VISION
A world in which people in need in low- and middle-income countries (LMICs) have rapid access to effective and affordable medical treatments and health technologies.

MISSION
To increase access to, and facilitate the development of, life-saving medicines for LMICs through an innovative approach to voluntary licensing and patent pooling. We work with a range of partners — civil society, international organisations, industry, patient groups and governments — to prioritise and license novel and existing medicines and health technologies for people in these countries.

ACCOMPLISHMENTS

13 HIV antiretrovirals and 1 HIV technology platform licensed.

3 hepatitis C direct-acting antivirals licensed.

1 tuberculosis treatment licensed.

130+ ongoing development projects to produce affordable medicines for LMICs.

US$ 1.23 billion* in savings to the international community through the purchase of lower cost generic medicines.

9.59 billion* doses of treatment delivered through MPP generic manufacturing partners.

*As of June 2019

HOW WE WORK

The MPP negotiates public-health driven licences with patent holders.

The MPP sublicenses drugs to generic companies. Licensing terms encourage the sale of affordable generic versions in developing countries.

The MPP negotiates with patent holders.

GENERIC MANUFACTURERS

PEOPLE LIVING IN LOW-AND MIDDLE-INCOME COUNTRIES

PATENT HOLDERS

ROYALTIES
THE NEED

An estimated two billion people lack access to health products and essential medicines. The vast majority of these people live in low- and middle-income countries (LMICs). Effective and affordable new treatments easily administered in resource-limited settings, fixed-dose combinations (FDCs) with better adherence and tolerability profiles to fight growing resistance and formulations specifically adapted for children will prolong and save lives.

The MPP has concluded 4-6 licence agreements for patented medicines that are on the WHO EML or are likely to be added in the future. The MedsPaL database incorporates up-to-date reliable intellectual property status information on all patented essential medicines for all LMICs.

2018 - 2022 STRATEGY

Over the next five years, we will build on our core strengths in voluntary licensing and patent pooling specifically in HIV, hepatitis C and tuberculosis (TB). At the request of the international community, we will expand our focus beyond treatment for these diseases to other life-saving medicines where our model could significantly contribute to improving public health in LMICs.

The MPP will initially start with patented small molecules that are listed on the World Health Organization (WHO) Model List of Essential Medicines (EML) as well as treatments with strong potential for future inclusion. The expansion will also consider novel antibiotics.

In addition, we will continue to improve transparency in public health by updating and improving our medicines patent and licences database, MedsPaL. We will also provide expert advice and support to the international community as a centre of excellence for public health voluntary licensing and patent pooling.

We will measure our success based on achieving the following five targets by 2022:

- **More than 20 million people** living with HIV in LMICs are treated with MPP-licensed antiretrovirals.
- Curative, pangenotypic hepatitis C treatments are available for ≤ US$ 50 per person from quality-assured suppliers in licensed countries.
- **Shortened all-oral regimen** with the potential for use in drug-resistant and drug-susceptible tuberculosis is licensed to the MPP.
- The MPP has concluded 4-6 licence agreements for patented medicines that are on the WHO EML or are likely to be added in the future.
- The MedsPaL database incorporates up-to-date reliable intellectual property status information on all patented essential medicines for all LMICs.

TIMELINE

- **2010**: The innovative financing mechanism Unitaid founds the MPP to improve the HIV response.
- **2015**: The MPP expands its mandate to hepatitis C and tuberculosis medicines.
- **2017**: Nine patent holders and 20 product developers are working with the MPP.
- **2018**: The MPP announces new strategic direction.
HOW THE MPP’S STRATEGIC PLAN CONTRIBUTES TO INTERNATIONAL GOALS

International HIV Targets
Expand treatment to reach 30 million people living with HIV by 2025. End AIDS by 2030.

Our contribution
License and accelerate introduction of new and approved antiretrovirals, including paediatric formulations and delivery systems such as long-acting injectables. Explore voluntary licensing of novel products for pre-exposure prophylaxis (PrEP) and emerging technologies for an HIV cure.

International Hepatitis C Targets
Eliminate viral hepatitis as a major public health threat by 2030. Reduce hepatitis C infections by 80% and deaths by 65%.

Our contribution
Facilitate affordable access to direct-acting antivirals with the potential of working across all strains of the virus.

International Tuberculosis Targets
Reduce TB deaths by 95% between 2015 and 2035. End tuberculosis by 2030.

Our contribution
License new drugs, drug candidates and regimens that can be used to improve the standard of care for both drug-resistant and drug-susceptible TB.

International Targets for Universal Health Coverage and Essential Medicines
Achieve Universal Health Coverage, including [...] access to safe, effective, quality and affordable essential medicines and vaccines for all.

Our contribution
Expand our mandate beyond HIV, hepatitis C and TB, initially into patented small molecules that are listed on the WHO EML. License medicines with strong potential for future inclusion in the EML in view of their clinical benefits and potential for public health impact, including new antimicrobials.

DELIVERING RESULTS
As public health priorities shift, so too must we adapt to deliver results and fulfill our overall mission of ensuring equitable access to medical treatment and health technologies.

The following cross-cutting initiatives will support the organisation’s long-term viability and ensure the successful implementation of our strategy:

- Build strategic partnerships with countries to bolster treatment programmes and with regional and national stakeholders to speed uptake of MPP-licensed products
- Diversify funding sources to support the rollout of affordable health commodities over the long term
- Forge new collaborations with intellectual property holders, including industry and universities, and expand generic manufacturing network
- Support international efforts to improve paediatric care

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2 UNAIDS  
3 UN Sustainable Development Goals  
4 WHO Global Health Sector Strategy on Viral Hepatitis, 2016-2021  
5 WHO Post-2015 Global TB Strategy  
6 UN Sustainable Development Goals  
7 UN Sustainable Development Goals
The Medicines Patent Pool (MPP) is an international public health organisation registered in Switzerland.

www.medicinespatentpool.org
@MedsPatentPool

The MPP was founded and is funded by Unitaid.

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**How MPP Licensing Approaches Will Evolve Over the Next Five Years**

- New incentives to encourage the inclusion of additional middle-income countries
- Cooperation with governments and research and development funders to develop new products
- Adaptation to evolving international quality assurance standards
- Differentiated royalties and, where appropriate, market segmentation
- Affordability clauses for small markets with limited number of producers
- Agreements on upstream technologies
- Terms to enable technology transfer and local production for local supply
- Provisions to balance access with good stewardship in the antimicrobial field

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**Key Features of Current Licences**

- Wide geographical scope
- Flexibility to combine different medicines and develop FDCs
- Strict quality assurance policies
- Non-exclusive to encourage competition
- Compatibility with other access policies and strategies
- Public disclosure of company patent information
- Transparent: terms of licences published
- Licence management to monitor compliance and prevent market leakage

**Potential New Features of Future Licences**

- WHO prequalification/Stringent Regulatory Authority approval

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8 WHO prequalification/Stringent Regulatory Authority approval