

Webinar

The Implementation of the TRIPS Agreement by Least Developed Countries: Preserving Policy Space for Innovation and Access to Medicines

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Q&A Session with the Participants

16:17:12

Eliangiringa -Office: I will appreciate to receive the link of the recording or the ppt after the symposia. Thank you Prof Kaale Muhimbili University Tanzania

16:17:32

Nigorsulton Muzafarova: Bangladesh may have reached the goal for pharma production in terms of quantity but not the quality. Is quality taken into consideration while considering the targets for TRIPS?

16:19:24

Marcela Vieira: For those interested in learning more about the use of compulsory licensing, please refer to our research synthesis at https://www.knowledgeportalia.org/compulsory-licensing

16:20:45

Bill Jeffery: I am a food health law person. This is a very detailed analysis which will take me some time to process. A petition is now calling for high-income countries to support a World Trade Organization proposal to limit intellectual property rights of pharmaceutical companies to allow the manufacture of vastly cheaper generics to make them more accessible to low-income countries.

https://phm-na.org/2021/02/rich-countries-must-join-the-world-in-supporting-the-trips-waiver-to-end-the-pandemic/

Petition:

https://docs.google.com/forms/d/e/1FAIpQLScwcCd3kNM49GhSHYI0WvOpFfeQUHQ_IT7EDRqHxSVU934_Hw/viewform

16:22:24

Bill Jeffery: Last May, nearly all countries at the World Health Assembly declared vaccination a "global public health good," but many rich countries are now opposing a

WTO proposal to this end. Is there any evidence that vaccine-makers contractually oblige governments to oppose waiver of intellectual property rights?

16:23:15

Susan Adong: governments often determine what drugs are 'essential' especially if faced with choosing between infectious disease and non-communicable ones in tropical settings

16:24:43

Chikosa Banda: Why in your view, have LDCs been slow to domesticate or take full advantage of TRIPS flexibilities to stimulate local production of essential medicines? What opportunities does the COVID-19 pandemic provide in that regard? Does the Pandemic make the domestication of flexibilities more urgent?

16:26:50

Raymond Saner: Question: I noted the suggestion of using very rigorous or stringent patentability/utility requirements. What mitigation mechanism if any, has been considered to reduce the risk of exposure to international investment claims etc. that this approach could trigger?

16:30:25

Trudi Hilton: Many countries lack competent medicines regulatory agencies, let alone pharmaceutical manufacturing plants with the knowledge and skills to make tablets, let alone vaccines. It is not desirable that all countries make their own.....

16:30:36

THOMAS DILLON: Given that Bangladesh has a manufacturing capacity and could make new drugs, would it not be counterproductive to weaken patent protection from local innovators?

16:31:02

Trudi Hilton: Many countries make poor medicines and even fakes....

16:32:17

Trevor Peel: Please remind me what is MNC?

16:32:18

Aleksandr Belinskiy: How many patent applications have filed in Bangladesh by foreign or local pharmaceutical companies and how many of them are granted by DPDT in recent years, if any?

16:32:23

Amishi Panwar: What traditional knowledge database are we discussing with respect to Bangladesh? Are we considering local methods of treating COVID? Are we looking at sharing traditional knowledge systems with modern pharmaceuticals and thereby working on containing the pandemic locally?

16:34:12

Global Health Centre Research, Graduate Institute Geneva: For more information on Sangeeta Shashikant's work on the topic of today's webinar, please see:

https://www.southcentre.int/wp-content/uploads/2014/11/RP56_The-ARIPO-Protocol-on-Patents_ENI.pdf

16:41:20

SENY FAYE: Hello and thanks for this very useful and important event. Very happy, delight to be here with and among you. The best

16:47:58

Raymond Saner: What are the advantage and disadvantages for LDCs to use compulsory agreement clause to set up their own production.?

16:51:11

Raymond Saner: I noted the suggestion of using very rigorous or stringent patentability/utility requirements. What mitigation mechanism if any, has been considered to reduce the risk of exposure to international investment claims etc. that this approach could trigger? IIAs and RTAs often add constraints on compulsory licensing and similar mechanisms.

16:53:20

Eliangiringa –Office: In my experience Many LCDs do not implement the flexibilities because they do not have the capacity (technology know how, and finances)

16:57:39

Global Health Centre Research, Graduate Institute Geneva: You can Subscribe to our mailing list: graduateinstitute.ch/globalhealth View all our upcoming events: graduateinstitute.ch/GHC-events Access research projects and publications: graduateinstitute.ch/globalhealth

16:58:25

Marcela Vieira: For those interested in learning more about the use of compulsory licensing, please refer to our research synthesis at https://www.knowledgeportalia.org/compulsory-licensing

17:01:01

Victor van Spengler: Sangeeta has elaborated on the shock occurring when a country graduates from LDC status, referring to the possibility to postpone this shock in terms of losing TRIPS-flexibilities. How would the panelists look at the mailbox-system for pharmaceutical patents that LDCs need not anymore need to implement? How many LDCs that do not provide patent protections for pharmaceutical products still provide a mailbox for pharmaceutical paternts, even though there is no more obligation to have this? From my experience, LDCs are being "requested" by some heavy-weight industrialised countries and groups of countries to maintain the mailbox-system even though there is no obligation. Thank you for this interesting webinar!

17:02:54

Marissa Vicari: Thank you, this was very engaging and informative!

17:05:29

Aleksandr Belinskiy: Thank you for this interesting webinar!

17:10:40

Eliangiringa -Office: Thank you all the facilitator for Great stuff.