



71st session of the WHO Regional Committee for Europe, technical briefing on the Oslo Medicines Initiative (OMI): better access to effective, novel, high-priced medicines

16 September, 2021

Honorable Chairs, Regional Director, MS representatives, ladies and gentlemen,

Good afternoon and thank you for the opportunity to convey people's views on the access to effective, novel, high-priced medicines.

I am Dr Milka Sokolović, Director General of EPHA, the European Public Health Alliance.

For those of you who have not encountered us before, **EPHA** is the leading public health stakeholder in Brussels, involved in advocacy towards the European Union institutions and agencies, as well as the WHO. With our versatile civil society membership from the WHO European region, we advocate across issues of public health, including policies for better and affordable medicines.

As a way of disclosure of any potential conflict of interest, we receive *no* funding from pharmaceutical companies, and solely represent the views of civil society.

While obvious, it cannot be stressed enough that pandemic brings to the forefront issues of equity, solidarity, human rights and social justice, especially for the most vulnerable of our societies. They lie at the heart of the debate on universal access to medicines and are at the very heart of our work at EPHA.

Undeniably, COVID19 illustrates and emphasizes the urgent need to further increase transparency in pharmaceuticals, and to strengthen collaboration amongst Member States. We have already seen examples of the benefits of increased transparency: for instance, the very experience of negotiating an EU-wide price for the COVID-19 vaccines creates a new dynamic for joint procurement, which *by design* brings about more price transparency than confidential discounts. It should be noted, however, that the push for transparency must go well beyond transparency of prices. Transparency in costs, as well as in funding to support the research and development of health products is also crucial.



Apart from that, price transparency *per se* applies differently to countries and regions, depending on their negotiating position, purchasing power, experience, and know-how. In other words, for the WHO Europe region and its members, a one-size-fits-all solution would potentially be counter-productive. Nevertheless, the implementation of the WHA Resolution 72.8 on transparency offers a comprehensive inventory of action, yet it requires strong political support and international coordination.

Pharmaceutical systems are complex and difficult to comprehend. We should therefore not lose sight of what truly matters in medicines' policies. And what matters includes:

- firstly, timely and affordable access to safe and effective medicines;
- secondly, meaningful, needs-driven, patient- as opposed to drug-centric innovation, by means of commensurate incentives and rewards, and
- thirdly, sustainable health system, a pillar of social equity.

In what matters, transparency is a crucial step towards enabling the new vision for collaboration between the public and the private sectors, as envisaged by the Oslo Medicines Initiative.

Indeed, the Oslo Medicines Initiative paves the way for a frank, comprehensive discussion on how to rebalance pharmaceutical systems in the face of ever-increasing prices for medicines and vaccines¹ and debatable innovation². To this end, in the coming months it will be important to make progress on the following fronts:

1. Map, track, streamline and coordinate the multilayered public support that goes into biomedical R&I. Since public guarantees and flexibilities are used to de-risk the R&D process, the public needs to get a fair share of the returns, but also to have a clear say in steering the innovation. This, for instance, can be achieved through non-exclusive, voluntary licensing and affordable pricing guarantees;
2. Foster the collaboration amongst buyers, to address the information asymmetry, mitigate its effects, and boost their negotiating power;
3. Guarantee a robust regulatory ecosystem, which gives us medicines with proven added therapeutic value;

¹ <https://theintercept.com/2021/03/18/covid-vaccine-price-pfizer-moderna/>

² <https://kce.fgov.be/en/do-innovative-medicines-against-cancer-always-have-a-real-added-value> & <https://www.nature.com/articles/s41416-021-01495-7>



4. Invest into new delinked approaches and non-market-based solutions for the development of new antibiotics, to mitigate the devastating consequences of antibiotic resistance³;
5. Identify policy solutions to prevent or mitigate the impact of medicines' shortages, and to increase supply chain security.

WHO Europe is in a unique position to foster this dialogue to reach a new social contract with pharmaceutical companies, and we will be happy to support you in this critical mission.

With this, I would like to thank you for your attention and for the opportunity to share EPHA's views.

³ <https://www.reactgroup.org/news-and-views/news-and-opinions/year-2021/new-react-report-governments-need-to-take-more-leadership-to-ensure-global-sustainable-access-to-effective-antibiotics/>