

To the Secretary

Expert Committee on the Selection and Use of Essential Medicines    Medicines  
Selection, IP and Affordability (MIA)

Department of Health Products Policy and Standards (HPS)

20 Avenue Appia

CH-1211 Geneva 27

**RE: Application to add blinatumomab to the WHO Model List of Essential  
Medicines for children**

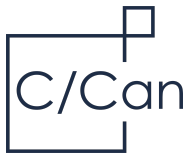
On April 18, 2025

Dear Secretary and Expert Committee Members,

The City Cancer Challenge Foundation (C/Can) respectfully submits this letter in strong support of the application for the inclusion of blinatumomab in the 10th edition of the WHO Model List of Essential Medicines for Children (EMLc), for the treatment of CD19-positive frontline, relapsed, or refractory B-lineage acute lymphoblastic leukemia (B-ALL).

C/Can is a global, impact-driven non-governmental organization committed to transforming cancer care in resource-limited settings by empowering cities to lead systemic change. Through strategic partnerships and a data-driven methodology, we strengthen local health systems, address context-specific gaps in cancer care, and promote equitable access to high-quality treatment and services.

Among our initiatives is the Readiness to Medicines programme, which focuses on identifying and overcoming barriers within health systems that hinder the effective delivery and sustained impact of essential cancer medicines.

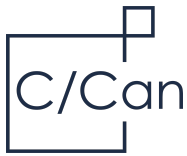


B-lineage acute lymphoblastic leukemia (B-ALL) is the most common and curable of the six index childhood cancers prioritized by the WHO Global Initiative for Childhood Cancer. While survival rates in high-income countries (HICs) exceed 80% with standard therapy and can reach up to 90% with the addition of blinatumomab, outcomes in low- and middle-income countries (LMICs) remain significantly lower. This disparity is driven by limited access to essential medications, diagnostic limitations, inadequate supportive care, and systemic logistical challenges, resulting in higher relapse rates, treatment-related mortality, and therapy abandonment.

Each year, approximately 100,000 children worldwide are diagnosed with B-ALL—yet only 15% live in HICs. Improving access to blinatumomab in LMICs could increase cure rates by an estimated 20%. The current submission to the WHO EMLc highlights robust evidence of blinatumomab's safety and efficacy in first-, second-, and third-line settings, underlining its critical importance in improving survival outcomes globally.

Blinatumomab is endorsed in the latest ESMO and NCCN clinical guidelines for both frontline and relapsed B-ALL. It is approved for use in paediatric and adult populations in 69 countries and has demonstrated significant clinical benefits, including high rates of complete remission, minimal residual disease (MRD) negativity, and a reduced need for more intensive and costly treatments such as high-dose chemotherapy, hematopoietic stem cell transplantation (HSCT), and CAR-T therapy.

Given its established efficacy and favorable safety profile, the inclusion of blinatumomab in the WHO EMLc represents a vital step towards expanding global access to life-saving therapies for children with B-ALL—particularly in LMICs, where the disease burden is greatest. Its addition could meaningfully contribute to reducing disparities in pediatric cancer outcomes.



As the WHO Model List of Essential Medicines serves as a critical reference for national medicines procurement and policy development, the inclusion of blinatumomab will facilitate its adoption into National Essential Medicines Lists and procurement frameworks. This, in turn, will support progress toward Sustainable Development Goal (SDG) 3.4, which targets a reduction in premature mortality from noncommunicable diseases through prevention and treatment.

Blinatumomab is widely accessible in high-income settings. We firmly believe it must also be available in resource-constrained environments, where it has the potential to substantially impact child survival rates.

In conclusion, the addition of blinatumomab to the WHO EMLc aligns with the list's core objective: identifying priority medicines that address the most pressing global health needs. We urge the Committee to consider this application favorably, recognizing its potential to improve outcomes for children worldwide.

Yours sincerely,

A handwritten signature in blue ink that reads "Isabel". The signature is stylized with a long, sweeping underline that extends to the right.

**Isabel Mestres**

CEO