

Innovation of Novel Antibiotics: The Strategic Role for Public Sector Engagement Discussion with WHO and European Investment Bank: September 3, 2020

Concerns on returns on public investment—access and affordability was raised by Nafis Faizi along with UAEM representative. The statement is reproduced below.

Covid19 is a glaring reminder that sufferings are never equal even in the wake of pandemics and that health as a public good is the most beneficial to everyone when it is equitable.

*AMR action fund- while it focusses on 'a sustainable antibiotic market' has little to nothing about affordability. From newly discovered drugs for Drug Resistant TB to Hepatitis C and in general, newer antibiotics are [exponentially more expensive](#) than its predecessors. We need to find concrete ways to find a sustainable antibiotic access to people as well. **How can private sector monies from AMR Action fund optimize public health benefits and what means does WHO have to achieve this?***

As a clinician, I need to share an experience drawing from the definition of Rational use of drugs from WHO, 1987 that clearly says that 'rational use also means the availability of a drug at the right time and at a price the people can afford'. Even as the individual patient succumbs to an unaffordable antimicrobial, the resistant micro-organism survives within the confines of the same health system, finding another host.

Government owned, contracted production and pooled procurement have been very successful in assuring financial access. In this context, we need to also look beyond government reimbursement measures alone. A key example is KSDP, Kerala government's state drug manufacturing facility. KSDP has increased access and affordability of drugs not only to people of the state, but has extended it to other larger Indian states and is [set to even export to eight countries](#) and is a key example of affordable drug provision and at the same time, [recording profits](#).

The other very important concern that we have is the inadequate attention towards diagnostics. The lack of diagnostics is already a proven driver of misuse as well as overuse of antimicrobials. The unavailability and/or unaffordability of diagnostics is a problem that needs to be taken far more seriously to counter AMR.

A very important concern that we have is that even as newer antimicrobials are discovered, without timely diagnostics there cannot be a targeted use of these newer antibiotics. To fully utilize the newer antibiotics and make rational use of the ones we already have, or achieve the targets of 'Access-Watch-Reserve or Aware' list, we need a sense of urgency in access to diagnostics as well.

-Dr. Nafis Faizi