3.6 Addressing the Global Shortage of, and Access to, Medicines and Vaccines

Global Health Council, supported by PATH, AAP, and NCD Child thank the chair for this opportunity to comment. We observe supporting access to new technologies is complex, and failures to achieve widespread access to health technologies in low-resource settings are rarely due to a single issue. Barriers to access are best overcome when approached holistically, over the long-term, addressing affordability, availability, acceptability, and sustainability.

We applaud the WHO secretariat for its comprehensive approach to addressing barriers to accessing essential health technologies. There is no single access solution. We agree on the need for stronger regulatory systems and harmonized processes as critical in supporting access. Additional support from member states should build on progress made by platforms—like AVAREF—in strengthening local capacity and streamlining regulatory reviews.
We encourage WHO to better leverage the expertise and experience of innovative structures like product development partnerships (PDPs) in securing sustainable access commitments. PDPs work to accelerate the development of and access to essential health technologies targeting under-addressed diseases, including NCDs. PDPs have experience managing intellectual property, supporting affordability, strengthening local research and regulatory capacity, and managing supply chains.

We support WHO's attention to the availability of pediatric-formulated medicines and vaccines. Poor access to such medicines is particularly acute for children. Factors contributing to pediatric-formulated supply shortages include poor demand, data quality, insufficient regulatory capacity, and small profit margins. This is particularly critical for children with NCDs, including cancers, heart disease, asthma, and diabetes. These challenges demand policy changes and improved, innovative financing mechanisms. Development of a comprehensive Essential Medicines List for Children requires pediatric studies, methodologic and ethical requirements for pediatric trials, research and development costs, and patient recruitment in clinical trials. We recommend research and provision of pediatric data on medicines submitted by companies for inclusion in the Essential Medicines List for Children.