

Improving Access for Quality-Assured TB Medicines and Diagnostics



Update on GDF Activities, Challenges & Perspectives

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Stop TB Partnership Board Meeting - Paris
15 April 2015



Outline

1. Key milestones reached in 2014 & update on GDF successful transition to UNOPS.
2. Key highlights on GDF Market Shaping Activities.
3. Looking forward: what are the perspectives on TB commodities & upcoming GDF challenges?
4. Discussion / Q&A.



GDF Strategic Objectives

1. **Save lives** by ensuring an uninterrupted supply of quality-assured, affordable anti-TB drugs and diagnostics to population in need
2. **Strengthen national drug supply management systems** and sustainable procurement capacity by providing tailored technical assistance, innovative tools to countries/organizations in need and enhance partners' engagement for technical and financial support
3. **Contribute to TB commodities market shaping** by linking strategic interventions on the demand and supply sides with stakeholders/partners, focusing on market analysis, supply security, suppliers engagement, affordable and sustainable prices, innovation and new products introduction/uptake by countries
4. **Maximize impact and value for money** by enhancing efficiency/effectiveness of operations focusing on quality of services and clients/partners feedback



Key GDF Milestones

133 countries benefited from GDF procurement / bundled mechanism with



- ❖ > 24 M Adult FLDs
- ❖ > 1,3 M pediatric treatments
- ❖ > 150,000 SLDs patient treatments

=> 26M treatments delivered since GDF inception in 2001

GDF's market shares in 2013 (for public sector) are:



Savings Generated from Price Reduction in 2014

| Year | Units | Products costs in 2011 prices, \$ | Products costs in 2014 prices, \$ | Savings, \$ |
|---------------|-------------|-----------------------------------|-----------------------------------|-------------|
| 2014 YTD July | 177,015,081 | 89,748,879 | 68,432,028 | 21,316,851 |

Key GDF Milestones since last Board Meeting

GDF successfully transitioned from WHO to UNOPS



without any commodity supply disruption to countries nor operations discontinuity for TA & market shaping

continuing its reorganization started in 2012 towards a more strategic model focused on:

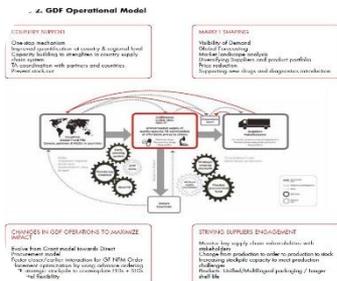
Evolving country needs

Market dynamics

Looking ahead at post 2015 TB Strategy & Challenges

Value for money / cost efficiency

with a renewed team demonstrating a high level of technical expertise & commitment



Highlighting 10 key GDF achievements ensuring operations continuity under UNOPS rules & regulations as per Q1 2015 (1)

1. GDF results and strategic orientations discussed & reviewed with stakeholders during GDF Strategic Advisory Committee in September 2014
2. Within transitioning period, GDF launched 1 ITB for FLDs and 2 ITBs for SLDs with
 - 14 Long Term Agreements (LTA) for First Line Drugs (FLD) amended / signed
 - LTAs for Second Line Drug (SLD) amended + 26 LTA for SLD under signature
 - 2 LTAs for procurement agents amended
 - Tender for selecting a wholesaler for laboratory supply adjudicated & LTA signed
3. Contracts for procurement agents extended & transferred to UNOPS
4. New KPIs for monitoring the performance of suppliers and procurement agents
5. Amendment & transfers of all current country orders / on-going grants agreements



Highlighting 10 key GDF achievements ensuring operations continuity under UNOPS rules & regulations as per Q1 2015 (2)

6. Revision of internal template forms for Direct Procurement and Grant requests
7. Organization of Diagnostic Procurement transfer from GIZ to GDF (Internal procurement) following the end of contract with GIZ end of Q1 2015
8. Tender for pre-shipment inspection and quality control agents jointly launched and adjudicated with Global Fund
9. Positive recommendation for GDF 9001 ISO certification maintenance after new QS audit – GDF and UNOPS are 2 ISO certified organizations
10. Development of a new pricing policy for SLDs Strategic Rotating Stockpile management - under revision



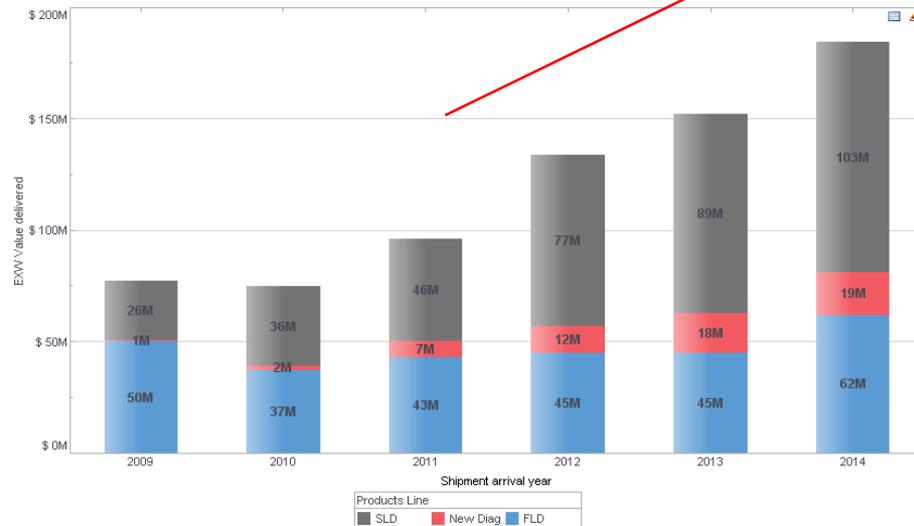
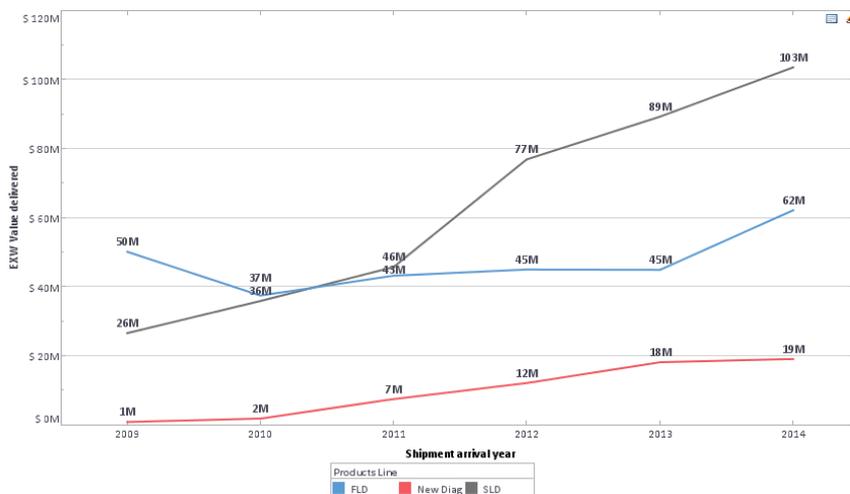
Update on GDF Technical Assistance Activities

- TA framework reformulation with new tools and enhanced information systems for more agile data sharing in line with country profiles development and harmonization of DM activities with other TA partners
 - QuanTB roll-out with MSH-SIAPS
 - Early Warning System
 - Workshop in Ethiopia for GDF consultants with partners (KNCV, UNION, MSH...)
 - Co-organization of the Global TB Conference with MSH/SIAPS in Bangkok for 15 high level country representatives (NTPs & PSM specialists) & partners
- 43 Monitoring Missions conducted in 2014 and 7 in Q1 2015
- Support to NFM of GF for concept notes development
- Collaboration with Usaid funded PQM program on market shaping
- Operational support for the launch of USAID / Janssen donation on Bedaquiline donation set up & functional as per 1st of April 2015



Orders Delivered in USD all fees incl. per Line / Year

GDF volume in 2014 has nearly doubled compared to 2011



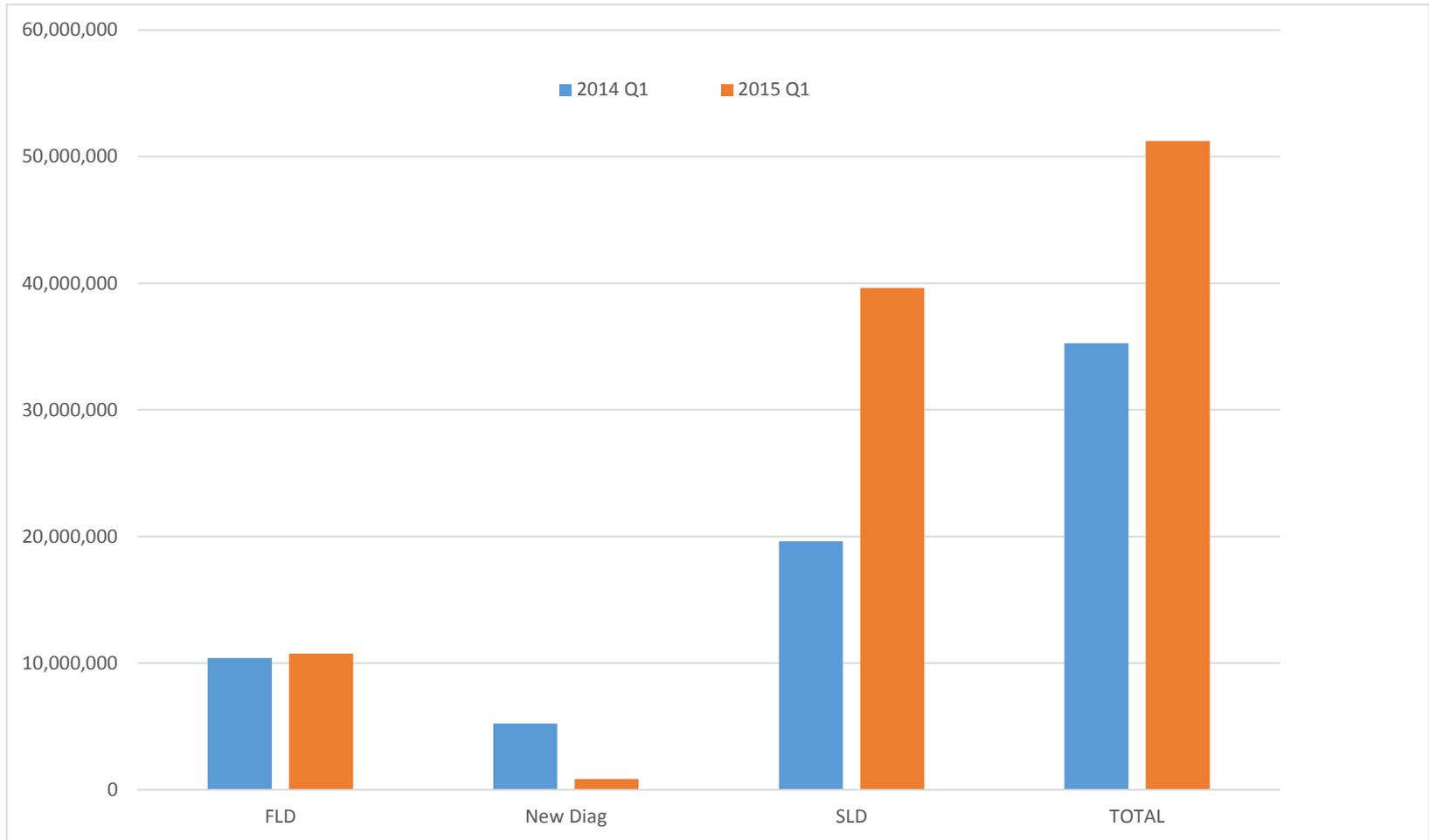
Order Delivered Value EXW per Line per Year

| Products Line | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 | Grand Total |
|--------------------|----------------------|----------------------|----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| FLD | \$ 50,025,019 | \$ 37,341,647 | \$ 43,090,679 | \$ 44,883,113 | \$ 44,795,042 | \$ 62,063,168 | \$ 282,198,668 |
| New Diag | \$ 740,627 | \$ 1,725,567 | \$ 7,367,615 | \$ 12,000,174 | \$ 18,042,117 | \$ 18,983,468 | \$ 58,859,568 |
| SLD | \$ 26,464,891 | \$ 35,755,281 | \$ 45,587,507 | \$ 76,771,954 | \$ 89,171,855 | \$ 103,452,841 | \$ 377,204,328 |
| Grand Total | \$ 77,230,537 | \$ 74,822,494 | \$ 96,045,802 | \$ 133,655,241 | \$ 152,009,013 | \$ 184,499,476 | \$ 718,262,564 |



Comparing Q1 2014 / 2015

Orders Placed in USD, All Fees included

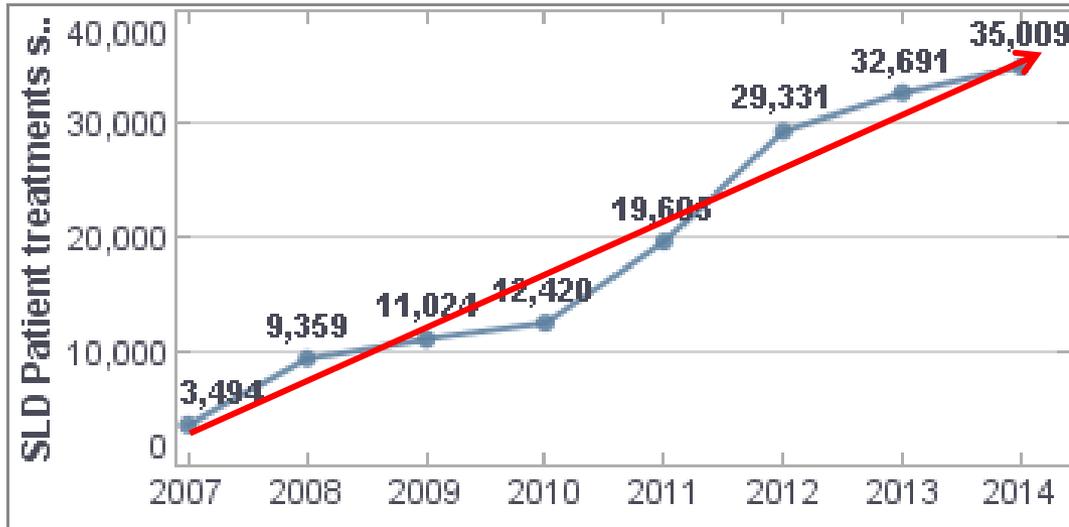


Stop TB Partnership

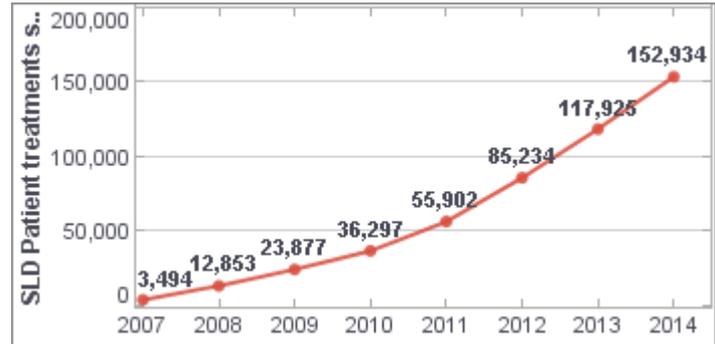
GLOBAL DRUG FACILITY

MDR Treatments delivered

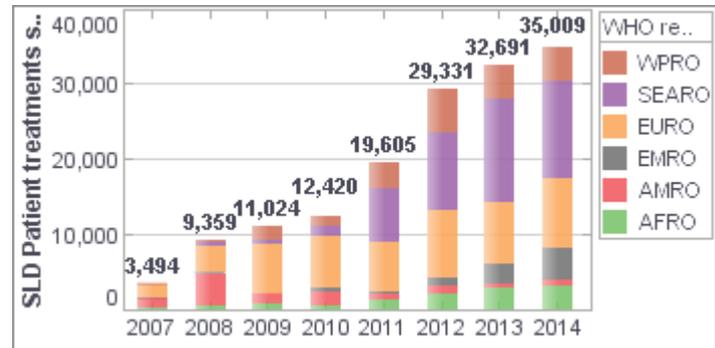
SLD Patient treatments supplied by year



SLD cumulative Patient treatments supplied per year



SLD Patient treatments supplied per year by regions



6 months IP until 2012, 8 months thereafter

Live Report 20.02.2015

https://extranet.who.int/sree/Reports?op=vs&path=/WHO_HQ_Reports/G1/PROD/INT/Shared/MDR+Patient+treatments+supplied+-+method+Injectable+standard+180-240dose+Rev+3.0&userid=GDF_ro&password=gdfread1

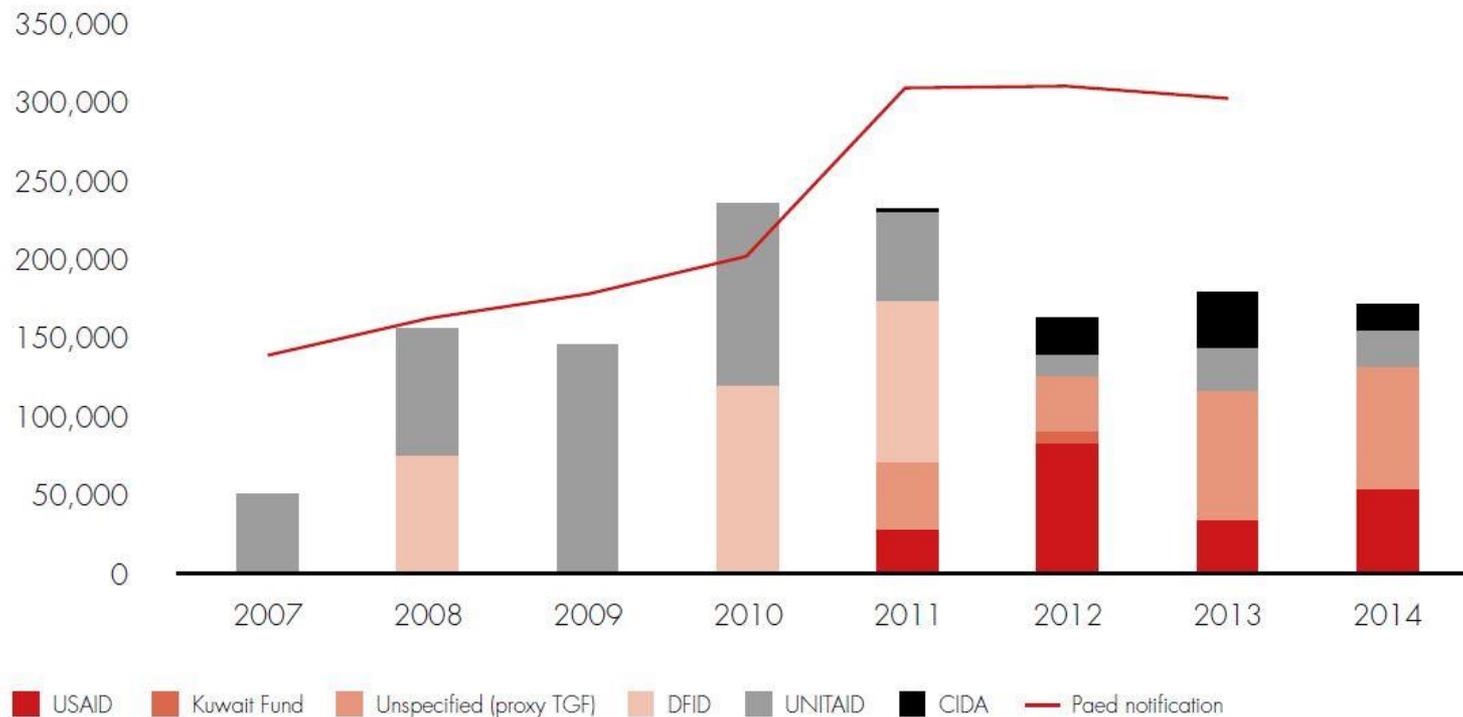


Stop TB Partnership

GLOBAL DRUG FACILITY¹

Total Pediatric Treatments supplied by Donor 2007-2014

Figure 8. Paediatric patient treatments delivered by GDF versus global paediatric notification

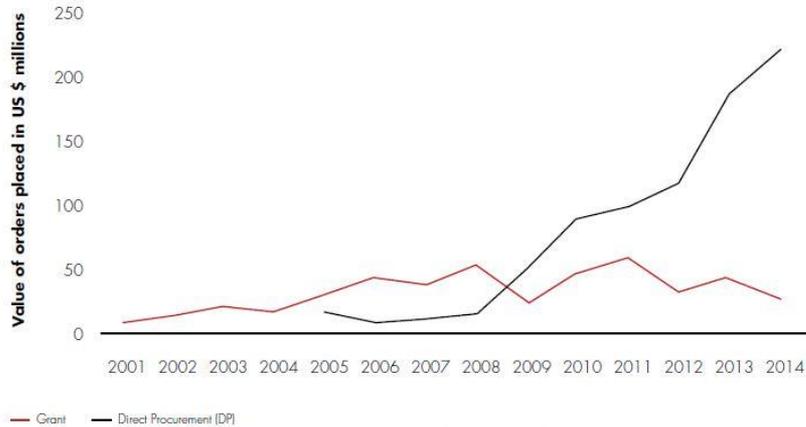


GDF evolving operational model at light of TB commodity landscape changes

Monitoring TB markets dynamics and trends to better serve countries

- Countries using GDF mechanism shifted from grants to direct procurement over last years
- MICs are graduating from donor financing and using domestic funding
- New medicines and diagnostic tools are being introduced

Figure 4. GDF Procurement Services



| Country Name | Order Date Placed With Suppliers Year | | | | Grand Total |
|--------------|---------------------------------------|--------------|---------------|---------------|---------------|
| | 2011 | 2012 | 2013 | 2014 | |
| India | \$18'891'739 | \$ 6'458'040 | \$ 19'899'407 | \$ 78'124'882 | \$123'374'068 |
| Pakistan | \$ 1'071'763 | \$ 7'974'640 | \$ 13'278'435 | \$ 14'713'271 | \$ 37'038'110 |
| China | \$10'520'827 | \$ 5'186'861 | \$ 16'046'172 | | \$ 31'753'860 |
| Uzbekistan | \$ 7'275'306 | \$ 7'202'594 | \$ 11'986'384 | \$ 4'718'686 | \$ 31'182'970 |
| Kazakhstan | \$ 3'748'514 | \$ 8'232'158 | \$ 4'893'836 | \$ 1'068'503 | \$ 17'943'011 |
| Ukraine | \$ 835 | \$ 2'586'668 | \$ 2'741'584 | \$ 11'927'365 | \$ 17'256'453 |
| Myanmar | \$ 694'828 | \$ 1'715'643 | \$ 3'840'922 | \$ 10'378'707 | \$ 16'630'099 |
| Philippines | \$ 9'575'637 | \$ 154'049 | \$ 4'847'851 | \$ 1'622'565 | \$ 16'200'102 |
| Tajikistan | \$ 3'296'652 | | \$ 5'453'389 | \$ 4'527'759 | \$ 13'277'800 |
| Kyrgyzstan | \$ 1'893'641 | \$ 3'068'678 | \$ 4'179'233 | \$ 3'481'647 | \$ 12'623'199 |

=> Implies changing GDF operational model with key new tools

- Enhanced Strategic Rotating Stockpile in value (2x) and composition
- New stockpile policies
- Flexible Procurement Fund to guarantee orders & allow countries to use GDF according to public accounting rules (no advanced payment)
- Support & provide renewed TA to countries on key challenges like forecasting aligning new tools (QuanTB or drug management systems) with partners
- New Information Platforms
- Monitoring Global Demand Trends



Stop TB Partnership

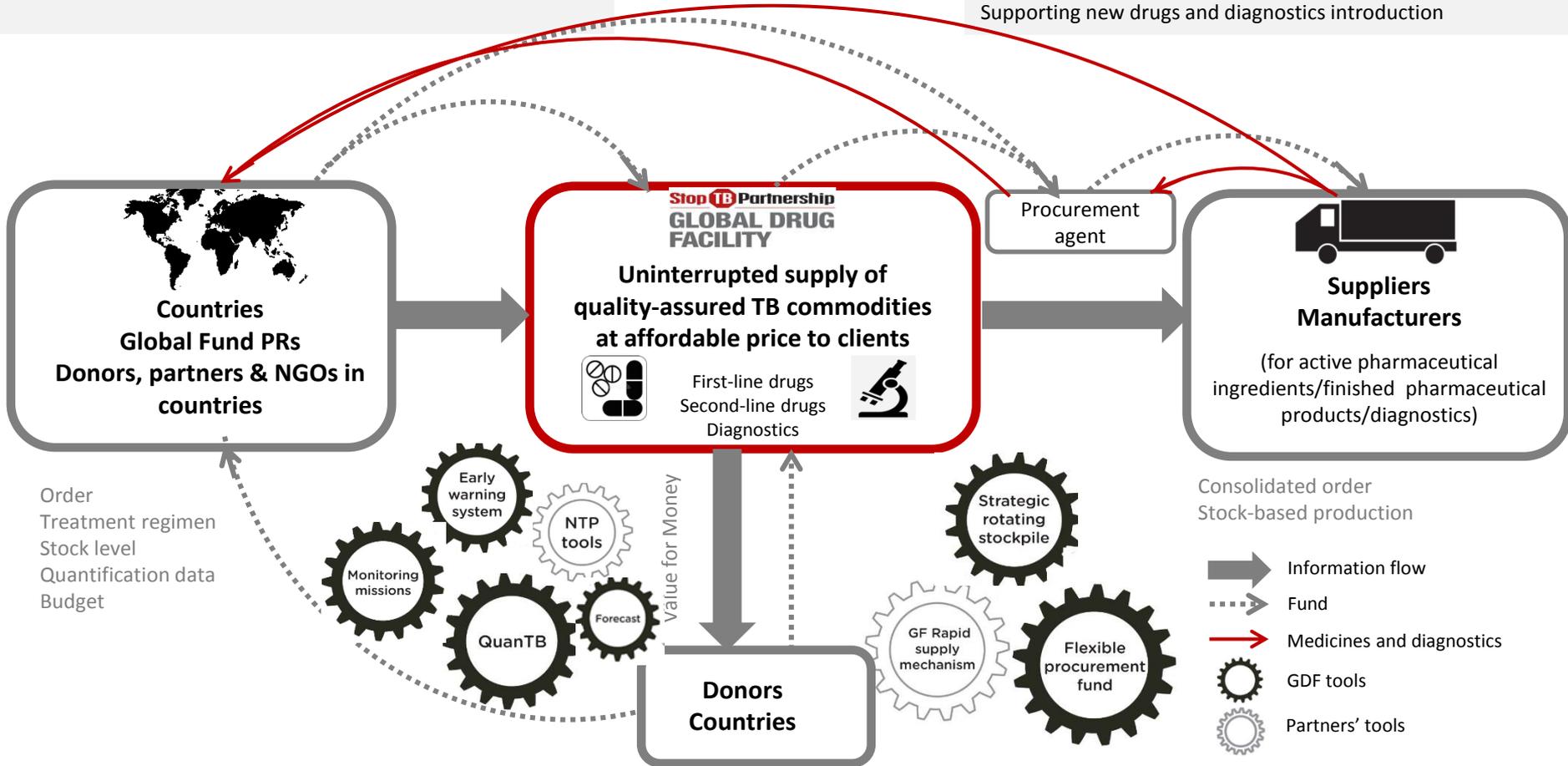
GLOBAL DRUG FACILITY

Country Support

One-stop mechanism
Improved quantification at country & regional level
Capacity building to strengthen in-country supply chain system
TA coordination with partners and countries
Prevent stock out

Market Shaping

Visibility of Demand
Global Forecasting
Market landscape analysis
Diversifying Suppliers and product portfolio
Price reduction
Supporting new drugs and diagnostics introduction



Changes in GDF operations to maximize impact

Evolve from Grant model toward Direct Procurement model
Foster closer/earlier interaction for GF NFM Order placement optimization by using advance ordering
GDF strategic stockpile to contemplate FLDs + SLDs
Financial flexibility

Striving suppliers engagement

Monitor key supply chain vulnerabilities with stakeholders
Change from *production to order* to *production to stock*
Increasing stockpile capacity to meet production challenges
Products: Unified multilingual packaging/ longer shelf life

Highlighting GDF Market Shaping Activities towards increased supply security and MDR-TB costs decreases

- Increased SLDs supply security (26 products – 12 suppliers => more than x 2 since 2011)
- Significant price reductions achieved => more than 21 M USD savings in 2014 on SLDs
- Reductions in lead times with SLDs Strategic Rotating Stockpile
- Decreased stock-outs with a risk management approach for sensitive products (Km/Cfx)
- Supporting market entry of new manufacturers for both active principle ingredients and finished pharmaceutical products

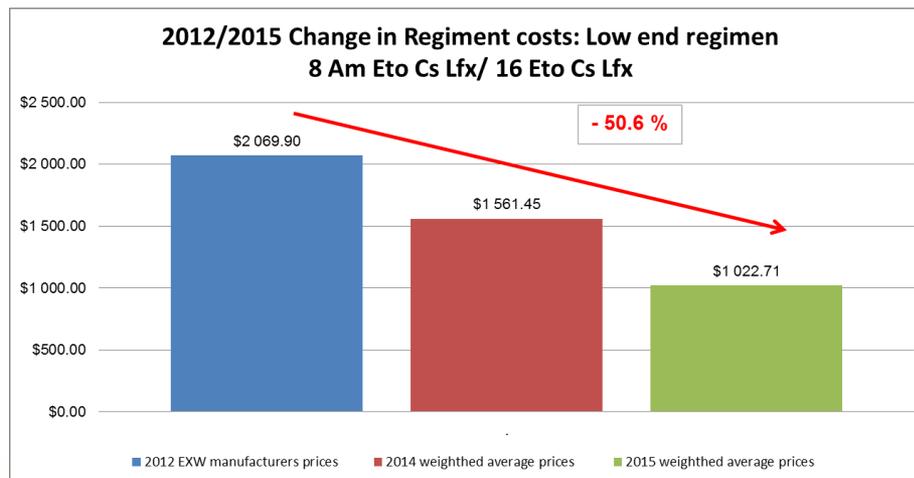
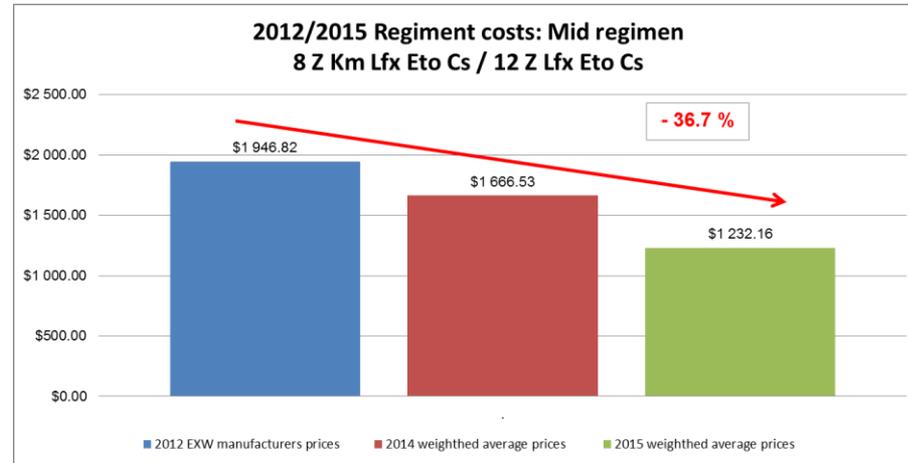
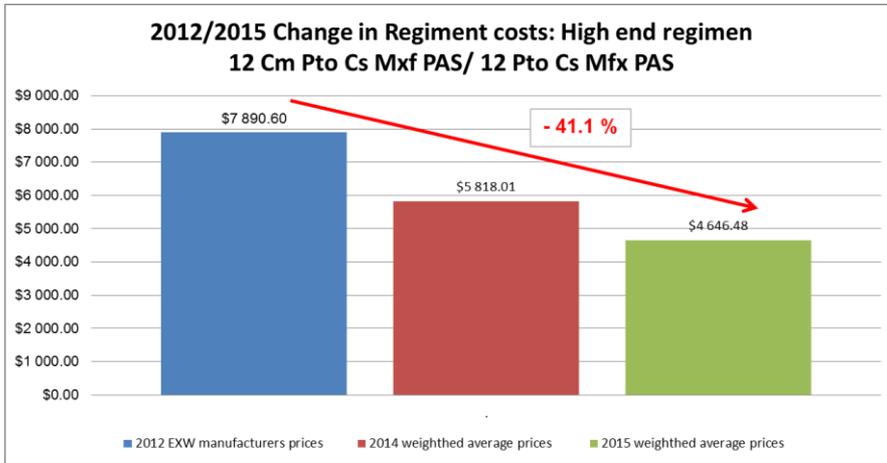
Cycloserine Example:

| | Price, USD | vs 2010 (%) |
|-------------------|------------|-------------|
| Median Price 2010 | 0.599 | 0% |
| Median Price 2014 | 0.42 | -30% |
| 2015 ITB (India) | 0.26 | -57% |
| 2015 ITB (ROW) | 0.20 | -67% |

- More sustainable supply of Cs API: there are 3 API manufacturers (Dong A, Shasun and Macleods), with Enzychem of South Korea expected to file API PQ around June 2015
- GDF dramatically reduced the price of Cycloserine capsule, **by -66.6%**, since last 5 years through regular ITBs fostering market competition



GDF price reductions: regimen examples



Value for money: Savings on MDR-TB Treatments (1)

- GDF 2015 price reductions could provide savings of **7 million USD per 10.000 patient treatments** if compared with 2013 (based on mid range treatment regimen)

| Regimens cost, USD | 2013 | 2014 | 2015 |
|--------------------|------|------|------|
| High | 7891 | 5818 | 4645 |
| Mid | 1947 | 1667 | 1232 |
| Low | 2070 | 1561 | 1023 |

| Savings per Regimen, USD | 2014 vs 2013 | 2015 vs 2014 | 2015 vs 2013 |
|--------------------------|--------------|--------------|--------------|
| High | -2073 | -1173 | -3245 |
| Mid | -280 | -434 | -715 |
| Low | -508 | -539 | -1047 |

| Savings per 10.000 treatments, USD | 2014 vs 2013 | 2015 vs 2014 | 2015 vs 2013 |
|------------------------------------|--------------|--------------|-------------------|
| High | -20 725 900 | -11 725 300 | -32 451 200 |
| Mid | -2 802 900 | -4 343 700 | -7 146 600 |
| Low | -5 084 500 | -5 387 400 | -10 471 900 |



Impact of GDF savings on MDR-TB Treatments (2)

H/M/L regimen costs definition:

USD

High costs 3501-6000

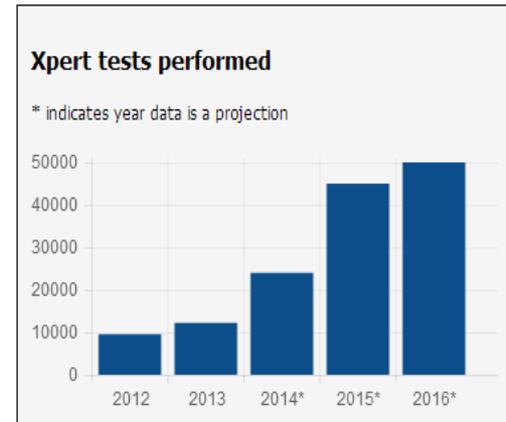
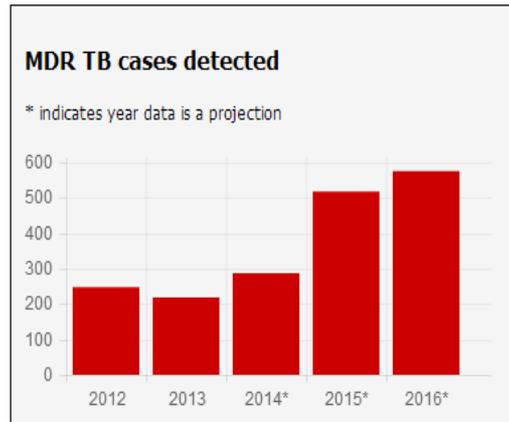
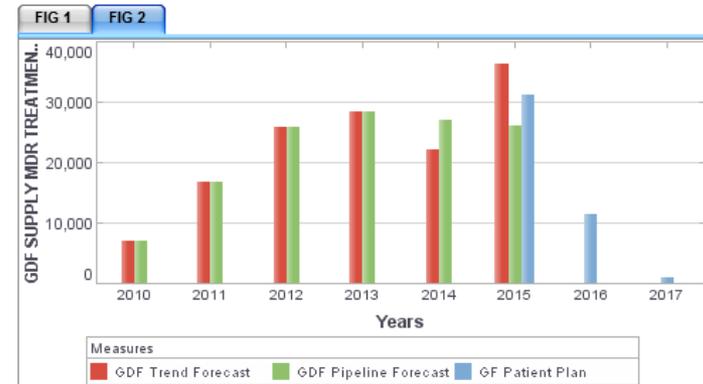
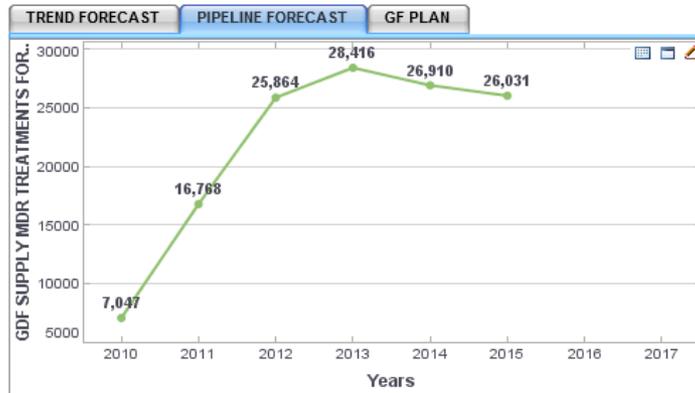
Medium costs 2001-3500

Low costs 1400-2000

| Country | Main regimen/s | Costs 2012 | Costs 2013 | Costs 2014 | Costs 2015 | % change 15/14 | Trend |
|-------------|---|------------|------------|------------|------------|----------------|-------|
| Azerbaijan | 12 Z-Ami-Lfx-Eto-Cs-PAS / 12 Z-Lfx-Eto-Cs-PAS | 4 541 | 4 195 | 3 746 | 3 456 | -8% | |
| Bangladesh | 8 Z-Km-Lfx-Eto-Cs / 16 Z-Lfx-Eto-Cs | 2 221 | 2 085 | 1 880 | 1 360 | -28% | |
| Belarus | 8 Cm-Lfx-Eto-PAS-Cs-Z/12 Lfx-Eto-PAS-Cs-Z | 4 519 | 4 432 | 3 839 | 3 423 | -11% | |
| | 8 Cm-Mfx-Eto-PAS-Cs-Z-AmxClv/12 Mfx-Eto-PAS-Cs-Z-AmxClv | 5 835 | 5 306 | 4 347 | 3 818 | -12% | |
| Ethiopia | 8 Z-Cm-Lfx-Pto-Cs / 12 Z-Lfx-Pto-Cs | 2 849 | 2 860 | 2 360 | 1 666 | -29% | |
| Georgia | 12 Z-Km-Lfx-Pto-Cs-PAS / 12 Z-Lfx-Pto-Cs-PAS | 4 805 | 4 578 | 4 255 | 3 920 | -8% | |
| | 12 Z-Cm-Lfx-Pto-Cs-PAS / 12 Z-Lfx-Pto-Cs-PAS | 5 977 | 5 920 | 5 109 | 4 475 | -12% | |
| India | 6 Km-Lfx-Eto-Cs-Z-E/18 Lfx-Eto-Cs-E | 2 319 | 1 804 | 1 829 | 1 460 | -20% | |
| | 9 Km-Lfx-Eto-Cs-Z-E/18 Lfx-Eto-Cs-E | 2 777 | 2 198 | 2 231 | 1 810 | -19% | |
| Indonesia | 6 Km-Lfx-Eto-Cs-Z(E) / 12 Lfx-Eto-Cs-Z(E) | 1 737 | 1 629 | 1 482 | 1 085 | -27% | |
| Kazakhstan | 12 Z-Cm-Pto-Cs-PAS-Lfx/12 Z-Pto-Cs-PAS-Lfx | 5 977 | 5 920 | 5 109 | 4 475 | -12% | |
| | 12 Z-Am-Pto-Cs-PAS-Lfx/12 Z-Pto-Cs-PAS-Lfx | 4 682 | 4 348 | 3 892 | 3 528 | -9% | |
| Kenya | 8 Km-Pto-Lfx-Cs-Z/12 Pto-Lfx-Cs-Z | 2 074 | 1 973 | 1 799 | 1 304 | -28% | |
| | 8 Cm-Pto-Lfx-Cs-Z/12 Pto-Lfx-Cs-Z | 2 849 | 2 860 | 2 360 | 1 666 | -29% | |
| Kyrgyzstan | 8 Cm-Lfx-Cs-Pto-Z-PAS / 16 Lfx-Cs-Pto-Z-PAS | 5 288 | 5 173 | 4 515 | 3 983 | -12% | |
| Moldova | 8 Cm-Eto-Lfx-Cs-Z-E/16 Eto-Lfx-Cs-Z-E | 3 097 | 2 890 | 2 545 | 1 788 | -30% | |
| Mongolia | 9 Z-Km-Lfx-Eto-Cs/15 Lfx-Eto-Cs-Z | 2 296 | 2 160 | 1 957 | 1 598 | -18% | |
| Myanmar | 6 Am-Lfx-Eto-Cs-Z/14 Lfx-Eto-Cs-Z | 1 739 | 1 573 | 1 333 | 886 | -34% | |
| | 6 Am-Lfx-Eto-Cs-PAS-Z/14 Lfx-Eto-Cs-PAS-Z | 3 527 | 3 273 | 2 933 | 2 703 | -8% | |
| Pakistan | 8 Am-Lfx-Eto-Cs-Z-PAS/16 Lfx-Eto-Cs-Z-PAS | 4 284 | 3 972 | 3 557 | 3 279 | -8% | |
| Philippines | 6 Km-Lfx-Pto-Cs-Z/12 Lfx-Pto-Cs-Z | 1 771 | 1 679 | 1 519 | 1 074 | -29% | |
| Tajikistan | 11Cm-Lfx-Pto-Cs-Z-PAS/13Lfx-Pto-Cs-Z-PAS | 5 805 | 5 733 | 4 960 | 4 352 | -12% | |
| Ukraine | 8 Z-Km-Lfx-Eto-Cs/12Z-Lfx-Eto-Cs | 1 950 | 1 838 | 1 670 | 1 236 | -26% | |
| | 8 Z-Km-Lfx-Eto-Cs-PAS/12 Z-Lfx-Eto-PAS-Cs | 3 738 | 3 538 | 3 270 | 3 053 | -7% | |
| Uzbekistan | 8 Z-E-Cm-Lfx-Pto-Cs/14 E-Z-Lfx-Pto-Cs | 3 083 | 3 075 | 2 566 | 1 814 | -29% | |
| VietNam | 8 Km-Lfx-Pto-Cs-Z-E/14 Lfx-Pto-Cs-Z-E | 2 302 | 2 181 | 1 997 | 1 443 | -28% | |

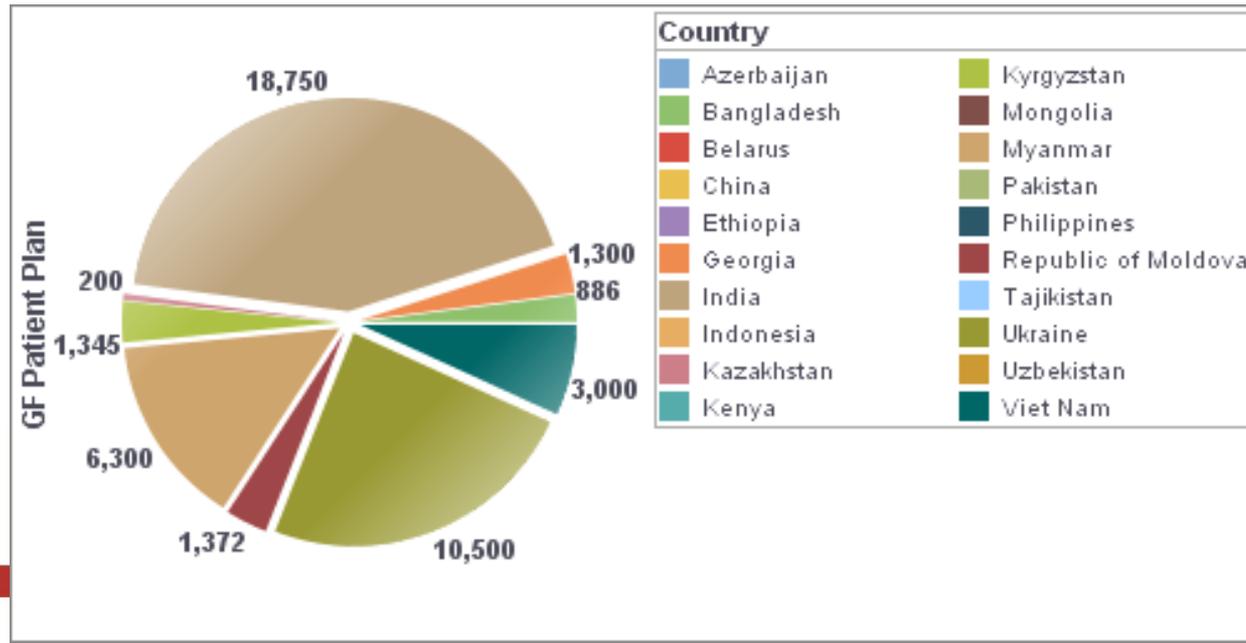
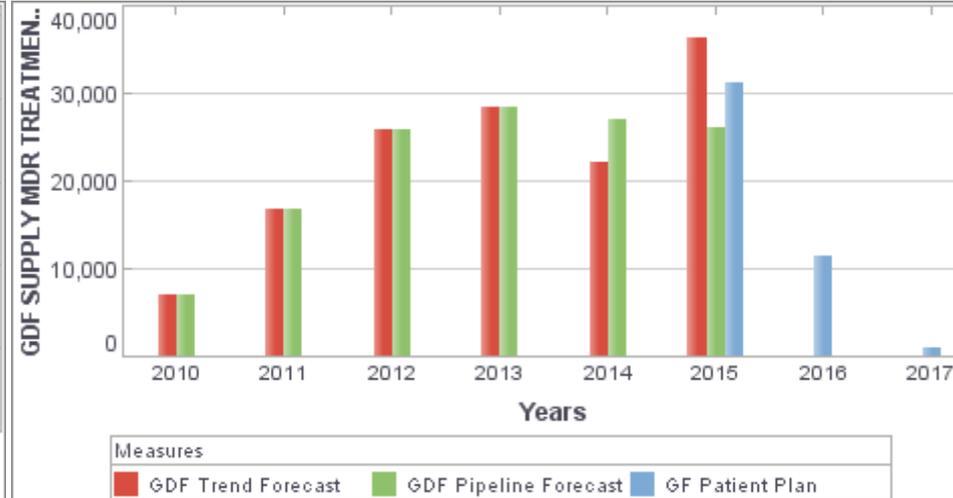


GDF Market Shaping Activities: Towards improved Forecast Monitoring Country Level



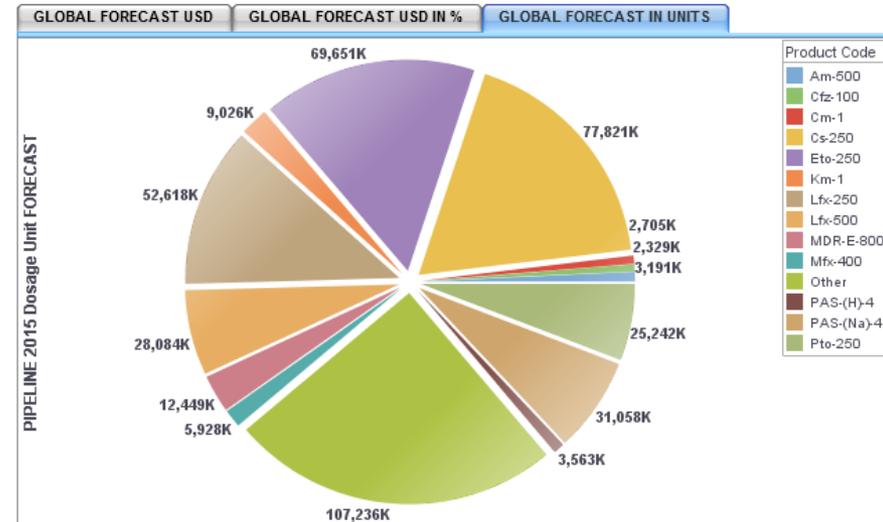
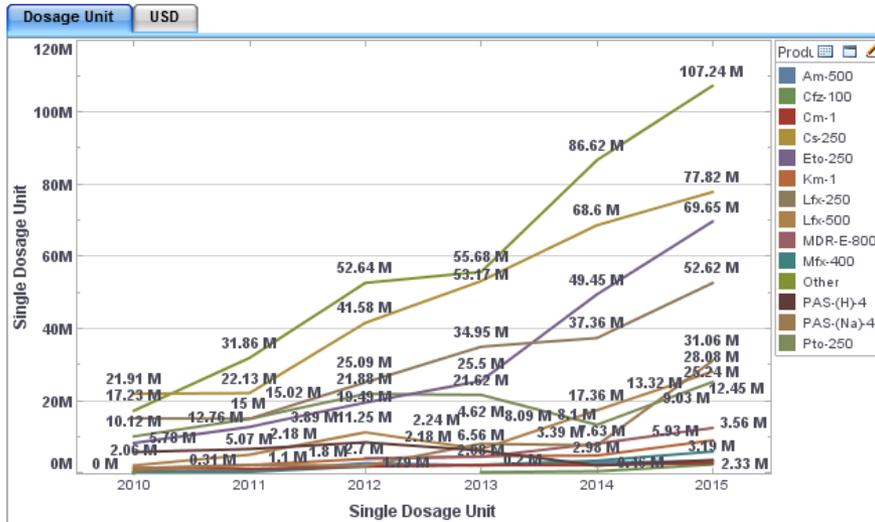
GDF Market Shaping Activities: Towards improved forecast monitoring

Aggregating Countries supplies for a Global View

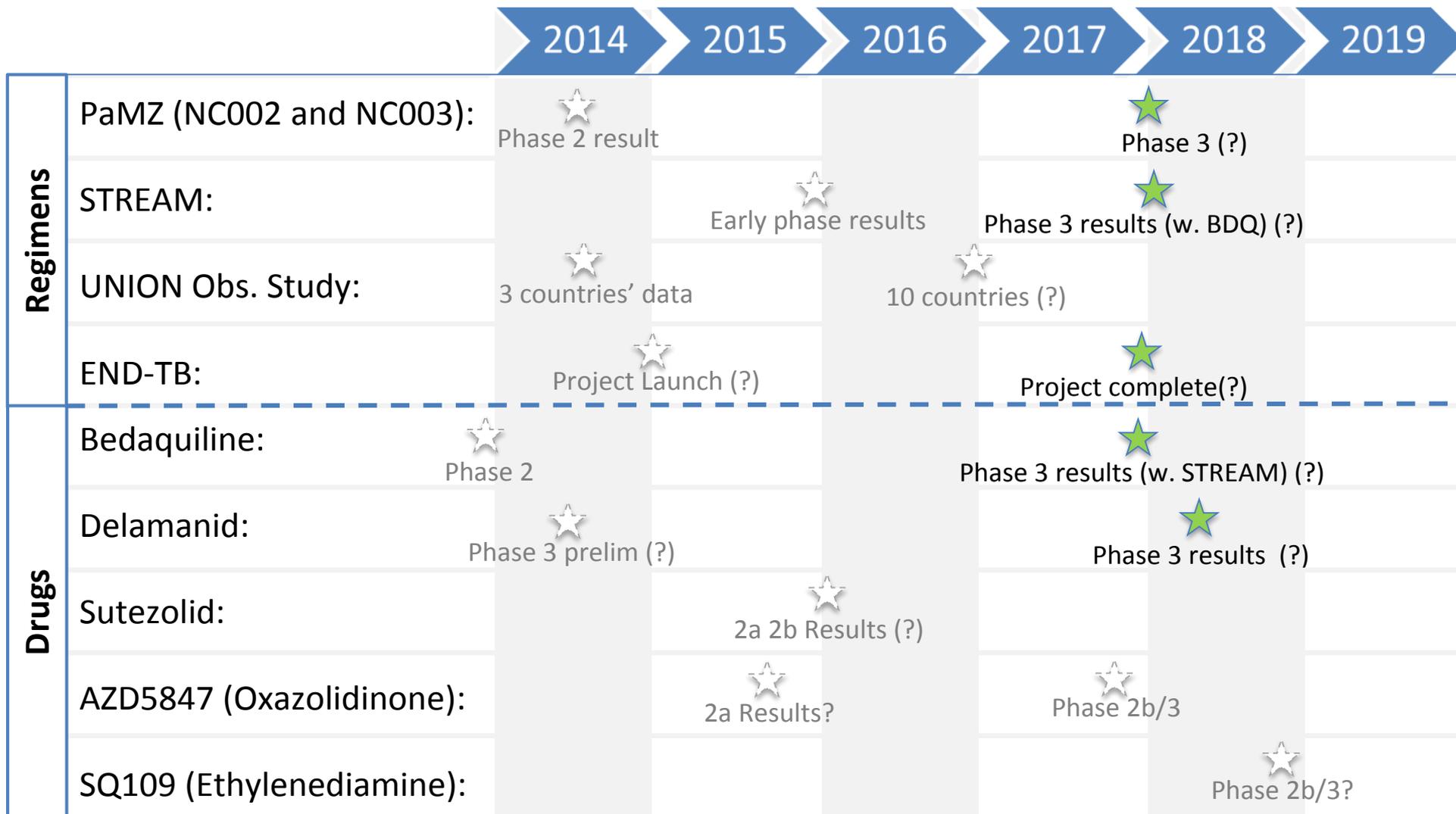


GDF Market Shaping Activities: Towards improved forecast monitoring

Anticipating Global Demand & Trends



Looking forward: new developments in the pipeline for DR-TB therapy imply new strategic supply chain approaches



Best case estimates. Sources: TB Alliance; Working Group on New TB Drugs, IUTLD, etc.

Source: CHAI-GDF/CHAI joint SLD landscape analysis, presented GDF Strategic Advisory Committee meeting, September 2014

 LEGEND:  22
 Interim "Game changer"

Specific scenarios are being assessed with partners for the timing and impact on existing procurement patterns & changes

Scenario 1: Current drugs, no new regimens

| | 2014 | 2015 | 2016 | 2017 | 2018 | 2019 | 2020+ |
|----------------|----------------------------|------|-----------------------------------|------|---|------|-------|
| Events: | ☆ Interim DMD guidance (?) | | ☆ END-TB preliminary results (??) | | ☆ BDQ Ph III results (STREAM) ☆ END-TB final results ☆ DMD Ph III (at earliest) | | |
| Cs | ○ | | | | | | |
| PAS | ○ | | | | | | |
| Km | ○ | | | | | | |
| Cm | ○ | | | | | | |
| BDQ/DMD | ✘ | | | | | | |

- Assumptions:**
1. No increase in volumes (compared to 2014)
 2. No new compounds indicated
 3. BDQ/DMD remain additive indication (pre-XDR) and continue to be used
- ↑ Relative increase to prev. yr

Scenario 2: STREAM / Short course

| | 2014 | 2015 | 2016 | 2017 | 2018 | 2019 | 2020+ |
|----------------|------|------|------------------------|----------------------------|--------------------------------|-------------------|-----------------------|
| Events: | | | ☆ Early STREAM results | ☆ UNION Obs. Study results | ☆ STREAM Ph III results (if +) | ☆ Adoption (if +) | ☆ Uptake start (if +) |
| Cs | ○ | ○ | ○ | | | | |
| PAS | ○ | ○ | ○ | | | | |
| Km | ○ | ○ | ○ | | | | |
| Cm | ○ | ○ | ○ | | | | |
| Gfx/Mfx | ○ | ○ | | ↑ | | | |
| Cfz | ○ | ○ | | ↑ | | | |

- Assumptions:**
1. Initial Km uptake in short course offset by fewer units needed per patient (208 vs. 98);
 2. Some countries adopt shorter regimen ahead of Ph III results (estimated countries, patients, and time needed)
- ↑ Relative increase to prev. yr ↓ Relative decrease

Scenario 3: PaMZ

| | 2014 | 2015 | 2016 | 2017 | 2018 | 2019 | 2020+ |
|----------------|------|------|------|------|------------------|-------------------|-----------------------|
| Events: | | | | | ☆ PH III Results | ☆ Adoption (if +) | ☆ Uptake start (if +) |
| Cs | ○ | ○ | ○ | ○ | ↓ | ↓ | ✘ |
| PAS | ○ | ○ | ○ | ○ | ↓ | ↓ | ✘ |
| Km | ○ | ○ | ○ | ○ | ↓ | ↓ | ✘ |
| Cm | ○ | ○ | ○ | ○ | ↓ | ↓ | ✘ |
| Pa-824 (+M +Z) | ○ | ○ | ○ | ○ | ↑ | ↑ | ↑ |

- Assumptions:**
1. Results positive and according to anticipated timelines
 2. Appropriate Dx available, and baseline Z and Mfx resistance do not obstruct rollout and guideline endorsement
- ↑ Relative increase to prev. yr ↓ Relative decrease ○ No/minor change ✘ Not used in main MDR
- Demand Implications:**
1. No change to key SLD demand until post 2017/18
 2. Reduction in all 4 key SLDs gradually beginning post 2017

Source: CHAI - GDF/CHAI joint SLD landscape analysis, presented GDF Strategic Advisory Committee meeting, September 2014

Looking forward : Significant changes in procurement patterns unlikely to happen until 2017+

There are a few possible products / new regimens with 'interim' result scenarios that may impact the current SLDs market:

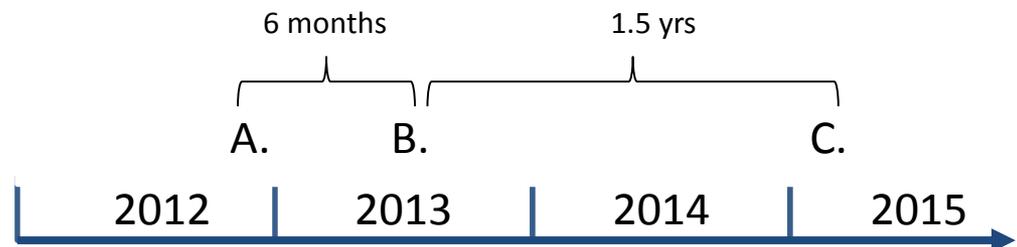
- **STREAM Short Course** (20 to 9 months regimen will decrease volumes but can be offset by market growth)
- **Bedaquiline / Delamanid** (early implementing countries experience => regimen changes with greater efficacy)
- **PaMZ** (to be confronted with impact of DST availability + country resistance profiles)
- **END-TB Results** (potential for greater use of Group 5 Agents and new drugs introduction)

Positive results will influence some NTP decisions, but it will take time

- Not all GDF countries will shift, especially not ahead of WHO guidelines
- Uptake requires KOL engagement, registration, guideline changes, provider training and awareness, change procurement, etc. (min.1.5-2+ years to start gradual uptake)
- Require close market monitoring from GDF and partners as per joint work with CHAI

The Bedaquiline experience confirms this expectation:

- A. SRA approval (December 2012)
- B. WHO interim guidance (June 2013)
- C. Earliest early adopter (Vietnam) 1st shipment in Q1 2015



Current Status on BDQ orders through GDF (Q1 2015)

| Country | OrderNumber | EstimatedDeparture | Sum of QuantityOrdered |
|-----------------------------|----------------|--------------------|------------------------|
| Belarus | BLR/DP/14/4120 | 3/12/2015 | 186 |
| | | 6/20/2015 | 186 |
| Bolivia | BOL/DP/15/4612 | (blank) | 1 |
| Cameroon | CMR/DP/14/4556 | (blank) | 13 |
| Cote d'Ivoire | CIV/DP/15/4590 | (blank) | 11 |
| France | FRA/DP/15/4660 | (blank) | 10 |
| Georgia | GEO/DP/14/4356 | 3/15/2015 | 30 |
| | | 3/24/2015 | 68 |
| | | 11/25/2015 | 68 |
| Indonesia | IDN/DP/14/4465 | 6/9/2015 | 50 |
| | | 9/28/2015 | 50 |
| Myanmar | MMR/DP/14/4284 | 5/26/2015 | 3 |
| | | 9/27/2015 | 3 |
| | | 2/26/2016 | 2 |
| | | 7/28/2016 | 2 |
| Nigeria | NGA/DP/14/4523 | 5/28/2015 | 11 |
| Papua New Guinea | PNG/DP/15/4659 | (blank) | 9 |
| Philippines | PHL/DP/14/4165 | (blank) | 35 |
| | | (blank) | 40 |
| United Republic of Tanzania | TZA/DP/15/4666 | (blank) | 2 |
| Uzbekistan | UZB/DP/14/4158 | 5/25/2015 | 60 |
| Viet Nam | VNM/DP/15/4627 | (blank) | 106 |
| Grand Total | | | 946 |

Possible GF grant reprogramming through NFM
when countries access BDQ donation program

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GDF Perspectives & Challenges (1)

Paradigm shift for SLDs country demand to consider

- SLDs availability not anymore the main barrier for MDR-TB scale-up
 - market dynamics evolving (x 2 in 5 years to 650 M USD?) with more competition
 - but still a low growth on MDR-TB scale-up
 - impact of large MDR country exits from QA market still to monitor
- An increased number of countries placed orders according to targets and not to real number of patients enrolled leading to several orders postponement / cancelation requests recently
- Need for an increased and coordinated TA at country level & partners alignment to improve diagnostics & treatment capacity with a greater role for GDF to play:
 - as a platform for knowledge sharing & best practices dissemination with efficient & supportive tools harmonized with partners
 - to provide sustainable supply chain strengthening
 - to support new products access & uptake strategies
 - to provide market analysis with partners to maintain suppliers engagement



GDF Perspectives & Challenges (2)

Supporting uptake & roll-out of new drugs and diagnostics is key for GDF & partners

- Continuity of diagnostics supply after Expand TB / TB Expert projects ending
- Internalization of diagnostics procurement (in-house)
- Expansion of diagnostics catalogue (portable X-ray / LTBI tests, new tools)
 - paediatric new formulations for rapid country uptake with partners like TB Alliance
 - Bedaquiline & Delamanid
- Monitor & manage the trends for TB drugs demand / supply with partners like CHAI through enhanced Information Systems with partners alignment
- Support access strategies to countries with partners on key successful planning steps for early uptake such as:
 - adoption in guidelines & therapeutic committees
 - regulatory issues & registration
 - sustainable procurement facilities & market dynamics drivers like supply security & costs
 - Integrate MICs shifts from donor funded model to domestic use (financial flexibilities like current Usaid guarantee fund and work towards scalability with partners like BMGF)
 - monitor country uptake and disseminate best practices & lessons learned fostering South to South cooperation



Discussion / Q&A



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