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F.6 - Dolutegravir 10 mg scored dispersible tablet

MSF strongly supports the proposal of the WHO Department of Global HIV, Viral Hepatitis and Sexually Transmitted Infections Programmes (HHS) for the inclusion of dolutegravir 10 mg scored dispersible tablet in the WHO Model List of Essential Medicines for Children for the treatment of HIV infection among children living with HIV/AIDS.

Dolutegravir (DTG) 10 mg dispersible tablet is indicated for treatment of HIV-1 infection in infants and children at least 4 weeks old and weighing at least 3kg, allowing an early antiretroviral treatment in infants and children living with HIV/AIDS and therefore contributing to reduce morbidity and mortality.

Currently, dolutegravir 50 mg film-coated tablet is included in the WHO Model List of Essential Medicines (EML), since 2017, and in the WHO Model List of Essential Medicines for Children (EMLc), since 2019, with the additional note "≥ 25 kg". Until the extended approval by the US Food and Drug Administration (FDA) in June 2020 for use in children weighing 20 kg and more, this dosage form was only approved for children 6 years and older with a weight of more than 30 kg.

In 2017, MSF has strongly supported the application of the WHO HIV/AIDS department for the inclusion of dolutegravir 50 mg tablet in the EML. In 2019, MSF has strongly supported the application from the WHO HIV/AIDS department for the inclusion of dolutegravir 50 mg tablet in the EMLc.

In 2019, an estimated 95,000 children under 15 years old died of AIDS-related causes. Without antiretroviral treatment, 50% of children living with HIV will die within the two first years of life. Early initiation of antiretroviral therapy is essential in order to reduce the risk of death in early childhood.

According to the 2018 WHO "Updated recommendations on first-line and second-line antiretroviral regimens and post-exposure prophylaxis and recommendations on early infant diagnosis of HIV (interim guidance)" and the 2020 WHO "Considerations for introducing new antiretroviral drug formulations for children (policy brief)": a DTG-based regimen is recommended as the preferred first-line regimen for children for whom approved DTG dosing is available. DTG should be associated with 2 nucleoside reverse transcriptase inhibitors (NRTIs) appropriate for pediatric patients (abacavir plus lamivudine or zidovudine plus lamivudine). DTG in combination with an optimized NRTI backbone is also the preferred

second-line regimen for children with approved DTG dosing for whom non-DTG-based regimens are failing.

Dolutegravir 10 mg scored dispersible tablet is added in the 2021 WHO "Optimal formulary and limited-use list for antiretroviral drugs for children". This formulary states that "the availability of the DTG 10 mg scored dispersible tablet now supports implementation of the preferred regimen for children at least 4 weeks of age and weighing at least 3 kg".

In March 2021, the WHO Paediatric ARV Working Group (PAWG) has encouraged "a rapid programmatic transition to DTG-based regimens for all children established on first- and second-line antiretroviral therapy irrespective of their current regimen".

MSF would like to draw the attention of the Expert Committee to the following points:

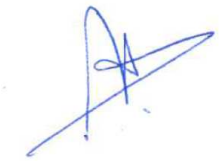
- DTG 10 mg scored dispersible tablet has been identified as an optimal formulation to provide appropriate dosing for all age and weight bands by the WHO-sponsored Paediatric Antiretroviral Drug Optimization (PADO).
- DTG 10 mg scored dispersible tablet has been tentatively approved by the US FDA in November 2020, for use in infants at least 4 weeks old and weighing at least 3 kg, in combination with other antiretroviral treatments.
- As the DTG 50 mg film-coated tablet is not easy to use for administration to children, this new DTG 10 mg scored dispersible tablet, also called tablet for oral suspension is a child-friendly formulation: it can either be dispersed in a small amount of water or taken directly by mouth (mixing with other liquids or foods can be also considered but the child have to consume the entire amount of liquid or food).
- This new pediatric formulation will reduce the pill burden, simplify supply chain processes and will reduce the costs in comparison with the current LPV/r-containing regimens.
- The inclusion of DTG 10 mg scored dispersible tablet in the EMLc will serve as a basis for National Essential Medicines lists and therefore will attract additional manufacturers, facilitate importations, alert manufacturers about the need for local registrations, allow for better competition between manufacturers in order to reduce price and improve accessibility, particularly in low- and middle-income countries, and will increase interest for pediatrics formulations.
- The inclusion of DTG 10 mg scored dispersible tablet in the EMLc will help to implement more widely the DTG-based regimens for all children on first- and second-line antiretroviral regimen, in order to improve outcomes and reduce mortality for the infants and children living with HIV/AIDS.
- Previously, all products in the EMLc were also in the EML: if this logic is maintained, dolutegravir 10 mg scored dispersible tablet should also be included in the EML.

MSF has been using dolutegravir in its programs since 2016.

At the end of 2020, in collaboration with Health Authorities in 20 countries, MSF provided antiretroviral treatment for more than 192 000 people living with HIV/AIDS, including 16 800 patients on second line antiretrovirals.

In light of these elements, MSF urges the 23rd Expert Committee on the Selection and Use of Essential Medicines to include dolutegravir 10 mg scored dispersible tablet in the WHO Model List of Essential Medicines for Children and therefore in the WHO Model List of Essential Medicines.

For Médecins Sans Frontières



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