



As Clock Ticks Towards Trans-Pacific Trade Pact Deadline, U.S. Must End Stall Tactics on Access to Medicines

New York, March 4, 2013 – As closed-door talks for the Trans-Pacific Partnership (TPP) Agreement resume in Singapore this week, international medical humanitarian organization Doctors Without Borders/Médecins Sans Frontières (MSF) calls on the U.S. government to end its stall tactics and revise its proposals for what otherwise promises to be the most harmful trade deal ever for access to medicines in developing countries.

The TPP negotiations, which currently involve eleven Asia-Pacific countries, are being conducted in secret, but leaked texts reveal the most aggressive intellectual property (IP) measures ever suggested in a trade deal with developing countries. The U.S. proposals threaten to roll back internationally-agreed public health safeguards and would put in place far-reaching monopoly protections that keep medicine prices high and out of the reach of millions in the Asia-Pacific region. Furthermore, U.S. negotiators have said the TPP will be the template for future U.S. trade agreements across the globe, setting a damaging precedent. After widespread opposition to the U.S. proposals, including from other negotiating countries, the U.S. promised to go back to the drawing board. But now a year has passed, and the U.S. has failed to deliver any alternatives, essentially running out the clock so countries may be forced to accept its original harmful demands to make the announced October 2013 deadline.

“Too many people already die needlessly because the medicines they need are too expensive or do not exist, and we cannot stand by as the Trans-Pacific Partnership threatens to further restrict access to medicines in developing countries,” said Dr. Unni Karunakara, International President of MSF. “We are gravely concerned about countries like Thailand, where MSF started treating HIV/AIDS more than a decade ago and then transitioned its programs to local authorities with the confidence that they would be able to continue providing lifesaving treatments. Now Thailand is on the cusp of joining a dangerous deal that could jeopardize its ability to maintain, let alone scale up, vital, life-saving health programs for its people.”

Read the February 2013 MSF Issue Brief: [Trading Away Health](#)

U.S.-proposed IP rules would grant the pharmaceutical industry a wide-ranging set of legal mechanisms designed to prolong monopoly protection for medicines and delay the availability of more affordable generic versions. These demands represent a complete repudiation of the U.S. government’s own 2007 bipartisan trade policy, a commitment to scale back some of the harshest IP provisions in trade deals with developing countries.

One proposed TPP provision would require governments to grant new 20-year patents for modifications of existing medicines (evergreening), such as a new forms, uses or methods, even without improvement of therapeutic efficacy for patients. Another provision would make it more expensive and cumbersome to challenge undeserved or invalid patents; and yet another would add additional years to a patent term to compensate for administrative processes. Taken together, these and other provisions will add up to more years of high-priced medicines at the expense of people needing treatment, who must wait longer for access to affordable generics.

Meanwhile, provisions in the proposed investment chapter would give pharmaceutical companies the right to sue governments for instituting any regulation that reduces their expected profits, using private tribunals that circumvent a country’s judicial process. U.S. pharmaceutical company Eli Lilly is using similar provisions in NAFTA to demand \$100 million from the Canadian government for invalidating one

of its patents, claiming, among other things, that the company's expected profits were "expropriated" when the patent was overturned.

"Despite paying lip service to the idea of balancing public health with trade interests, the U.S. government has yet to revise its demands for harmful provisions that will obstruct access to affordable generic medicines," said Judit Rius Sanjuan, U.S. manager for MSF's Access Campaign. "Countries negotiating the TPP must prevent harmful provisions from being shoe-horned into the final deal. The U.S. and its TPP partners must take their public health commitments seriously and agree to a trade agenda that promotes both innovation and access to medicines."

###