

WS202

**MAKING INTERNATIONAL INTELLECTUAL PROPERTY AND TRADE REGIMES
WORK TO ADDRESS THE HEALTH RESPONSE TO COVID-19**

| BACKGROUND

The world was unprepared for COVID-19 despite other coronavirus outbreaks and despite multiple warnings from WHO and others. Although there was initial sharing of research among scientists and an unleashing of significant public, charitable, and private resources to expand medical supplies and to develop new medicines, vaccines, and diagnostics, the status quo of commercial control by the biopharmaceutical industry continues. Existing rules allowing private entities to monopolize the development, pricing, supply, and distribution of essential medical products have not been altered. And, the determination of rich countries to monopolize initial supplies remains unchanged. Inadequate global coordination mechanisms have left the equitable distribution of COVID-19 health products disarrayed. In place of open science and coordinated clinical trials, rational expansion of manufacturing capacity, and equitable global access, we have needlessly high prices, inadequate supplies, and nationalistic hoarding by the Global North. Despite these structural impediments to an effective, solidarity-based response to this unprecedented global pandemic, many countries are making best efforts to implement their own supply and access action plans. In addition, we have witnessed a number of global actions responding to the commercialization of the COVID-19 response, for instance:

- The Solidarity Call to Action, initiated by Costa Rica and now the COVID-19 Technology Access Pool (C-TAP)[1], which is the platform for sharing intellectual property on COVID-19 treatments, vaccines and health technologies.
- Resolution of the 73rd World Health Assembly on COVID-19 response[2], which calls for the efforts to control the COVID-19 pandemic, and for equitable access to and fair distribution of all essential health technologies and products to combat the virus.
- Medicine Patent Pool (MPP) has temporarily expanded its mandate to COVID-19 health technologies where licensing could facilitate innovation and access[3].
- Multiple partners created the Access to COVID-19 Tools Accelerator, which has committed to the repurposing or development of novel vaccines, therapeutics, and diagnostics and equitable global access to those tools, including in low- and middle-income countries.[4]
- Gavi launched a COVAX Facility and a Gavi Advance Market Commitment for COVID-19 Vaccines (GAVI Covax AMC), a new financing instrument aimed at incentivising vaccine manufacturers to produce sufficient quantities of eventual COVID-19 vaccines, and to ensure access for developing countries[5].

In addition, regional mechanisms are in place, such as in ASEAN where Ministers endorsed a setting up of a regional fund to respond to the COVID-19 pandemic[6]. At the country level, some countries issued compulsory licensing as part of COVID-19 response. For examples, Israel issued a compulsory license to import generic versions of lopinavir/ ritonavir (or Kaletra) while legislatures in Germany, Canada, Chile, and Ecuador laid the legal groundwork for the issuance of compulsory licenses to address COVID-19[7].

The commissioned paper will act as input to the webinar discussion in which the commissioned expert(s) is expected to provide recommendation based on the review government and international mechanisms to mitigate the false start in the medical response to the pandemic.

[1]
<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/global-research-on-novel-coronavirus-2019-ncov/covid-19-technology-access-pool>

[2] https://apps.who.int/gb/ebwha/pdf_files/WHA73/A73_R1-en.pdf

[3]
<https://medicinespatentpool.org/news-publications-post/the-medicines-patent-pool-and-unitaid-respond-to-access-efforts-for-covid-19-treatments-and-technologies/>

[4] <https://www.who.int/initiatives/act-accelerator>

[5] <https://www.gavi.org/news/media-room/gavi-launches-innovative-financing-mechanism-access-covid-19-vaccines>

[6] <https://thediplomat.com/2020/04/asean-ministers-endorse-new-covid-19-response-fund/>

[7] <http://www.jogh.org/documents/issue202001/jogh-10-010358.htm>

| OBJECTIVES

To discuss effective measures to better address health preparedness and the development, supply and equitable distribution of health products needed to address COVID-19 and future public health emergencies.



Panelist

Marie-Paule Kieny

Chair of the Board

Medicine Patent Pool
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Dr Marie-Paule Kieny is Director of Research at Inserm in Paris, in charge of the Priority Research Program on Antibiotic Resistance initiated by France in 2019 as part of the Investment Program for the Future (Programme d'Investissements d'Avenir). She also represents France on the Board of Directors of the Joint Programming Initiative on Antimicrobial Resistance, JPIAMR.

Between March 24 and July 10, 2020, she was a member of the Research and Expertise Analysis Committee (CARE), set up by President Macron, which brought together 12 researchers and physicians to advise the government on treatments, vaccines and tests against COVID-19. Since June 2020, she chairs the French Scientific Committee on COVID-19 vaccine, which mandate is to:

- Map candidate vaccines in clinical trials or likely to reach this stage in over the next 12 months;
- Provide up-to-date scientific and technical advice on candidate vaccines that have reached the stage of clinical evaluation, to be retained within the framework of the French strategy;
- Provide specific advice on the vaccine candidates to be given priority access to the platform national vaccine clinical trials;
- Advise on documents provided by the government regarding the establishment of a French vaccination policy;
- Exchange with similar committees of the European Commission, other Member States of the European Union or international.

Besides her responsibilities in France, Marie-Paule Kieny is Chair of the Board of Directors of the Drugs for Neglected Diseases Initiative (DNDi, Geneva, Switzerland) and of the Medicines Patent Pool Foundation (MPPF, Geneva, Switzerland). She is also Vice-Chair of the Board of the Global Antibiotic Research and Development Partnership (GARDP, Geneva, Switzerland), member of the Board of Directors of the Human Vaccine Project (HVP, New York, USA), of Fondation Mérieux (Lyon, France) and of the association Solidarité Thérapeutique et Initiatives pour la Santé (Solthis, Paris, France). She is an independent non-executive Director of bioMérieux (Lyon, France). She participates in the scientific councils of several organizations active in the field of health.

Until June 2017, Dr Kieny served as Assistant Director-General for Health Systems and Innovation at the World Health Organization. Her leadership at WHO included coordinating WHO's R&D efforts during the Ebola epidemic in West Africa from 2014 to 2016 and she conceptualized the WHO R&D Blueprint, a global preparedness plan for emerging disease outbreaks.

Prior to joining WHO, Marie-Paule Kieny held leading research positions in the public and private sectors in France.

Dr Kieny obtained her PhD in microbiology (1980) at the University of Montpellier, France. She has published more than 350 articles and reviews, mainly in the fields of infectious diseases, immunology, vaccinology and health systems.

Dr. Kieny was awarded the title of Chevalier de l'Ordre National de la Légion d'honneur in France in 2016, and of Chevalier de l'Ordre National du Mérite in France in 2000. She received an honorary doctorate from the Autonomous University of Barcelona (Spain) in 2019 and was awarded the Inserm International Prize in 2017, the Generation 2000-Impact Médecin Prize in 1994 and the Rhône-Poulenc Innovation Prize in 1991.