

COVID-19 & PATIENT ACCESS

Health care systems around the globe are responding with an unprecedented level of urgency to the worst pandemic in a century.

From the doctors and nurses in the bays of intensive care units to the laboratory researchers working around the clock developing new tests, treatments and vaccines, the global health care system has mounted a rapid, all-hands-on-deck response to COVID-19. Academic institutions, pharmaceutical companies and researchers across geopolitical borders are exploring innovative methods to treat patients facing the novel coronavirus.

The international response reflects a system working in overdrive for patients. They are, after all, the ultimate beneficiaries of public-private partnerships that are generating investment and spurring research and development. These partnerships work to deliver safe and effective new therapies to patients in record time.

To protect this system, governments must reaffirm policies that encourage innovation and provide patients across the world with timely access to safe and effective tests, treatments and vaccines.



Q: What does the COVID-19 response reveal about the capacity of the global research community?

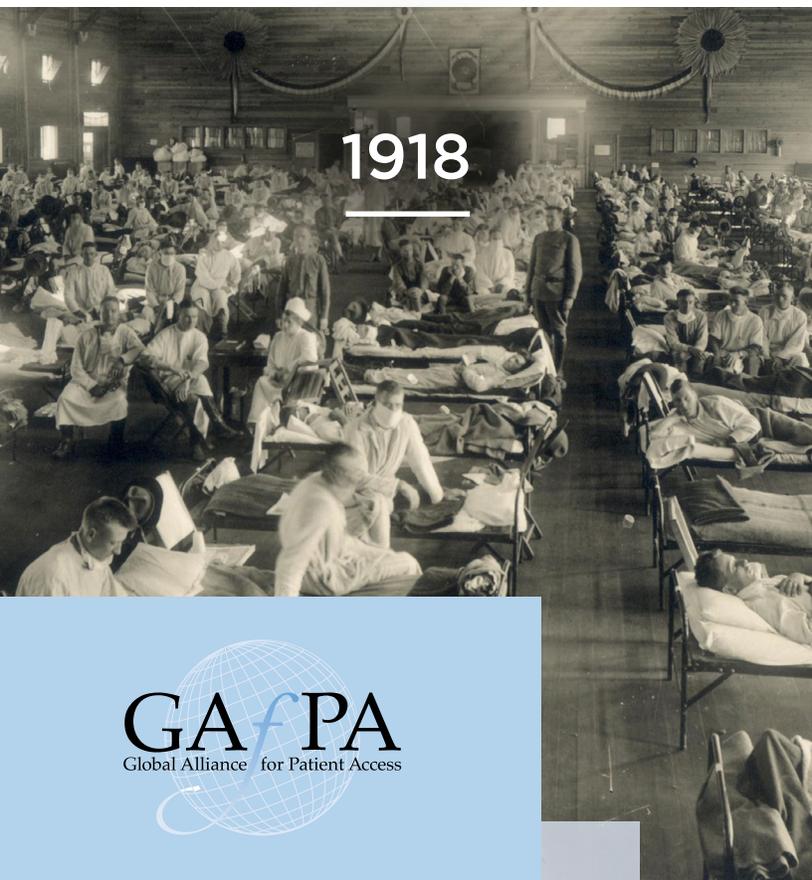
A common comparison being made today is between the coronavirus pandemic and the Spanish influenza pandemic that began in 1918. The difference in how quickly the medical community responded demonstrates how much patients and public health have benefitted from advances over the past century.

At its height, the Spanish flu infected an estimated 500 million people globally, about one-third of the world's population. It eventually killed more than 50 million people.¹ At that time, there were no vaccines for the Spanish flu and no antibiotics to treat secondary bacterial infections. Health care providers had few options beyond quarantine and disinfectants. Simple aspirin became a primary treatment for the Spanish flu, but limited medical knowledge of the drug meant that it was often prescribed at doses now known to be toxic.²

Compare that scenario with the health care system of 2020.

Building upon 100 years of unprecedented medical research, development and investment, researchers initiated more than 876 clinical trials worldwide within six months of the first known case of COVID-19.³ Breakthroughs have been announced in testing. Researchers are considering how both new and previously approved drugs might treat the novel coronavirus. Beyond treatments, dozens of companies and academic research facilities are developing possible vaccines.

This fast-paced progress is testament to the remarkable capacity built from a century of investment. Researchers' ability to harness scientific advances to develop and test new drugs has never held greater promise for patients.



Q: What policies encourage patients' access to COVID-19 treatments?

Some governments are taking steps to support the development and supply of new drugs in response to the pandemic. The United States, for example, has streamlined and accelerated regulatory approval for urgently needed COVID-19 treatments. Several governments also have strengthened supply chains by cutting tariffs and removing obstacles to the import-export process.

Ensuring ongoing public funding for research and protecting intellectual property also will incentivize ongoing private-sector investment in new medicines for COVID-19.





Q: What ensures adequate funding for COVID-19 research?

A vibrant health care research system depends upon both private and public funding. The current situation with COVID-19 is no different.

Public and private funding play different roles in medication development, though both are crucial. A few governments make limited investments in early research, setting priorities and often providing the foundational studies that generate subsequent private-sector investment. Pharmaceutical makers invest significant capital in research and development. In fact, about 80% of the overall cost of drug development is borne by the private sector.⁴

Public-private partnerships incentivize investments to rapidly develop treatments and provide them to patients at affordable costs. Without both the groundwork laid by publicly funded research and the additional capital contributed by private investors, many new drugs might never be found.

Q: How does intellectual property impact the race to find COVID-19 treatments?

Intellectual property protections have spurred many of the medications, vaccines and devices that keep patients healthy and protect their quality of life. Those protections continue to work for patients today. In fact, the practice of protecting researchers' intellectual property fuels the rapid investment, research and development that is now speeding treatment to patients.

Collaboration among governments, universities and private-sector companies is the driving force behind potential COVID-19 treatments. Safeguarding the intellectual property underpinning these advances encourages ongoing collaboration. It will also enable the manufacturing and distribution of those medicines as they are approved.



Protecting researchers' intellectual property fuels the investment & research that's **speeding treatments to patients.**



Q: Will government policies such as export bans and compulsory licensing improve access to COVID-19 treatments?

Research on potential COVID-19 medications is still underway, yet some governments are already considering policies such as export bans or compulsory licensing agreements. **Though policymakers have good intentions, these policies could hurt patients in the end.**

With export bans, policymakers hope to safeguard a country's drug supply during uncertain times. But bans could actually create shortages of prescription medications and block patients' access to vital treatments. When one country decides to stop exporting a certain medication, another country may respond by refusing to export components needed to make that medication. Bans have a chain reaction that can undermine patient access by disrupting supply lines for both finished products and raw materials.

Compulsory licensing presents another type of challenge. With compulsory licensing, a government gives one company permission to manufacture copies of a medication that's still under patent protection by another company. In effect, this takes an inventor's intellectual property and allows others to copy it.

Policymakers may envision compulsory licensing as a way to expedite access and lower prices. But the reality is more complicated.

Manufacturing modern medications is a complex process. Just because a company gets permission to manufacture a drug doesn't mean that company has the know-how or capabilities to quickly scale production to current demand. And while the drug's original manufacturer has established ways to track how patients respond to the drug, a company working under a compulsory license may not. Any patient safety issues that arise may go unchecked. Compulsory licensing can also negatively impact patients over the long term by discouraging funders from investing in new treatments.

Policymakers and patients need coordinated solutions. By diverting resources and discouraging investment, however, policies like export bans and compulsory licensing could actually slow recovery, hamper innovation and weaken the global response to the next pandemic.

Patients need
coordinated solutions.



CONCLUSION

The longstanding collaboration among governments, health care providers and the private sector is serving the global community well during the COVID-19 pandemic. For patients to reap the benefit, however, policymakers must commit to effective health policy solutions. Anxiety about the COVID-19 pandemic should not lead to policies that disrupt the successful approach that has allowed global health to advance to where it is today.

Public-private partnerships can best serve the global community through the help of:

- Adequate funding
- Intellectual property protections
- Commonsense policies.

This combination of sound policies can spur the treatments and vaccines that patients need, saving millions of lives.

REFERENCES

1. Biospace (2020, April 02). Compare: 1918 Spanish Influenza Pandemic Versus COVID-19. Available at <https://www.biospace.com/article/compare-1918-spanish-influenza-pandemic-versus-covid-19/>
2. Ibid.
3. America's Biopharmaceutical Companies (2020, May 01). By the Numbers: Vaccines and Treatments in Development for COVID-19. Available at <https://innovation.org/diseases/infectious/coronavirus/by-the-numbers-vaccines-and-treatments-in-development-for-covid19>
4. IP Watchdog (2020, April 18). Don't Let Life Sciences Innovation Become Another Coronavirus Casualty. Available at <https://www.ipwatchdog.com/2020/04/18/dont-let-life-sciences-innovation-become-another-coronavirus-casualty/id=120695/>



About the Global Alliance for Patient Access

The Global Alliance for Patient Access is an international platform for health care providers and patient advocates to inform policy dialogue about patient-centered care.

GAfPA.org

