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Global Fund and Manufacturers Reduce Prices of Malaria Drugs in Eight Countries

Malaria patients in eight countries in sub-Saharan Africa and Asia will pay significantly less for ACTs (artemisinin-based combination therapies) purchased through the private health care system, as a result of agreements between the Global Fund and six manufacturers of malaria drugs.

The Global Fund says that these agreements place affordable life-saving malaria drugs within reach of millions of people in need, especially children. This public- private collaboration is part of Phase 1 of the Global Fund's Affordable Medicines Facility-malaria (AMFm), which involves pilot projects in eight countries: Cambodia, Ghana, Kenya, Madagascar, Niger, Nigeria, Senegal, Tanzania (mainland and Zanzibar) and Uganda.

The six manufacturers are: Ajanta Pharma, Cipla, Guilin, Ipca, Novartis and Sanofi-aventis. All six pharmaceutical companies meet the Global Fund's quality criteria for supplying ACTs to first-line buyers under the AMFm.

The Clinton Health Access Initiative (CHAI) negotiated the agreements. Private importers will now pay up to 80% less than they did in 2008-2009 for ACTs, bringing the factory gate prices down to the same level as for public sector buyers. The AMFm will then subsidise purchases made by first-line buyers, all of whom have signed an undertaking to pass the benefit of low prices down the supply chain.

The manufacturers have also agreed not to market any oral artemisinin monotherapy, which are undesirable because they increase the risk of widespread resistance to the artemisinin in ACTs.

The Global Fund launched Phase 1 of the AMFm at the end of 2009. After two years, providing the AMFm

is successful, the Global Fund is expected to expand it globally. (See “Global Fund Board Approves Proposals for Phase 1 of the ‘Affordable Medicines Facility – Malaria’ (AMFm) Funding Stream” in GFO 111.)

The information for this article was taken from “Agreements reduce prices of malaria medicines by up to 80%,” a Global Fund press release, available at www.theglobalfund.org/en/pressreleases/?pr=pr_100714.

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