

Patents and Access to Medicines for Developing Countries

A Company and Industry Perspective

Corey Salsberg
Head International IP Policy

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Who We Are: Novartis at a Glance



Novartis is a global healthcare company whose mission is to discover new ways to extend and improve patients' lives.

Headquarters: Basel, Switzerland



- 123,000+ full-time associates from
 150+ countries
- Operations in over 140 countries (sales in 180 countries)

3 Main Global Operating Divisions



Pharmaceuticals – Innovative Rx



Alcon - Eyecare



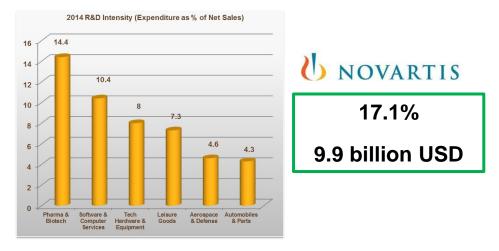
Sandoz - Generics + Biosimilars



Who We Are:

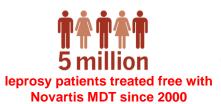
A Reciprocal Business in a Reciprocal Industry

- Novartis medicines reach more than 1 billion people globally each year.
- Our industry reinvests more of our sales back into R&D than any other.



Source: European Commission, 2014 EU Industrial R&D Investment Scoreboard.

 And we give back billions of dollars annually to 100s of millions of additional patients through our access & philanthropy programs.





Rural health clinics for 90 million people since 2007



Glivec International Patient Assistance Program

Donation of over USD 1 bn of free Glivec since 2002



Who We Are:

Innovation and Patient Health

Our ability to continue to meet patient needs depends on innovation.



"[B]efore Gleevec, only 30% of patients with CML [chronic myelogenous leukemia] survived for even five years after being diagnosed. With Gleevec, that number rose to at least 89%."

 Pray, L. (2008) Gleevec: the breakthrough in cancer treatment. Nature Education 1(1):37



In 2014, we teamed up with Google to develop "smart lens" technology.





In 2006, Sandoz launched the EU's first-ever biosimilar Omnitrope® (somatropin)

In Sept. 2015 launched the US's first ever biosimilar Zarxio™ (filgrastim).

We are an "innovation company."







- Over 200 R&D projects in clinical development as of July 2015
- 2014: **13** approvals in US, EU + JP
 - 5 FDA breakthrough therapy designations (2 in 2014)

In an innovation-based industry



Analysis Group (2013) Innovation in the Biopharmaceutical Pipeline: A Multidimensional View.



IP and Access to Medicine: Our Perspective

- Improving access is a critical goal that we share with all other stakeholders.
- But access is a *long-term* as well as **short-term** goal both equally critical to patients!

Tomorrow's

Medicines,

Tomorrow's

Short-Term Access

A complex problem with complex causes and complex solutions

95% of WHO essential medicines are off-patent, yet onethird of the world's population does not have reliable access to them, and, in parts of Africa and Asia, that is true for half the population.*

- Price Distribution costs, taxes (import + VAT), importer and supply chain margins, IP
- · Weak healthcare infrastructure
- · Lack of health insurance/financing
- Limited # of trained healthcare professionals
- Poverty and a lack of general infrastructure
- · Limited diagnostic and prevention opportunities
- Lack of health education

Long-Term Access **Patients**

Ensuring the future of medicine

- Innovation is the key to the future
- Innovation depends on research and development (R&D)
- Pharmaceutical R&D is extremely risky and expensive
- IP is a proven tool to alter the economics of drug discovery

As an **enabler** of both long and short-term access, IP is part of the **solution**.

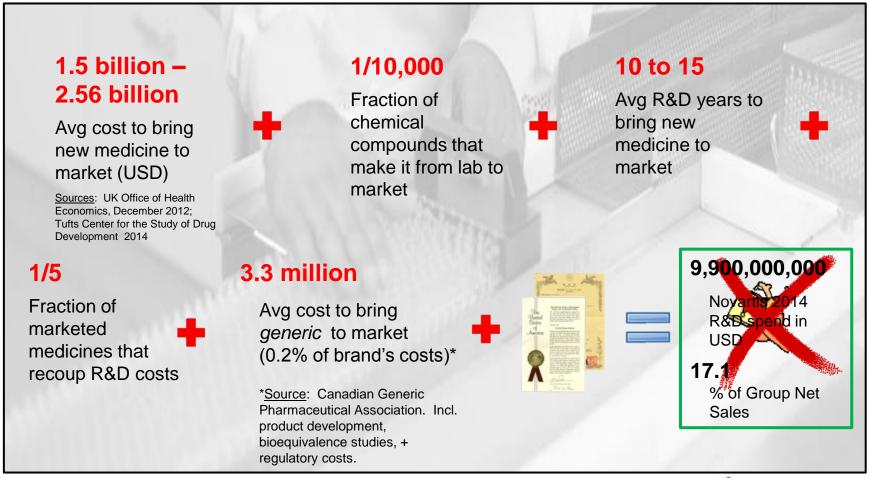




How IP Enables Long-Term Access: An Economic Perspective



IP alters economics of drug discovery to make a "bad" investment feasible and create a sustainable model of biopharma innovation.





IP Enables Long-Term Access: An Economic Perspective (II)

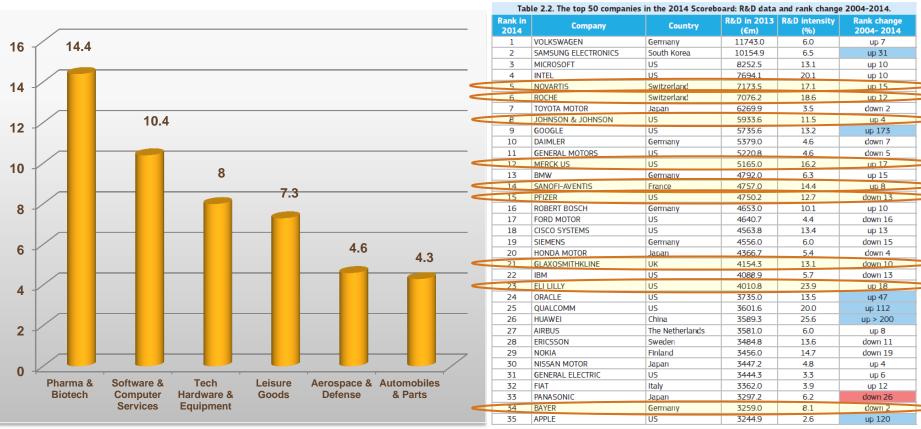


The patent system is effective in incentivizing biopharma R&D.

2014 R&D Intensity

(Expenditure as a % of Net Sales by Industry (Top 7))

2014 Top Company R&D Spend (in € millions)



Source: European Commission, 2014 EU Industrial R&D Investment Scoreboard.



IP Enables Long-Term Access: How else can we measure success? (Patient Benefit!)



Our efforts yield medicines that save and improve billions of lives.



Multiple Sclerosis Heart Failure

Macular Degeneration/Edema

Hypertension Alzheimer's

COPD

Malaria

Diabetes

Blosimilars Glaucoma

Systemic Juvenile Idiopathic Arthritis (SJIA)



Fact: Between 1961 and 1990, more than 90 per cent of all new drugs were discovered and developed by pharmaceutical companies operating in countries with robust patent systems.

- Source: WHO, WIPO, WTO, Promoting Access to Medical Technologies & Innovation: Intersections bet, public health, intellectual property and trade, p. 103, 2012

Antibiotics (Sulfonamide) (1932)

Chemotherapy (antifolates) (1940s)

Vaccines for measles, mumps, chickenpox, rubella, Hep A, Hep B, meningitis, + 33 more (1957-1984)

Statins (1971)

Synthetic Human Insulin; interferon; somatostatin (1977)

Antiretrovirals (AZT) (1984+)

Imatinib

Gerhard Domagk

Yellapragada Subbarao and Sydney Farber

Maurice Hilleman

Akira Endo

Herbert Boyer

Collaboration

Nicholas Lydon, Jürg Zimmermann & **Brian Druker (OHSU)**













Burroughs Wellcome



1939 Nobel Prize for Medicine

Still used for cancer and other diseases

1988 National Medal of Science (US) "Saved more lives than any other scientist of the 20th century." (Source: LA Times, April 13, 2005)

2006 Japan Prize; 2008 Lasker-DeBakey Clinical **Medical Research Award**

> 1980 Lasker Award: 1990 National Medal of Science

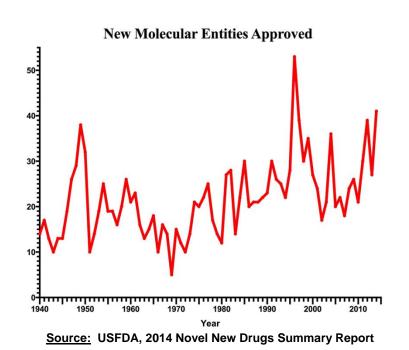
First breakthrough in treatment of HIV

2009 Lasker Award; 2012 Japan Prize; **European Inventor of Year 2009**

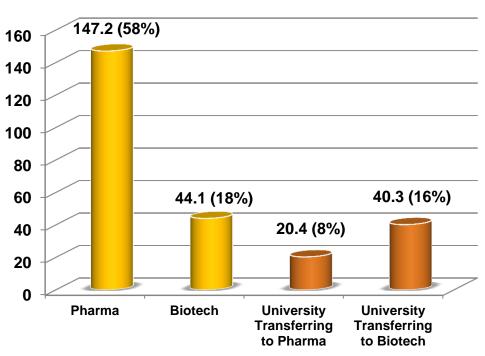


How IP Enables Long-Term Access: A Patient Benefit Perspective (II)

- 2014 saw 41 NMEs approved in the US—the second highest number in history!
- From 1998-2007, 76% of new medicines were discovered by industry (Pharma + Biotech).
 - For the remaining 24%, patents are what enabled their development and commercialization.



Number of New Drugs Approved by FDA 1998-2007 by Discovering Organization (252 total)



Source: Nature Reviews Drug Discovery 9, 867-882 (November 2010)



How IP Enables Short-Term Access

 IP incentivizes innovators to launch medicines in developing markets which increases patient access vs. Gx launch.

Seven times the amount of a new medicine reaches patients in a developing country when an innovator launches first vs. a generic.

- Innovators spend ≈ 31% of sales to develop market vs.18% Gx spend.
- Greater investment in infrastructure and product distribution chains

<u>Source</u>: Charles River Associates, "The role of the innovative industry in 'developing' the market for new medicines in Emerging Markets"

IP and Generic Medicines

- Gx medicines play an important role in lowering healthcare costs and increasing access to medicine.
- But Gx can only produce cheaper medicines by foregoing R&D and its costs and risks and copying successful innovative R&D.
- The Gx of today are the product of the innovative patented medicines of yesterday.

Average cost of bringing a generic medicine to market is 0.2% of brand's costs.

Source: Canadian Generic Pharmaceutical Assn.



Source: US Federal Trade Commission





Access Initiatives: Where are we now?

Our access programs reached more than 72 million patients in 2014 and in 2013 were valued at USD 2 billion

#4 in the
Access to
Medicine
Index (2014)

 Access initiatives are an important part of our strategy and commitment to addressing access to medicine—but a holistic approach is needed!







WIPO Re:Search

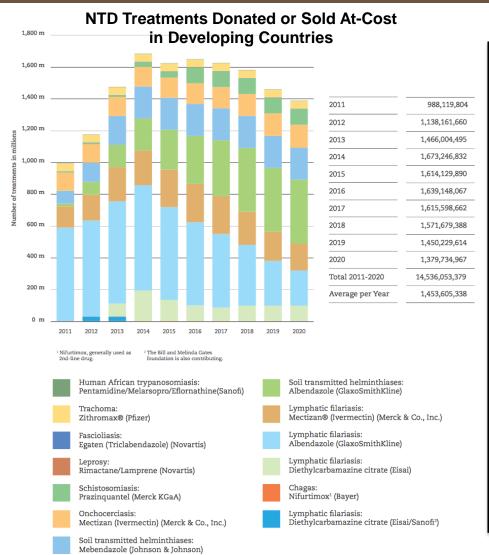
IP and expertise

royalty-free;

resulting products royalty-free in LDCs

Access Initiatives:

An Industrywide View (Excludes malaria)



Health Partnerships undertaken by R&D companies



LATIN AMERICA AND THE CARIBBEAN		SUB-SAHARAN AFRICA		MIDDLE EAST AND NORTH AFRICA		CENTRAL ASIA		SOUTH ASIA		EAST ASIA AND THE PACIFIC	
Brazil	55	Tanzania	105	Egypt	40	Uzbekistan	30	India	85	Indonesia	60
Haiti	55	Kenya	95	Morocco	35	Russia	25	Bhutan	55	Vietnam	60
Bolivia	45	Uganda	85	Yemen	30	Tajikistan	25	Bangladesh	55	China	55
		Cameroon	80								

185 FI PARTNERSHIPS

to address health system infrastructure (a trained workforce, operating information systems, adequate physical infrastructure).

165 💆 🗸

to increase availability of treatments (differential pricing, product donations, technology transfers).

150 💁

to prevent the spread of communicable diseases and non-communicable diseases (NCDs) (vaccines, awareness raising and behavioural change).

95 5 PARTNERSHIPS

to develop new treatments for diseases of the developing world (including improved research capacities, paediatric R&D).

IFPMA (2014) Developing world health partnerships directory. Geneva: International Federation of Pharmaceutical Manufacturers and Associations. http://www.ifpma.org/fileadmin/content/Publication/2014/2014_Partnership_Directory_Publication-FINAL-web.pdf



The Novartis Malaria Initiative in Focus:

Patented medicines without profit . . . and beyond

700 million

antimalarial treatments
without profit delivered to patients
in 60 countries since 2001

- Innovative and <u>Patented</u> Treatments:
 - First fixed-dose artemisinin-based combo therapy (ACT)
 - First dispersible sweet-tasting ACT (infants /children)
 - Innovative packaging to improve compliance
- Access: Provided without profit to governments and NGOs; SMS for Life program uses mobile technology to help avoid stock-outs
- Capacity building: Practice sharing workshops for public health officials, training material, and packaging in local languages
- Research: Two compounds with potential to be next generation malaria treatments









2013 Honorable Mention Winner, United States Patent No. 5,677,331



New Novartis Access Initiatives: LDC Licensing and *Novartis Access*

Novartis Least Developed Country (LDC) Patent Policy

We do not enforce patents in LDCs



We will grant non-exclusive licenses to qualified third parties to supply our patented products exclusively to LDCs







First-of-its-kind social business program centered around affordable access for low and low-middle-income countries to a portfolio of Novartis non-communicable disease (NCD) medicines

- Portfolio of 15 on-and-off-patent medicines offered as a basket at USD 1 per treatment per month
- Medicines treat 4 main non-communicable disease (NCD) types—cardiovascular diseases, diabetes, respiratory illnesses and breast cancer—selected based on WHO Essential Medicines List.
- Program also includes measures to address multiple barriers to access, e.g. collaborations with government and NGOs to distribute medicines, raise disease awareness and strengthen healthcare system capabilities in key NCD areas.
- Launched in Kenya October 15, 2015 (Ethiopa and Vietnam to follow in phased approach)



IP and Access to Medicine: The Way Forward

- Access to medicine solutions are complex, and must include
 - Better prevention, diagnosis and treatment
 - Appropriate facilities and personnel
 - Adequate health policies and systems (including insurance/financing)
 - Work to alleviate poverty
- Access programs can only be part of the solution
- Compulsory licenses are not a solution
 - CLs impede innovation and do little to address the main barriers to short-term access
 - CLs may even impede short-term access if they deter innovators from launching in a country
- Innovation and IP are part of a long-term sustainable solution
 - IP <u>enables</u> short and long-term access, both of critical importance to patients
 - IP can also help spur local innovation yielding new local products and economic development







Thank you.

Corey Salsberg
Head International IP Policy
Novartis International AG

corey.salsberg@novartis.com

