Open Session of the Expert Committee on the Selection and Use of Essential - Medicines Patent Pool (MPP) intervention

The Medicines Patent Pool (MPP) is honored to address this committee and expresses its gratitude for the collaboration built over the years. Since its inception in 2010, MPP has worked closely with the EML Secretariat, providing patent information on the medicines submitted for inclusion, prioritizing medicines listed by the Expert Committee (EC) and seeking to negotiate licensing agreements to support access, such as for the submitted candidate abacavir/lamivudine/dolutegravir pediatric for which MPP has already signed a licence agreement to enable the distribution of quality-assured generic in 123 countries.
The EC's recommendations to explore access to medicines for non-communicable diseases and biotherapeutics, have prompted MPP to conduct comprehensive assessments, culminating in mandate expansions. MPP remains fully committed to supporting future recommendations, wherever possible.
In addition to the patent mapping requested to support the Expert Committee, we would like to share three key points for consideration as we continue our shared mission of improving health equity enabling more equitable access to medicines:

1. **Affordability of medicines, especially of newer and more effective medicines, can be improved but it requires coordinated efforts from multiple stakeholders.**
   The Expert Committee and the EML play a critical role in triggering work from a wide range of stakeholders to support access to medicines, including voluntary licensing. **Early identification of essential medicines**—or those with the potential to become essential in the future—is key. MPP emphasizes the importance of the EC continuing to promptly identify and flag promising new treatments to relevant partners as early as possible. Previous examples include cancer medicines flagged in 2021 and 2023.
2. **MPP welcomes WHO's efforts to provide comprehensive and coherent guidance on newer drug candidates, such as GLP1-RA,** through alignment between the Guidelines and EML inclusion processes. We hope this alignment will also lead to the timely identification of quality assurance pathways, including the WHO Prequalification Programme. This ensures that, if licenses are obtained or relevant patents expire, quality-assured generics or biosimilars can be rapidly developed and made accessible in LMICs.
3. Third, from consultations with patient communities and observations of treatment delivery in LMICs, **we would like to highlight the importance of supporting innovative formulations,** such as heat-stable or oral options. These formulations offer significant advantages for treatment and supply chain management in many countries and should be prioritized where appropriate.

In conclusion, if we aim to accelerate the availability of affordable generics or biosimilars of newer medicines for LMICs, we must act together. We, MPP, stand ready to play our part creating new partnerships with a broad range of actors, from pharma industry to governments and civil society to overcome the many challenges that limit access to medicines.
Thank you.