

*Report on the
2014 Access to Medicine Index Launch*



“ There are 2 billion people on the globe with no access to medicines.” (ATMI)

On Wednesday, 4 February, MEP Françoise Grossetête hosted a debate with EFPIA in the European Parliament to discuss **2014 Access to Medicine Index** report. The index is an independent and widely acknowledged ranking that aims to measure leading pharmaceutical companies efforts to improve access to medicines. “I am pleased that the ATM Index are looking at companies to help bridge the gap of access and that they have established a means to assess and monitor progress or indeed, lack of progress”, said Mme Grossetête.



The key findings of the 2014 Index were presented by Jayasree K. Iyer, PhD, Head of Research for the Access to Medicine Index (ATMI) who pointed to an overall improvement in access to medicines, however, *“the progress is uneven in different areas and for example the areas of public policy and patent disclosure are still problematic.”*



Among the top 20 pharmaceutical companies, 5 are responsible for more than half of the products developed and more than half of the companies are currently developing medicines for children. Finally she added that according to the Index, more and more companies take into consideration in their pricing decisions people’s ability to pay for medicines.

Dr. David Cavan, Director of the International Diabetes Federation, illustrated the difficulties of to medicines through the example of insulin, where access issues persist despite it being first used in 1922. He pointed out that *“the question of access was not so crucial in the UK itself, but when leading a global federation, it is a severe challenge that cannot be overlooked.”*



Dr. Canice Nolan, Senior Coordinator for Global Health at DG SANTE presented the initiatives, incentives and partnerships of the European Commission that are aiming to improve access to medicines. He emphasized that *“this is an issue that is connected to various areas where the European Commission is very active, in terms of legislation and financial support, dialogue and capacity-building.”*



Finally, Jon Pender from GSK brought in the industry- perspective. GSK has led the index since 2008 but he emphasized that they have continued to evolve their business model further since then: “We are building a diversified global business and we do not measure growth based on quarterly profits anymore, it is about market share, volume growth, sales growth and that comes, of course, from improving access.”

Among the topics discussed during the open debate was the possibility of extending the Index to generics. Wim Leereveld acknowledged the importance of this issue, but he pointed out that “It would not be easy to rank them with the other companies: we are already developing specific methodologies and discussing with sponsors”.

The benefits of public private partnerships were widely acknowledged by all stakeholders as they account for enhanced transparency and better outcomes. The number of medicines developed by PPPs has, according to the Index, increased since the last round.



The discussion also addressed the systemic challenges: How to fill the gaps in our innovation ecosystem? How companies should change their business models and how much is this about IP? Reacting to these questions Mr. Pender has emphasized that it is not only about IP: “Even if many of the medications from the WHO’s Essential Medicines List which can be produced freely because there are no IP limitations, are not reliably available to a third of the world’s population. This issue is not about IP, as there isn’t any, it’s down to other barriers such lack of infrastructure and investment in health.”



And finally what role has the Access to Medicine Index to play in all this? As Wim Leereveld concluded, the research-based pharmaceutical industry has great responsibility in improving access to medicines. The Index helps channel feedback on their activities, rewards the positive developments and encourages progress in various areas.