Knowledge Ecology International:
1. Why does the draft declaration ignore the report by the UN Secretary General High Level Panel on Access to Medicines? Is the massive drug company lobby too strong for the UN on this issue?

2. There are challenges in providing access to off-patent essential drugs, but for some diseases, newer patented medicines are important.

3. In order to scale up treatment, governments have to address the issue of high prices for drugs, vaccines and other medical technologies, including the new cell and gene therapies mentioned earlier that are so promising, but are extremely expensive, and have limited and very unequal access.

4. The zero draft of the declaration does not cite the crisis in high prices for drugs for cancer, rare diseases and insulin, and does not address patents or other intellectual property rights which influence pricing and access.

5. Compulsory licensing of patents can and should be used to curb high prices. The political declaration needs to make reference to the 2001 Doha Declaration on TRIPS and Public Health, in paragraph OP13 (a recommendation also put forth by the NCD Alliance, and consistent with the request today by Oxfam and 243 health NGOs and researchers to address TRIPS flexibilities in the declaration).

6. For the new gene and cell treatments, delegates should take note of TRIPS Article 27.3(a), which reads: Members may also exclude from patentability . . . diagnostic, therapeutic and surgical methods for the treatment of humans or animals. We note the several WTO members have implemented such an exception in national laws the closely mirrors the TRIPS language.

7. OP13 should also mention the most important reform, and the only one that will move us towards universal access, which is to progressively delink the incentives to invest in R&D from product prices, a topic the WHO and the UN's HLP on A2M have identified as a key reform, and one that 16 US Senators have asked be studied in the US context. Specifically, "UN members need to progressively delink R&D costs from the prices of medical technologies."

8. OP19 on transparency should include a reference the need for transparency of R&D costs, prices, patent landscapes and utilization of drugs by country, in order to have better metrics for reforming incentives, identifying access barriers, and measuring disparities in access.

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