

Allocating 1% of GDP to intellectual property development & innovation in healthcare manufacturing could improve medicine supply & security in SA

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The African continent and the people who live in South Africa, deserve access to improved vaccine-supply and medicine security. Sadly, this won't be possible if we don't strengthen our local healthcare system, in a pan-African effort to spearhead the development of a new public health order for Africa over the next 5-15 years.

This initiative is currently being led, in part, by the Africa CDC and the Partnerships for African Vaccine Manufacturing Framework for Action (PAVM). With South Africa's continued support, the PAVM could meet its ambitious goal of ensuring that 60% of Africa's vaccine demand is supplied by Africa's own vaccine-manufacturing industry by 2040.

The Afrigen mRNA vaccine technology hub in Cape Town already offers a pathway towards making this possible in South Africa. If we can continue to develop the technology we require to manufacture biologics and mRNA based products locally, we can slowly begin to build a pharmaceutical manufacturing framework that is capable of improving medicine security across Africa in the long term.

In order to achieve medicine supply at this level, National Treasury would have to allocate 1% of RSA's GDP towards research, intellectual property development, product discovery and innovation in the healthcare sector. Couple this investment with unconditional support and assistance to South African scientists (with the resources they require to develop their own intellectual property rights), and we can start producing our own active pharmaceutical ingredients (API) and drug substances in SA.

This will remain a critical undertaking if we want to manufacture APIs on a commercial scale in our country. Only then will we be able to build an end-to-end manufacturing framework that works on the continent.

To date, local manufacturers have remained at a competitive disadvantage when it comes to APIs, due to a number of different market forces that have included poor and inefficient production value chains, the high cost of production of medicines and vaccines, as well as poor financing and financing models. Thankfully, a number of international organisations and Development Finance Institutions (DFIs) have heeded the call to improve these circumstances, paving the way for the development of South Africa's pharmaceutical and vaccine manufacturing framework. The time to capitalise on these opportunities is now.

Our country's improved capacity to produce medicine and vaccines locally will also play a leading role in improving the lives of those living with HIV at the global epicentre of the virus. By decreasing our reliance on foreign pharmaceutical imports with a sustainable, pharmaceutical manufacturing framework, we can secure Africa's supply of life-saving ARVs over the long-term.

The Joint United Nations Program on HIV/AIDS (UNAIDS) "95-95-95" targets call for 95% of people living with HIV to be aware of their status, 95% of those aware of their status to be on antiretroviral therapy (ART), and 95% of those on ART to achieve viral load suppression. At present, only 79% of those aware of their status are on ART in South Africa.

Investing (locally) in healthcare facilities with the capacity to manufacture the drug substances and APIs associated with ARV and PrEP treatments will remain a significant undertaking to help South Africa meet these targets, while making medication more affordable and improving security of supply in emerging markets across the continent today.

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