

TPP is a bad deal for medicine: MSF

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The Trans-Pacific Partnership (TPP) is a trade agreement negotiated between the US and eleven other Pacific Rim nations: Australia, Brunei Darussalam, Canada, Chile, Japan, Malaysia, Mexico, New Zealand, Peru, Singapore and Vietnam.

After more than five years of negotiations conducted in secret without the opportunity for public review, the agreed text, which will now be submitted to national processes for final signature and ratification, has been officially and publicly released.

Doctors Without Borders/Médécins Sans Frontières (MSF) remains extremely concerned about the inclusion of dangerous provisions that would dismantle public health safeguards enshrined in international law and restrict access to price-lowering generic medicines for millions of people.

MSF statement by Ms Judit R Sanjuan, US manager and legal policy advisor for MSF's Access Campaign:

"MSF remains gravely concerned about the effects that the Trans-Pacific Partnership trade deal will have on access to affordable medicines for millions of people, if it is enacted.

The official release of the agreed TPP text confirms that the deal will further delay price-lowering generic competition by

extending and strengthening monopoly market protections for pharmaceutical companies.

The TPP is a bad deal for medicine: it's bad for humanitarian medical treatment providers such as MSF, and it's bad for people who need access to affordable medicines around the world, including in the United States.

At a time when the high price of life-saving medicines and vaccines is increasingly recognized as a barrier to effective medical care, it is very concerning to see that the US government and pharmaceutical companies have succeeded in locking in rules that will keep medicine prices high for longer and limit the tools that governments and civil society have to try to increase generic competition.

For example, if enacted, the TPP will not allow national regulatory authorities to use existing data that demonstrates a biological product's safety and efficacy to authorize the sale of competitor products, even in the absence of patents.

The TPP would also force governments to extend existing patent monopolies beyond current 20-year terms at the request of pharmaceutical companies, and to redefine what type of medicine deserves a patent, including mandating the granting of new patents for modifications of existing medicines.

The provisions in the TPP text will not only raise the price of medicines and cause unnecessary suffering, but they also represent a complete departure from the US government's previous commitments to global health, including safeguards included in the US's 2007 'New Trade Policy.'

It is not too late to prevent further restrictions on access to affordable medicines in the TPP.

As the text now goes to national legislatures for final approval, we urge all TPP governments to carefully consider whether the agreed TPP text reflects the direction they want to take on access to affordable medicines and promotion of biomedical innovation; if it does not, the TPP should be modified or rejected."