Antiretrovirals

New Inclusions
Darunavir, raltegravir, and etravirine

MSF has been providing antiretroviral care in resource-limited settings since 2001 and currently supports treatment for over 170,000 patients in 20 countries. Our organization is increasingly faced with the need to provide effective second-line and salvage therapy for patients experiencing treatment failure. For these reasons, MSF fully supports the inclusion of darunavir, raltegravir, and etravirine in the WHO Model List of Essential Medicines.

Darunavir is indicated in international guidelines for the treatment-experienced patients and treatment-naïve patients. Raltegravir is indicated for the treatment-experienced patients and treatment-naïve patients since January 2009. Etravirine is indicated for treatment-experienced patients in the case of non-response to other treatments.

MSF uses each of these three drugs in combination with other active drugs for the treatment experienced patients failing a lopinavir-ritonavir based regimen.

Patent Pool

MSF fully supports the lists of priority missing essential medicines submitted by the Medicines Patent Pool, UNITAID and the WHO HIV/AIDS Department to the Expert Committee.

This list is comprehensive in addressing the majority of medicines and combinations that will be desirable to ensure sustainable, effective, and simple treatments are available for adults and children living with HIV/AIDS.

We would further add the following medicines that are currently in the pipeline to this list: Lersivirine (evidence of activity against HIV resistance to efavirenz), GSK 2248761 (evidence of activity against NNRTI-resistant strains), CMX 157 (potentially favourable efficacy compared to current antiretrovirals available as first line) and elvucitabine (potential as a long acting formulation).

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