

**NEWSLETTER # 44 – January 2007**  
**PHARMACIENS SANS FRONTIERES COMITE INTERNATIONAL**

**France is finally up to speed on the issue of Unused Medicines**

It was with great relief that PSFCI learned that, on 24 January 2007, the French Senate adopted the amendment—passed by the French National Assembly—to prohibit the use of unused medicines for humanitarian purposes. Many French organisations continued to dump them in the health centres of poor countries, thereby disrupting the implementation of regulated National Drug Policies that ensure the quality of medicines, and supporting an expanding illicit trade in pharmaceuticals. Since 1996, the WHO and its relief and development partners have been calling for the suspension of such shipments (Guidelines for drug donations Art. 5 – [http://whqlibdoc.who.int/hq/1999/WHO\\_EDM\\_PAR\\_99.4.pdf](http://whqlibdoc.who.int/hq/1999/WHO_EDM_PAR_99.4.pdf))

But why allow a period of 18 months to “enable the organisations concerned to locate new supply sources”? These sources have existed for a long time and all humanitarian and development actors know them.

- in the acute phase of an emergency, emergency health kits designed by the WHO and its partners are provided by centres specialising in essential medicines. Each kit contains basic supplies for a population of 10,000 persons for 3 months. In post-emergency situations, coordination committees and the Ministry of Health will help to find out what medicines are normally used by health professionals in the country and who their suppliers are in order not to import medicines unknown to doctors, nurses and patients.

- as for development aid, countries have, since the early 90s, put in place supply and distribution channels for drugs included in a National List of Essential Drugs (NLED) defined by the Ministry of Health, which also develops treatment protocols based on this list. All orders are consolidated at the national level in order to take advantage of economies of scale. As part of development assistance to help countries to be self-sufficient, medicines must be sourced through official channels.

PSFCI welcomes this vote, but would like compliance with the Guidelines for Drug Donations and National Drug Policies of developing countries or countries in a crisis situation to be in the law.

Pharmaciens Sans Frontières Comité International has been struggling for more than 10 years to prohibit the use of unused medicines in humanitarian aid programmes and development projects by pressing the successive ministries of health to ensure that France applies the WHO Guidelines for Drugs Donations developed in cooperation with the major international agencies active in humanitarian relief, including PSFCI.

Incorporating these Guidelines into the law would provide authority to require all stakeholders to ensure that national drug policies in recipient countries are complied with. Compliance with these drug policies is essential if we want the population of these countries to have access to quality essential drugs. To undermine these policies by sending donations is to condemn millions of people to death.

PSFCI commends the members of the French National Assembly and the French Senate for voting and adopting this amendment, but it calls for more focus on the proposed solutions for French pharmaceutical assistance to developing countries. The solution is not in the donation of medicines, be they unused or not, but in the support to the National Drug Policies of these countries ensuring

geographical and financial access to quality medicines for the population through secure and reliable supply and distribution systems; it is also in the support to the financial viability of community health centres, in training sessions and in the transfer of responsibilities to local health systems stakeholders.

## EVENTS

### MSF's petition:

*“Millions of people around the world today rely on affordable medicines produced in India. India’s law contains elements that help put people before patients, but **NOVARTIS** is taking the Indian government to court to force a change in the law. Neither Novartis, nor any company, should stand in the way of people’s right to access the medicines they need. **We urge Novartis to DROP THE CASE against the Indian government.**”*

To sign the petition online: [http://www.msf.org/petition\\_india/usa.html](http://www.msf.org/petition_india/usa.html)

## MISSIONS

### Democratic Republic of the Congo

This 3-year programme involves the setting up of a procurement and distribution network for essential generic drugs and medical supplies for the 1,922,863 people living in the health district of Tanganyika. It is funded by the 9th EDF with 2,499,990 euros in the framework of the Linking Relief, Rehabilitation and Development (LRRD) process.

Three pharmaceutical depots linked to CADMETA are to be established in Moba, Manono and Kongolo. Texts will be developed and given juridical validation prior to the transfer of responsibilities to local stakeholders who will be trained to ensure the most effective operation of the network.



*In compliance with the French data protection act in the law of 6 January 1978 (CNIL), you have the right to access and correct information about yourself. You can exercise this right by writing to PSF-CI Service informatique 4 Voie Militaire des Gravanches 63100- Clermont-Ferrand (France).*