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WHO-MPP forecasts: setting the context

Sandeep Juneja

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Background

- Forecasts
  - Important tool to guide commercial and policy decisions
  - Key to work of many stakeholders in this room

Background

- MPP started forecasting ARVs early in its life: 5 years back
  - Initially to inform its decision making
  - WHO-MPP began collaborating 3-4 years back

Background

- Availability of robust epidemiology data and past trends was very helpful

Methodology: HIV

- Focus when developing methodology: realistic, practical, real life issues affecting uptake

Methodology: HIV

- Considers among other things:
  - Induction into guidelines
  - Date for generic availability; FDC availability
  - Level of competition; pricing
  - Regulatory approvals: WHO PQ / SRA / NDRA

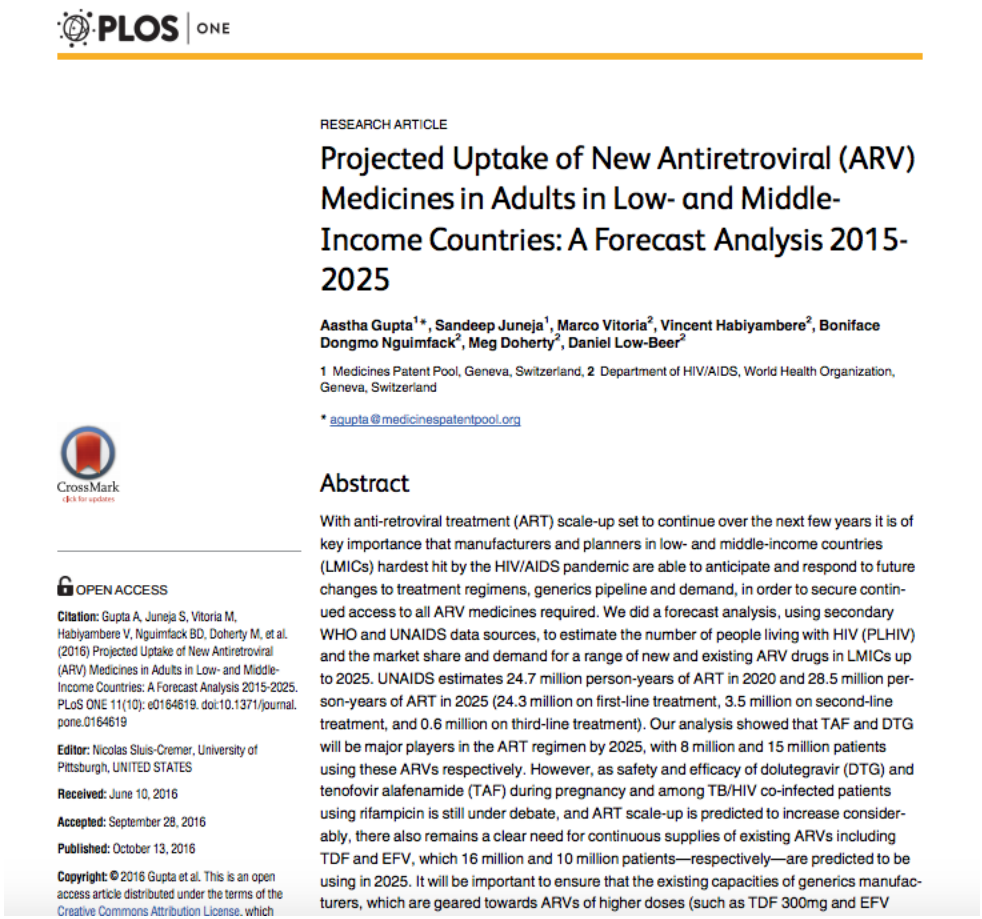
Methodology: HIV

- Methodology benefitted from MPP insights into progress: obtained from our partner manufacturers

- WHO view on what is best suited from public health perspective and phasing-in / out- of regimens

Methodology: HIV

- Joint paper published late last year



PLOS ONE

RESEARCH ARTICLE

Projected Uptake of New Antiretroviral (ARV) Medicines in Adults in Low- and Middle-Income Countries: A Forecast Analysis 2015-2025

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Abstract

With anti-retroviral treatment (ART) scale-up set to continue over the next few years it is of key importance that manufacturers and planners in low- and middle-income countries (LMICs) hardest hit by the HIV/AIDS pandemic are able to anticipate and respond to future changes to treatment regimens, generics pipeline and demand, in order to secure continued access to all ARV medicines required. We did a forecast analysis, using secondary WHO and UNAIDS data sources, to estimate the number of people living with HIV (PLHIV) and the market share and demand for a range of new and existing ARV drugs in LMICs up to 2025. UNAIDS estimates 24.7 million person-years of ART in 2020 and 28.5 million person-years of ART in 2025 (24.3 million on first-line treatment, 3.5 million on second-line treatment, and 0.6 million on third-line treatment). Our analysis showed that TAF and DTG will be major players in the ART regimen by 2025, with 8 million and 15 million patients using these ARVs respectively. However, as safety and efficacy of dolutegravir (DTG) and tenofovir alafenamide (TAF) during pregnancy and among TB/HIV co-infected patients using rifampicin is still under debate, and ART scale-up is predicted to increase considerably, there also remains a clear need for continuous supplies of existing ARVs including TDF and EFV, which 16 million and 10 million patients—respectively—are predicted to be using in 2025. It will be important to ensure that the existing capacities of generics manufacturers, which are geared towards ARVs of higher doses (such as TDF 300mg and EFV

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Methodology: HIV

- Status check today on how forecasts/assumptions hold up

Hepatitis C

- Greater visibility on epidemiology and treatment need emerging and expected to improve thanks to work of several experts e.g., WHO and CDA
- Greater clarity on treatment options particularly pan-genotypic regimens
- Fewer and less complex regimens than HIV
- Generic DAAs increasingly becoming available and getting cheaper
  - First pan-genotypic FDCs from Gilead, BMS-MPP licences in a few months
- In the first year since launch of DAC, MPP licensees distributed ~150K equivalent of treatments, largely in India
- Encouraging, but hopefully just the beginning
- As NDRA approvals come through and pricing reduces, uptake should increase
- Today: many experts in the room; a lot of practical experience
- Lets discuss opportunities and impediments to uptake

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THANK YOU