SPOTLIGHT ON THE #FREETRUVADA CAMPAIGN IN BRAZIL:

In Brazil, activists have taken several actions to free Truvada® from patents and from stigma.

The Working Group on Intellectual Property (GTPI), coordinated by the Brazilian Interdisciplinary Aids Association (ABIA), has taken the lead in informing and mobilizing the HIV/Aids movement on this case

MAIN ACTIONS OF THE CAMPAIGN:

- Seminars involving health professionals, physicians, researchers and regulators
- Communication campaign involving activists from different states of Brazil
- Protest and public hearing at Brazilian parliament
- Massive contribution to public consultation over incorporation for prevention
- Patent opposition against Gilead's monopoly
- Denounce of Gilead abuses through the press

MAIN OUTCOMES

1. Patent rejection in 2017 based in GTPI's opposition
2. Price reduction of 63% in Gilead's product. From U$ 752 to U$ 276
3. 7.000 patients enrolled in PrEP at the Public Health System in 2017/2018
4. 3 locally produced generics registered in 2018

Realização

ABIA ASSOCIAÇÃO BRASILEIRA INTERDISCIPLINAR DE AIDS

GTPI GRUPO DE TRABALHO SOBRE PROPRIEDADE INTELECTUAL

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GTPI GRUPO DE TRABALHO SOBRE PROPRIEDADE INTELECTUAL

SCIENCE, ACTIVISM AND SEXUAL RIGHTS: WHY IS IT IMPORTANT TO CHALLENGE THE PATENT MONOPOLY OVER THE DRUG TRUVADA®?

Truvada® is the brand name for the drug tenofovir/emtricitabine, the first ever drug approved for use on HIV/Aids prevention. As has been demonstrated by many clinical and operational studies, the use of the drug as a prevention tool (as a Pre-Exposure Prophylaxis - PrEP) is effective and feasible in a number of contexts and can help to renovate prevention strategies, specially for vulnerable populations. Nevertheless, the barriers for an expanded use are twofold: moral and budgetary. Civil society activism has an important role to play to remove them both. In order to do so, two essential political agendas of the HIV/Aids movement need to come together: the politics of recognition (individual rights, autonomy and diversity) and the politics of redistribution (collective rights, equality, universal access).

The challenge is that new prevention technologies, such as Truvada®, are subject to a new wave of appropriation of knowledge, privatization of health policies and profit driven innovation. If left unchecked, such barriers will result in unequal distribution of the right to prevention, reinforcing stigma and discrimination. In the other hand, universal and free access to PrEP can dramatically decrease new HIV/Aids infection rates and ensure people have more medical options to exercise their sexual choices without fear. In this sense, access, public health and dignity go hand in hand.

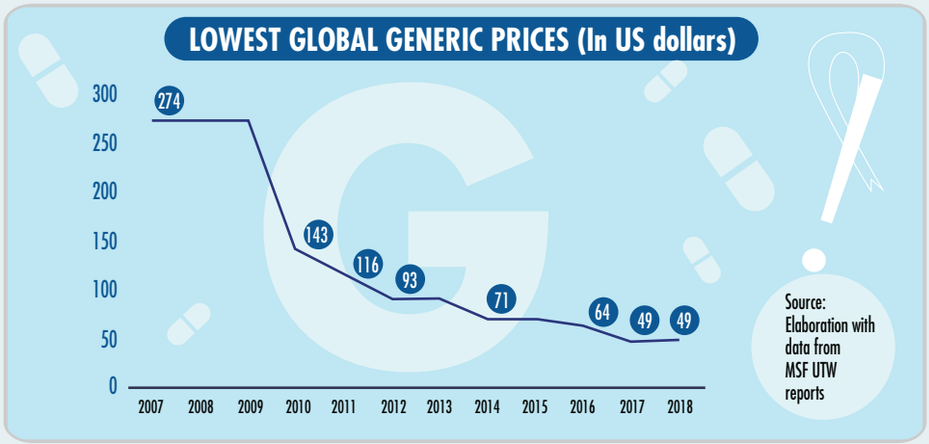
Science is a collective effort and so is the fight against stigma. But when this collective knowledge is appropriated by transnational corporations through patent monopolies, science is made hostage of the market and the distribution of its fruits is limited, creating the exclusion that nurtures stigma.

Fighting patent monopolies on Truvada® and other prevention technologies is thus an imperative for the response to HIV/Aids and for building a world where diversity is truly valued.

4 REASONS TO CHALLENGE TRUVADA®'S PATENTS

REASON 1

Patents are serving two purposes: Appropriation of public produced knowledge and imposition of high prices.
Where patent barriers were removed, generic versions are pushing the prices down and the scientific knowledge evolves faster, bringing more benefits to the public that has been the main investor in innovations behind PrEP science.



REASON 2

The patents are weak, as Truvada® is the mere combination of two already known substances. Therefore patent applications made by the company Gilead lack novelty and inventive step and many patent offices around the world refused to grant it or invalidated it[1].

REASON 3

Gilead has earned $36.2 billion on Truvada® since 2004[2]. The excessive profits result from underserved patents and are not justified under the argument that they are necessary to cover research and development expenses, given that it was the US government and taxpayers that paid for almost 100%[3] of the research that went into the development of Truvada® as PrEP.

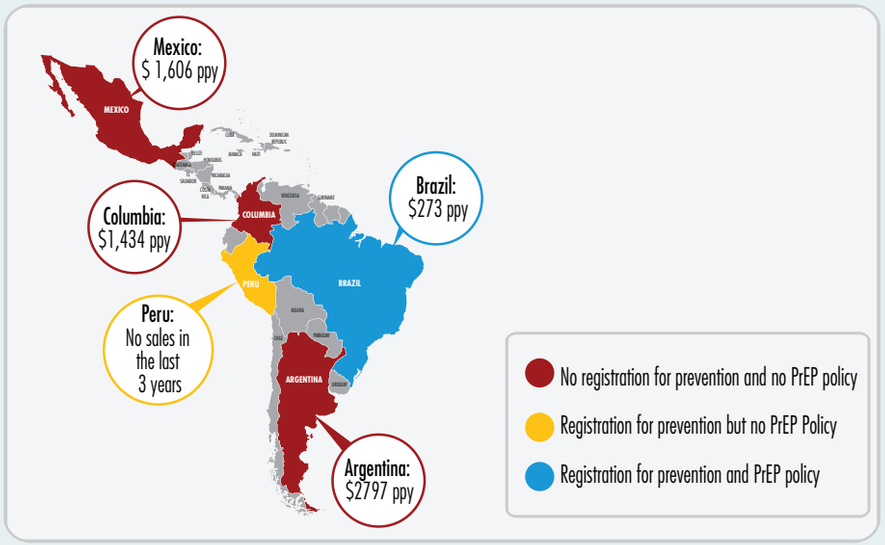
REASON 4

The right to prevention must be put in equal foot to the right to treatment. Many critics of the use of a drug as a prevention tool and the establishment of public PrEP programs declare that scarce public resources should be invested in treatment rather than in prevention. By removing monopoly barriers and enabling generic competition, the cost of PrEP programs can become more sustainable and help to change the debate, moving from a divisionist approach to a more unified approach that understands prevention and treatment as equal pieces of the right to health.

1 https://www.ipwatchdog.com/2019/03/03/examining-Truvada-breakthepatent-debate-gilead-responds/id=106906/
2 https://www.washingtonpost.com/business/economy/pharma-giant-profits-from-hiv-treatment-funded-by-taxpayers-and-patented-by-the-government/2019/03/26/cee5afb4-40fc-11e9-9361-301ffb5bd5e6_story.html?noredirect=on&utm_term=.a10427f59c7a
3 https://breakthepatent.org/

In Latin America, patent barriers on Truvada® have been defeated by civil society in Brazil and Argentina[1], do not exist in Peru and Colombia, but are in force in Mexico until 2024. However, in Peru, Colombia and Argentina the remaining barriers are around lack of registration for prevention and/or lack of public policies on PrEP.

GILEAD'S PRICES FOR TRUVADA® IN SELECTED COUNTRIES (PUBLIC PURCHASES)



Generic versions of Tenofovir/Emtricitabine do exist in all these countries: 2 in Peru, 10 in Colombia, 3 in Brazil, 3 in Argentina and 2 in Mexico. In Mexico, while one generic version is blocked by the patent, the other is available because it is made of a different formulation (tenofovir disoproxil succinate instead of fumarate). However, the government has been purchasing only Gilead's product, the generic is available only at private market.

PRICES (IN US DOLLARS) FOR A TREATMENT PER PATIENT PER YEAR (PPY)

	BRASIL	PERU	MÉXICO	COLÔMBIA	ARGENTINA
Gilead price (public market)	$273	----	$ 1,606	$1,434	$2797
Gilead price (private market)	$8,962	$1,434 to $55,115	$6,194 to $10,236	$2,920	$ 6,565
Lowest generic price (public market)	$110	$182	----	$175	$168
Lowest generic price (private market)	$833	$584	$2,920	$1,865	----

Sources of information: Preliminary results of a study being performed by the consultant Javier Llamosa.

1 It must be noted that Truvada® is also used in HIV/Aids treatment in some countries, and this was the main reason for civil society to target it's patents in Argentina, given that there is strong criticism by argentinean patient organizations against its use to "medicalize" prevention.