghanistan from 15 to 24 January 2002. It was the first technical mission to enter Afghanistan since WHO reopened its offices in Kabul.

The pharmaceutical situation has seriously deteriorated during the last 20 years and major technical and financial assistance will be required to develop pharmaceutical systems offering an appropriate level of services. WHO has proposed a US$ 25 million budget for the first year to the international community, which would allow the establishment of medical stores at the central and provincial levels supplying safe essential drugs to the Afghans in Kabul, in the provinces and also in remote areas where the majority of the population lives.

Several specific activities have been identified for immediate implementation. They include:

- Appoint essential drugs focal point in WHO Office in Kabul;
- Develop national guidelines for drug donations;
- Review and update the national list of essential drugs;
- Train key staff;
- Initiate the national drug policy development process;
- Establish a mechanism for testing of drug samples in the region.

Building up the pharmaceutical sector will take years and requires long-term commitment of any partner engaging in the country. WHO is committed to work closely with the Government of Afghanistan and coordinate efforts of other United Nations Agencies and non-governmental organizations involved in the development of the pharmaceutical sector.

Regional Committee, 48th session

The 48th session of the Regional Committee for the Eastern Mediterranean, following interventions from a number of delegates expressing the importance of the essential drugs programme for the development of pharmaceutical, and health, services in their country:

- Unanimously requested that the revised procedures for updating the WHO model list of essential drugs be adopted immediately and without change;
- Retained the essential drugs programme as one of the regional priorities.

National workshop on increasing access to essential drugs for the rural population in Moldova

CHISINAU, 21 DECEMBER 2001

The project on Increasing access to Essential Drugs for the rural population in Moldova was launched during a national workshop held in Chisinau on 21 December 2001. The overall goal of the project is reduction of poverty consequences in the rural areas of Moldova through the provision of essential drugs by pharmacy outlets, which will be opened within the structure of the existing centres of family medicine. The project was developed with technical assistance from WHO within the framework of its Special Project for Pharmaceuticals in NIS and will be supported financially by the World Bank.

Europharm Forum survey on smoking cessation interests and activities by pharmacists

The Forum carried out a survey on Smoking cessation interests and activities by pharmacists, funded through the EU. The survey showed that community pharmacists:

- smoke less than their respective populations
- are aware of the health risks of both active and passive smoking
- are positive towards cessation activities
- have enough understanding of tobacco dependence to begin cessation activity
- would benefit from further training
- who did smoke were more negative towards non-smoking, and less active in cessation activities.

Regulating and controlling drug promotion in Europe

Drug inspectors from Ministries of Health and Drug Regulatory Agencies from 24 countries from Western Europe and Central and Eastern Europe, together with people from the EU Commission, met in Bonn, Germany in December 2001 in order to discuss their national systems for regulating and controlling drug promotion, as well as other areas of common concern, such as phase IV trials or information over the Internet.
The meeting concluded that, although the WHO Ethical Criteria for Drug Promotion and the EU legislation on drug promotion are available, practices and priorities vary from country to country. There is a great need to improve the information to health professionals and to patients in order to achieve better outcomes from drug treatment. Increased networking among the inspectors will be encouraged, and joint projects may be developed.

**SOUTH-EAST ASIA REGION**

**Informal Consultation on Panchakarma**

Panchakarma is one of the therapies in Ayurveda, a system of Traditional Medicine widely practised in the South-East Asia Region. This consultation, organised by SEARO, was held from 20 to 23 November 2001 in New Delhi. Participants were from Bangladesh, Bhutan, India, Myanmar, Nepal, Sri Lanka and Thailand and included regulators and practitioners from the public and private sector. There had been previous meetings on Traditional Medicine in the Region but this was the first meeting on a specific area in a system of traditional medicine.

The consultation began with presentations on the status of Ayurveda in the Region, the professional and government perspective on regulation and a review of selected country experiences; there were three presentations on Panchakarma from 3 major centres in India. On subsequent days, practice and research in Panchakarma as well as the minimum facilities required for the practice of Panchakarma were discussed. The last was specially relevant in view of the recent trend of Panchakarma being provided outside hospitals in facilities such as Spas and Hotels; the minimum resources required in these facilities as well as their regulation was extensively discussed. Draft guidelines for practice and research in Panchakarma and for facilities required in institutions were prepared during the meeting. It is hoped that these guidelines, when made final, would help the countries in the Region to make ideal practice more prevalent and also be the basis for regulation of Panchakarma.

This meeting is part of the activities envisaged in the proposed WHO Traditional Medicine Strategy. Policy and regulation are crucial in ensuring the safety, efficacy and quality of traditional medicine. Consensus achieved through consultation and resulting in guidelines will be a solid foundation for the future progress of traditional medicine.

**WESTERN PACIFIC REGION**

**Intercountry Meeting for Members of Drugs Therapeutics Committee in the Western Pacific**

An inter-country Meeting for Hospital Drugs Therapeutics Committee Members in the Western Pacific Region took place from 15 to 17 October 2001 in Penang, Malaysia. The meeting was organized by the WHO Collaborating Centre on Drug Information of the Universiti Sains Malaysia, with WHO support. The objectives were to discuss different intervention strategies to promote quality use of medicines in hospitals in WPR countries, to identify training tools for DTCs in the region, to draft project proposals for innovative interventions, etc. Thirty participants from thirteen (13) countries in the region attended the meeting. They were from Brunei Darussalam, Cambodia, China, Fiji, Lao PDR, Malaysia, Mongolia, Papua New Guinea, Philippines, Samoa, Solomon Islands, Tonga and Vietnam.

**National course on Promoting Rational Drug Use in China**

Problems of irrational use of drugs in China are now being dealt with by the Ministry of Health and the State Drug Administration. A national course on Promoting Rational Drug Use was organized by the Ministry of Health in collaboration with the State Drug Administration in Beijing from 19 to 29 November 2001. The course was attended by hospital directors, health programme managers, trainers in provincial health departments from various provinces in China, and researchers from universities. The course topics and materials were the same as for the International Network for Rational Use of Drugs (INRUD), with additional topics from drug utilization studies undertaken in China. The facilitators included those from WHO, from Harvard University and a number of national experts from China. This national course will be followed up by training and other rational drug use related activities in many provinces.

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