

Speeding access to innovative hepatitis C products: Unitaid's key role

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Where are we today?

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Contents



Unitaid's HCV Portfolio – an overview

The market for DAAs – a snapshot

Major challenges in HCV

Unitaid started to explore the HCV market in 2013.

The supply and demand cycle was blocked at virtually all points.

Supply

Lack of suitable tests

Lack of affordable treatment

Demand

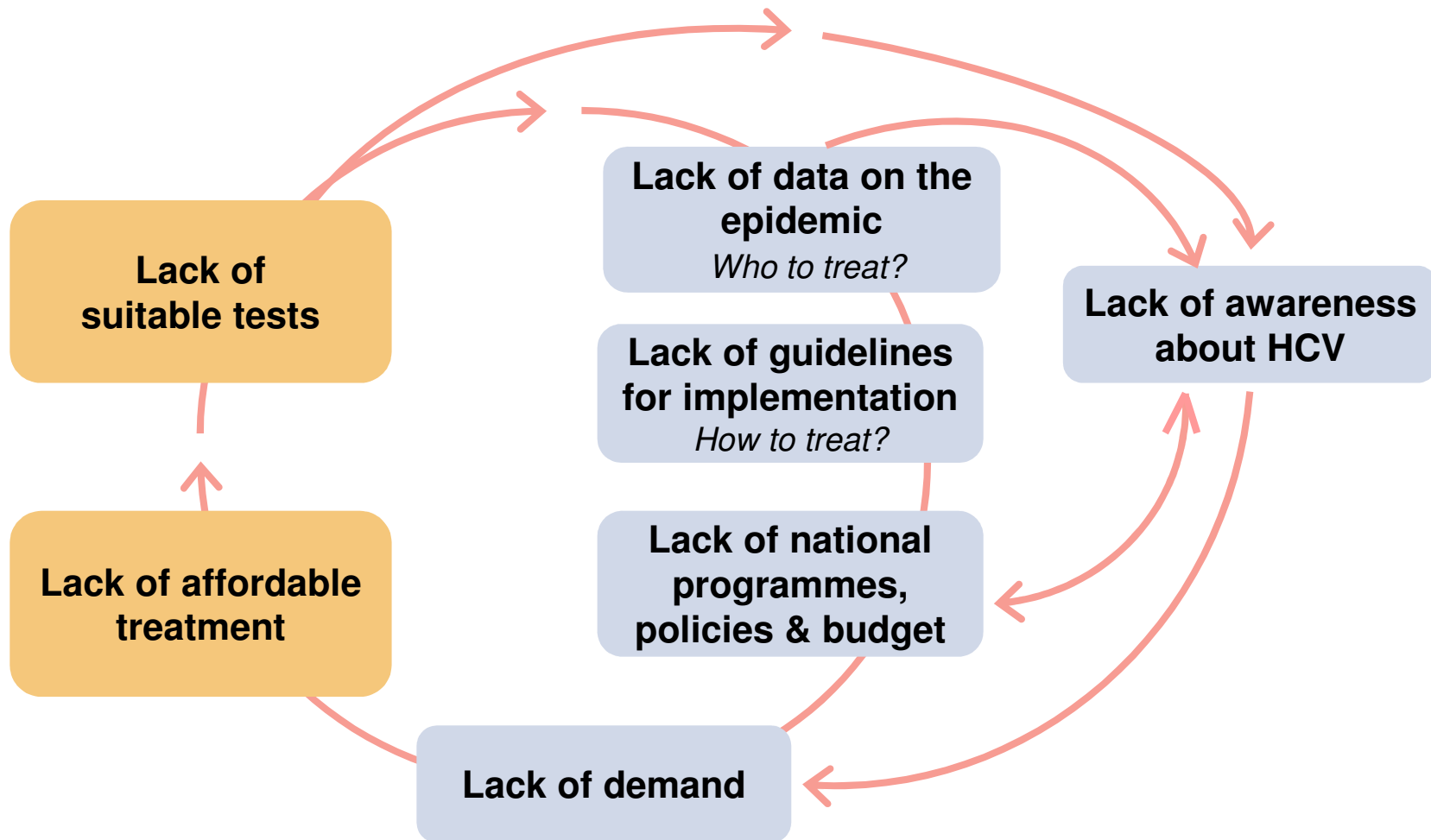
Lack of data on the epidemic
Who to treat?

Lack of guidelines for implementation
How to treat?

Lack of national programmes, policies & budget

Major challenges in HCV

This was further aggravated by a lack of awareness.



Unitaid's HCV portfolio

Through its projects, Unitaid is addressing several challenges simultaneously. This has contributed to a supply and demand cycle that is starting to function – and, importantly, it has contributed to increasing access.

Subsequent presentations provide examples of some of the projects' achievements. (NB: due to time constraints, these are **not** comprehensive overviews of the projects' achievements – it is only giving a flavour).

Issue	Project
Lack of suitable tests	FIND
High medicines prices	MPP, MSF
Complex algorithms/care model	MSF
Lack of demand/awareness	Coalition Plus
Product quality unclear	WHO prequalification
Lack of guidelines	WHO Hepatitis programme



Unitaid's HCV Portfolio – an overview

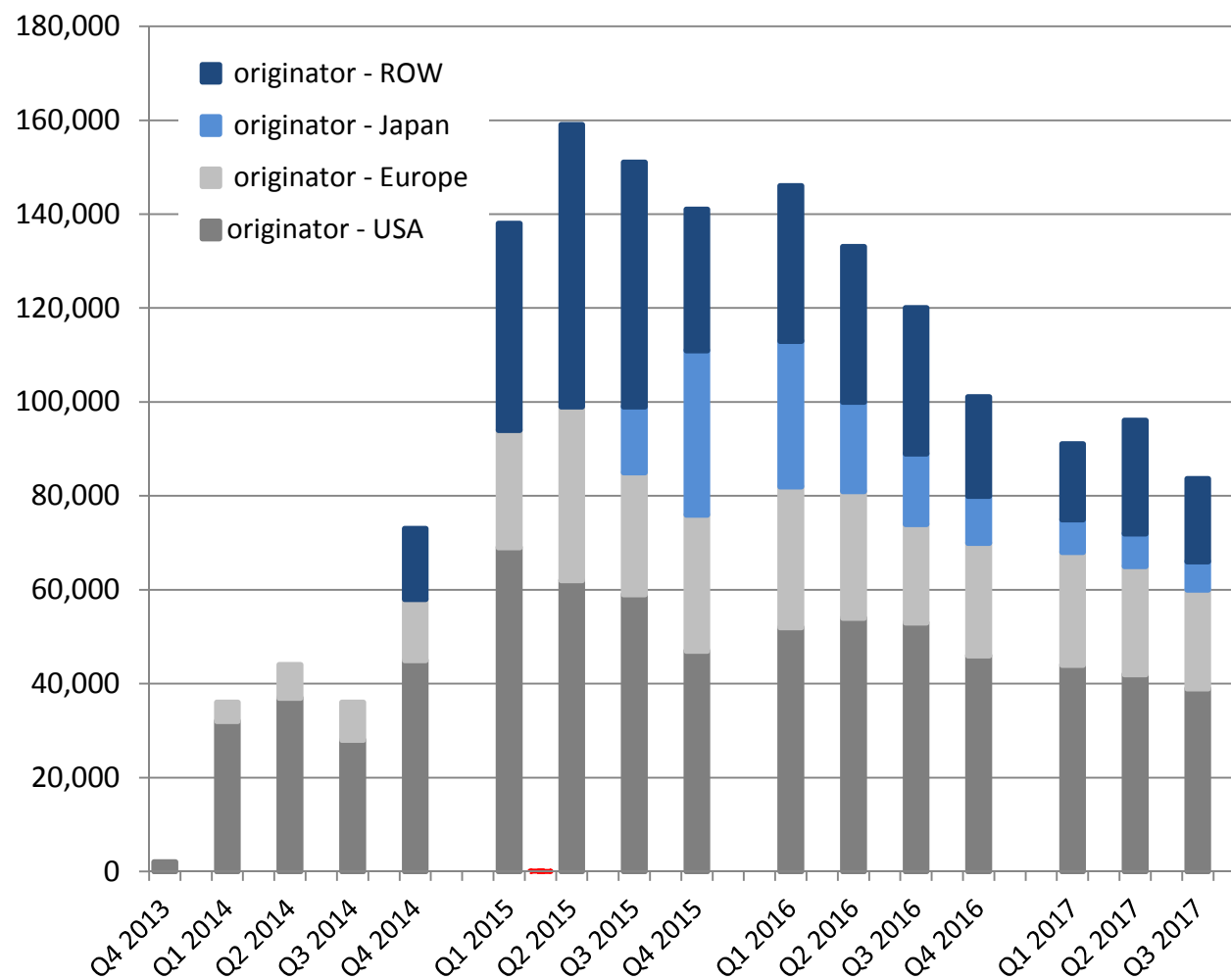
The market for DAAs – a snapshot

Estimating access

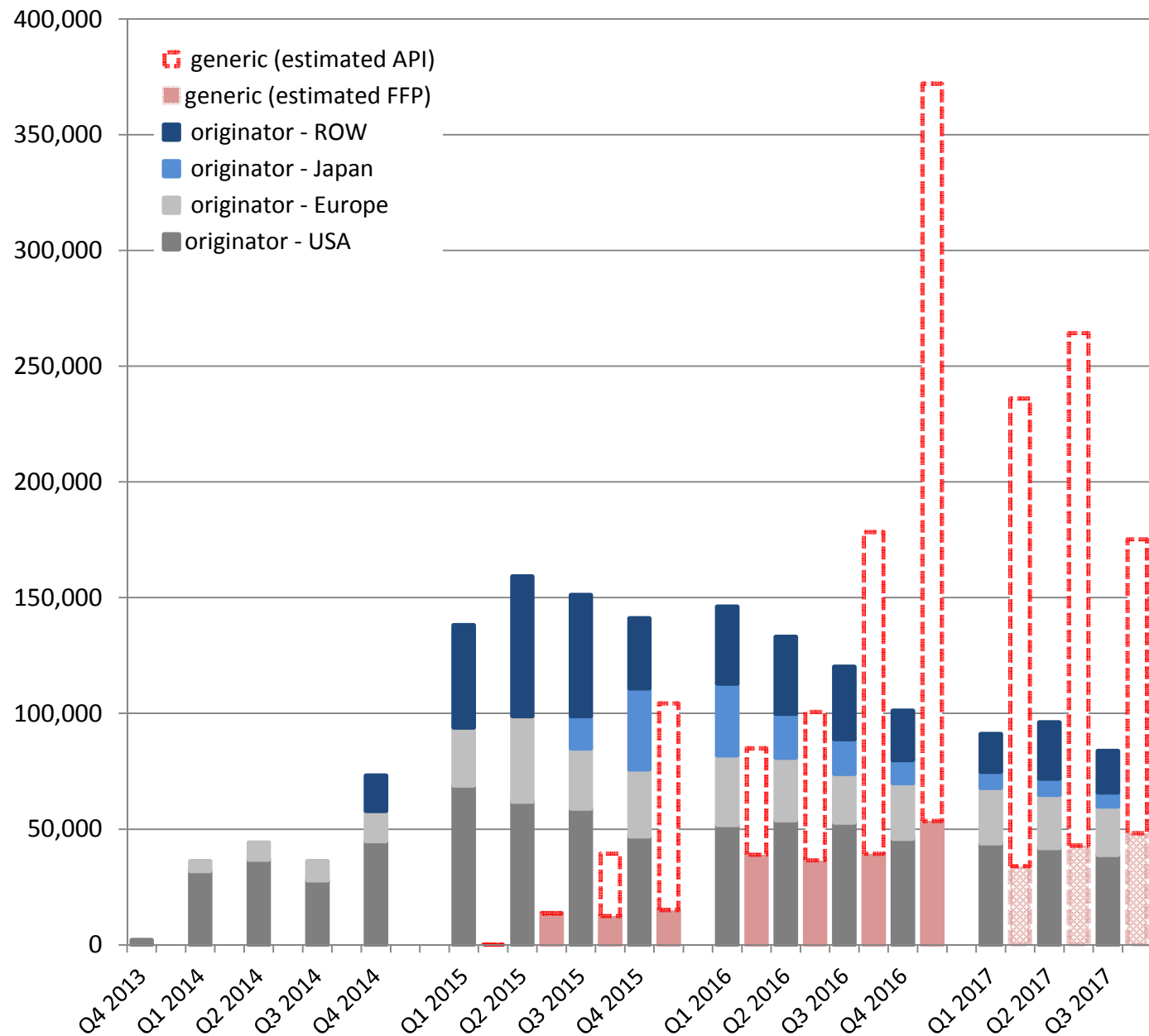
Unitaid has estimated the number of people that have access to originator and generic DAAs (see next slides), using access to sofosbuvir-based treatments as an indicator.

The estimates related to generic sofosbuvir-based treatments are conservative (low-end) estimates; they do not include treatments made from raw materials produced outside India (due to non-availability of data).

Estimated number of people treated with SOF-based regimens - originator



Conservative estimate of the number of people treated with SOF-based regimens (originator and generic)



Key trends

Access to sofosbuvir-based HCV treatments has increased consistently since 2014; however the increase appears to be slowing down*.

The number of people accessing generic treatments is larger than the number of people accessing the originator products.

* This may be compensated by increased use of medicines whose raw materials are not produced in India.

Presentations by grantees



Médecins Sans Frontières (MSF)

Coalition Plus

Medicines Patent Pool (MPP)

FIND

WHO