MedAccess

Impact case studies

October 2024

Contents

We live in a golden age of medical science, but every day, hundreds of millions of people miss out on vaccines, diagnostics, treatments, and other innovations that protect against diseases. We are using the power of innovative finance to change this.

MedAccess develops agreements tailored to the needs of patients, our partners and the market. These partnerships ensure that vital products reach the people who need them today while maintaining affordable prices for years to come.

MedAccess collaborates with some of the most innovative organisations and businesses in global health—including pharmaceutical companies, civil society, and academic institutions. Each plays its part, from research and innovation to manufacturing and distribution. By working with a diverse range of partners, it is possible to secure win-win outcomes where everyone achieves their goals, and patients gain access to the medicines they need.

I'm proud of what we have accomplished together. Through our combined expertise, MedAccess' partnerships have reached more than 539 million people in over 110 countries, enabling manufacturers to scale up while saving purchasers more than $108 million. However, we still have a long way to go to ensure everyone, everywhere, has access to the products they need to live longer, healthier lives. We look forward to strengthening this spirit of collaboration to go even further in the years to come.

These case studies capture the essence of the MedAccess story and demonstrate the power of innovative finance. If you'd like to learn more, please get in touch.

Warm wishes

Michael Anderson

manderson@medaccess.org

Why we exist

More than two billion people are unable to access the medical products they need

What we do

We broker and finance agreements that lower prices and accelerate access to medical innovations

How we do it

We provide financial products such as volume guarantees and procurement guarantees

British International Investment

Our $200 million capital, provided by British International Investment, enables us to impact the lives of millions of people.

Since 2017, our agreements have helped

539 million people...

...to access medical innovations

in over 110 countries

HIV | Syphilis

Dual rapid diagnostic tests for HIV and syphilis

2021 - present

Impact to end of 2023

219,000
pregnant women with syphilis identified

39,500
stillbirths averted

29,200
cases of congenital syphilis averted

$2.9m
direct savings for procurers

21%
reduction in average market price

The challenge

Pregnant women with syphilis are 52% more likely to suffer adverse birth outcomes such as stillbirth, neonatal death, prematurity and low birth weight. UNICEF estimates that 11% of stillbirths in sub-Saharan Africa are attributable to syphilis. Pregnant women who are diagnosed with syphilis can be treated with low-cost antibiotics. However, without screening, many women do not know they have the illness. While antenatal testing rates for HIV are above 95% in many low- and middle-income countries (LMICs), they remain around 50% for syphilis. Using one diagnostic test for both, known as a dual HIV/syphilis rapid diagnostic test, is an efficient way to screen women for both illnesses in one clinic visit, but can be more expensive than single tests for HIV.

Our response

MedAccess' volume guarantee for SD Biosensor (launched in 2021) enabled the supplier to offer its dual test for less than $1 per test – the lowest ever price for an HIV/syphilis rapid diagnostic test, and close to the pricing for a single HIV test. This, together with implementation support from the Clinton Health Access Initiative (CHAI), has enabled countries to scale up procurement and accelerate the rollout of the dual test. For example, by the end of 2023, more than 25,000 health facilities in Nigeria offered dual tests as part of a national rollout. This helped to increase Nigeria's syphilis testing rate from 24% to 31%.

By the end of 2023, the test had helped to avert an additional 28,900 stillbirths and miscarriages in LMICs, bringing the current total to 39,500. We estimate that, over the course of the guarantee, more than 50,000 stillbirths and miscarriages will be averted. Our guarantee supports the expansion of the dual test market. A total of 44 LMICs have procured guarantee-supported tests. Additionally, a number of smaller countries not originally projected to procure have benefitted from the reduced price.

HIV

HIV self-tests

2023 - present

Impact to end of 2023

482,000
additional people tested for HIV

7,800
additional people living with HIV starting treatment

$397k
direct savings for procurers

33%
average price reduction

The challenge

People living with HIV need daily treatment to stay healthy. However, around 5.5 million of the 39 million people living with HIV globally do not know their status, meaning they do not seek treatment and this can lead to onward transmission of the virus. Although HIV testing has increased substantially over the past 20 years, many people find it difficult to access testing facilities, often because of where they live or because they may face stigma or discrimination. Self-testing enables people to test in private and seek medical help depending on the result. For people at high risk but not living with HIV, it is also the first step in accessing pre-exposure prophylaxis (PrEP). However, widescale adoption of HIV self-testing has been hindered by prevailing high prices due to a lack of competition.

Our response

MedAccess provided a volume guarantee to Wondfo, enabling the company to make its HIV self-test available for $1. Working with CHAI, the partners aim to increase availability and access to the test in 140 eligible countries. Furthermore, the $1 price will allow health officials to open up new ways of using the test, for example, monitoring during PrEP or replacing risk-based screening tools in health facilities.

The agreement became active in June 2023, and by the end of the year, an estimated 482,000 additional people had been tested for HIV using tests supported by our volume guarantee. We estimate that, over the course of the agreement, this number will rise to 8.1 million. Those who return a positive self-test should seek a confirmatory test with a qualified health worker and start treatment as soon as possible. We estimate that by the end of 2023, around 7,800 people had done so.

The price of $1 per test is 33% below the next lowest-priced product and 50% lower than the most widely used product. In 2023, Uganda became the first country to adopt HIV self-tests under the terms of this guarantee. By helping Wondfo make its self-test the most affordable WHO-prequalified test on the market, MedAccess is contributing towards the first of UNAIDS' 95-95-95 global HIV targets: for 95% of people living with HIV to know their status.

HIV

Viral load testing

2018 - 2022

HOLOGIC®

CLINTON HEALTH ACCESS INITIATIVE

Impact

932,000
people living with HIV who were not virally supressed identified

457,000
patients switched to second-line HIV treatment

$45m
direct savings for procurers

The challenge

Viral load testing is core to HIV care. It indicates whether treatment is controlling the levels of virus in a person's body. People living with HIV whose viral load is suppressed have the best chance of living longer, healthier lives with virtually no risk of onward transmission of the virus. However, in July 2022, UNAIDS reported that only 68% of all people living with HIV were virally suppressed. There are also significant differences between men and women, with 74% of women virally suppressed, compared to 65% of men. Countries have been cautious about investing in viral load testing equipment due to high and non-transparent prices with hidden costs, poor instrument servicing and maintenance, and uncoordinated and under-resourced patient sample transport networks.

Our response

Between 2018 and the end of 2022, MedAccess provided a volume guarantee to increase access to viral load testing via Hologic's Panther® platform. The platform provides viral load testing for HIV, viral hepatitis and, since 2020, COVID-19. It also provides diagnostic testing for human papillomavirus (HPV), the leading cause of cervical cancer. Our guarantee with Hologic set a per patient test ceiling price of $12. It was also the first all-inclusive price, covering other essentials such as installation, reagents and maintenance. Hologic's commitment helped shift the market – procurers in high HIV burden countries in Africa now require all-inclusive pricing. By the end of 2022, the guarantee, supported by an implementation partnership with CHAI, increased access to tests run on the Panther® platform and helped more than 450,000 people switch to second line HIV treatment as results showed their first line treatment was not suppressing their viral load.

Tuberculosis

Treatment for drug-resistant TB

2022 - present

VIATRIS™

TB Alliance

Impact to end of 2023

9,200
additional patients with favourable outcomes

7,900
severe adverse events averted as patients switch from current standard of care

$7m
direct savings for procurers

The challenge

Tuberculosis (TB) affects people in every country. It has been the world's most deadly infectious disease over the last decade, claiming 1.3 million lives in 2022 alone. TB is preventable and curable but is increasingly resistant to first-line treatments. The global spread of drug-resistant TB (DR-TB) is a public health crisis. The World Health Organization (WHO) estimates that 410,000 people were living with DR-TB in 2022 and approximately 175,000 received treatment. The latest data shows that of those treated in 2020, only 63% were treated successfully. This is partly because previously recommended treatment options require patients to take as many as 20 pills per day for up to 20 months. Some of the pills have toxic side effects, making patients feel even more unwell and reducing the likelihood of finishing the treatment course. In 2022, the WHO recommended a six-month treatment regimen, known as BPaLM, that requires patients to take only four or five pills per day. Trials found the regimen to be more than 89% effective in successfully treating patients with multidrug-resistant TB. However, the regimen includes newer TB drugs, which were more expensive than those previously used, meaning procurers and governments faced difficult decisions in adopting a new regimen given limited budgets. Price reductions were urgently needed to accelerate access and facilitate scale-up of the BPaLM regimen.

Our response

MedAccess is working with Viatris and TB Alliance to increase access to pretomanid (the 'Pa' in BPaLM). In December 2022, the partners announced that Viatris agreed to reduce the price of pretomanid by 34% in more than 130 LMICs. This price reduction brings the price of BPaLM much closer to that of previously recommended regimens, allowing countries to switch to BPaLM more easily. This price reduction, coupled with a price reduction on bedaquiline (the 'B' in BPaLM) in August 2023, reduced the cost of BPaLM to below $500 per six-month patient course.

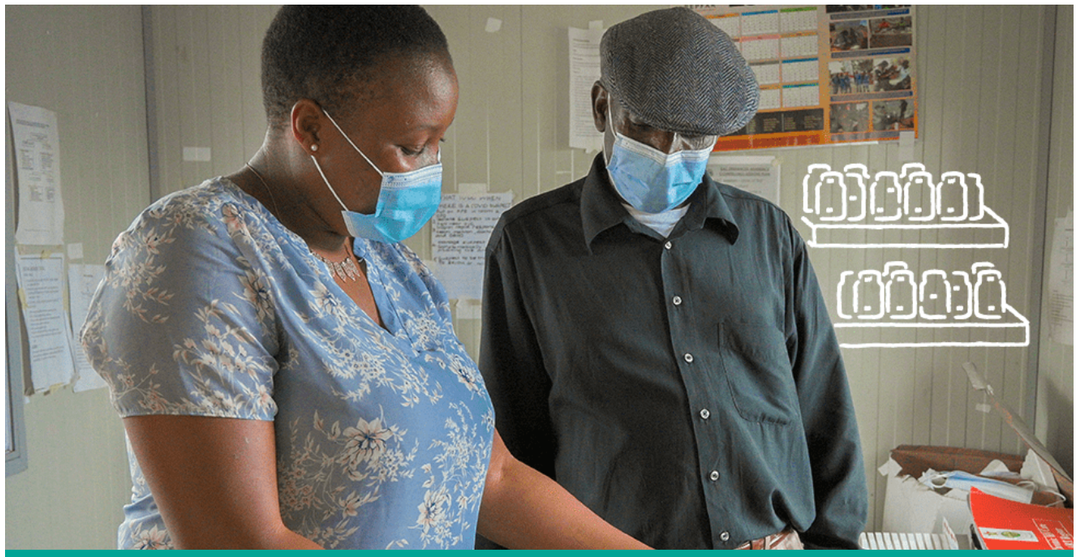
We estimate the pretomanid price reduction has enabled around 9,200 additional patients to start BPaLM, giving them more favourable treatment outcomes. This switch in treatment regimen has averted an estimated 7,900 severe adverse events that would likely have occurred if a patient had taken older regimens. By the end of 2023, more than 65 countries had placed orders for pretomanid and we estimate procurers have saved $7 million due to the price reduction.

Past agreement

Tuberculosis

3HP preventive treatment for latent TB

2021 - 2023



Impact

642,000
additional people completing treatment

1.3m
approximate cases of latent TB in household contacts averted

161,000
hospitalisations due to treatment side effects averted

32%
average price reduction

$29m
direct savings for procurers

The challenge

In 2022, TB claimed the lives of 1.3 million people, including 167,000 people living with HIV. Latent TB is often cited as the reservoir of the TB epidemic. Worldwide, an estimated 1.7 billion people are living with latent TB, usually without symptoms. Without treatment, 5-10% of people with latent TB will develop active TB in their lifetimes, with children under five and people living with HIV at higher risk.

In the past, treatments to tackle latent TB have required patients to take multiple pills daily for up to 36 months. The pills often have unpleasant and toxic side effects. Newer, short-course treatments, which can be taken over 1-3 months, are more patient-friendly. They have better completion rates – reducing the risk of increasing resistance to TB treatment – and are less likely to cause liver damage. However, they are more expensive. The nascent market for short-course treatment was dominated by one supplier, which had indicated it was looking to exit the market due to limited uptake.

Our response

MedAccess provided a volume guarantee to Macleods for its three-month latent TB treatment (known as 3HP). Under the agreement, Macleods agreed to scale-up production capacity to 1.5 million patient courses in 2021 and looked to increase production to meet anticipated demand. Our agreement secured Macleods' commitment to make 3HP available initially at $15 per course with a step down to $14.25, setting a low-cost price benchmark for new competitors. When a new supplier subsequently entered the market, it did so at the same price – driving greater competition and improving supply sustainability. In 2023, the Global Drug Facility, in collaboration with USAID and PEPFAR, lowered the price to $9.99 per course – a 30% reduction.

This volume guarantee ended in December 2023, having supported access in over 52 countries. It helped to secure supply of this vital treatment, improve the competitiveness of the market, and lay the foundations for further price reductions. Our agreement complemented broader interventions made through Unitaid's IMPAACT4TB project, led by The Aurum Institute with technical assistance from CHAI.

Active agreement

Malaria

G6PD testing for *P. vivax* malaria treatment

2022 - present

Impact to end of 2023

9,000
additional people on any treatment

20,300
malaria relapses averted

$369k
direct savings for procurers

The challenge

The *P. vivax* malaria parasite caused an estimated 6.9 million cases of malaria in 2022. Complete treatment requires elimination of the parasite from the blood as well as the liver. However, doctors are wary of prescribing the most effective treatments (7 or 14-day regimen primaquine, or a new single-dose treatment with tafenoquine) for liver stage infection because the treatments can cause severe anaemia in people with G6PD enzyme deficiency.

In places with no access to testing for G6PD enzyme deficiency, *P. vivax* malaria patients are usually not prescribed primaquine or tafenoquine, or are prescribed an eight-week regimen of primaquine. However, patients often stop taking the pills when they start to feel better, leading to reinfection as the parasite persists in their livers. These reinfections are slowing progress towards *P. vivax* malaria elimination. Lack of G6PD testing is estimated to contribute to global costs of $135 million from identifying and treating patients.

Due to the relatively small size and uncertainty of the G6PD testing market, some suppliers are unwilling to produce the test. In 2021, the only remaining supplier, SD Biosensor, faced issues such as uncertain demand which threatened continued production of the test.

Our response

MedAccess provided a volume guarantee to SD Biosensor to reduce the risks of market uncertainty, resulting in greater supply security and enabling the supplier to lower the price of its G6PD testing analysers and kits. Working with PATH, we are increasing access to G6PD testing in countries with high *P. vivax* malaria burden. As most patients do not have G6PD enzyme deficiency, this agreement is helping them access the most effective treatment to ensure the parasite is completely eliminated from the body.

In 2023, Brazil became the first malaria-endemic country to adopt G6PD testing and single-dose tafenoquine to tackle *P. vivax* malaria. Although tafenoquine is awaiting a recommendation from the WHO, the organisation has recognised it as an important potential treatment for *P. vivax* malaria.

Our guarantee helps the G6PD testing market remain active with a stable supply of G6PD tests and more competitive pricing. Ultimately, increased access to G6PD testing is essential for the elimination of *P. vivax* malaria.

Malaria

RTS,S: the world's first malaria vaccine

August - December 2021

The challenge

The RTS,S malaria vaccine has the potential to prevent the deaths of hundreds of thousands of children. The vaccine received regulatory approval from the European Medicines Agency in 2015 following three decades of development by GSK, with support from global health funders. However, due to the complex nature of the disease, the vaccine profile and the requirement for a new four-dose schedule, the WHO required a multi-country pilot implementation programme before providing a recommendation for large-scale use. Without a policy recommendation from the WHO and a positive funding decision from Gavi, the Vaccine Alliance, there was a risk to continued production. A halt in production could have significantly delayed country rollouts following positive policy and funding decisions.

Our response

MedAccess, Gavi and GSK agreed an innovative financing arrangement to ensure the continued production of RTS,S bulk antigen. The agreement saw Gavi provide funding to GSK for ongoing production ahead of policy and financing decisions.

MedAccess provided Gavi with a guarantee to replenish its funds in the event of a negative policy or funding decision. In October 2021, WHO recommended RTS,S for broad use among children in sub-Saharan Africa and Gavi agreed to open a funding window at its Board meeting two months later.

Impact

MedAccess' support for the continued production of RTS,S antigen ahead of key policy and funding decisions will enable more children to be vaccinated against malaria. With visibility on production volumes, Gavi was able to invite countries to apply to introduce the vaccine shortly after securing Board approval, with applications reviewed in early 2023. Immunisation programmes using vaccines supported through the MedAccess-GSK-Gavi agreement began in early 2024. Children will receive the vaccine in their routine immunisation schedule alongside other childhood vaccines such as pneumococcal and pentavalent. If production had been halted and introductions delayed, millions of children may have been at risk of severe malaria having missed out on the vaccine as part of their routine shots.

Malaria

Next-generation mosquito nets

2019 - 2022

Impact: Our guarantee came to a close at the end of 2022. However, some nets purchased during 2022 were delivered during 2023. Nets delivered by the end of 2023 will result in:

15.6m
cases averted (additional to standard nets)

36,200
deaths averted (additional to standard nets)

$34.2m
in savings to health systems due to averted cases and treatment

122,000
severe cases averted

19 countries
ordering Interceptor® G2 nets

$24m
direct savings for procurers

The challenge

Malaria claimed 608,000 lives in 2022, 95% of whom lived in sub-Saharan Africa. Children under five accounted for 80% of the malaria deaths in Africa. Despite progress in recent decades, the malaria response faces the challenge of increasing mosquito resistance to the pyrethroid insecticides in standard nets. Of 38 countries reporting the intensity of pyrethroid resistance to the WHO, 27 reported high intensity resistance across 293 sites. Millions more people are at risk of malaria as the nets become less effective in high resistance areas.

While the price of standard nets has reduced substantially over the past decade, next-generation nets, which are effective against resistant mosquitos, are more expensive. Many countries were cautious about buying next-generation nets while clinical trials in Tanzania and Benin were still underway.

Our response

Between 2019 and 2022, MedAccess teamed up with the Bill & Melinda Gates Foundation to provide a four-year volume guarantee to BASF to increase access to Interceptor® G2 mosquito nets, including through the New Nets Project administered by the Innovative Vector Control Consortium. Interceptor® G2 is a next-generation net combining pyrethroids with chlorfenapyr, an active ingredient new to public health. It is more effective than standard pyrethroid-only nets in areas where mosquito resistance is prevalent. BASF committed to higher production volumes, while offering price reductions of around 40% for at least 35 million nets. By the end of 2022, more than 41 million Interceptor® G2 nets had been distributed to 16 countries in sub-Saharan Africa, protecting more than 73 million people.

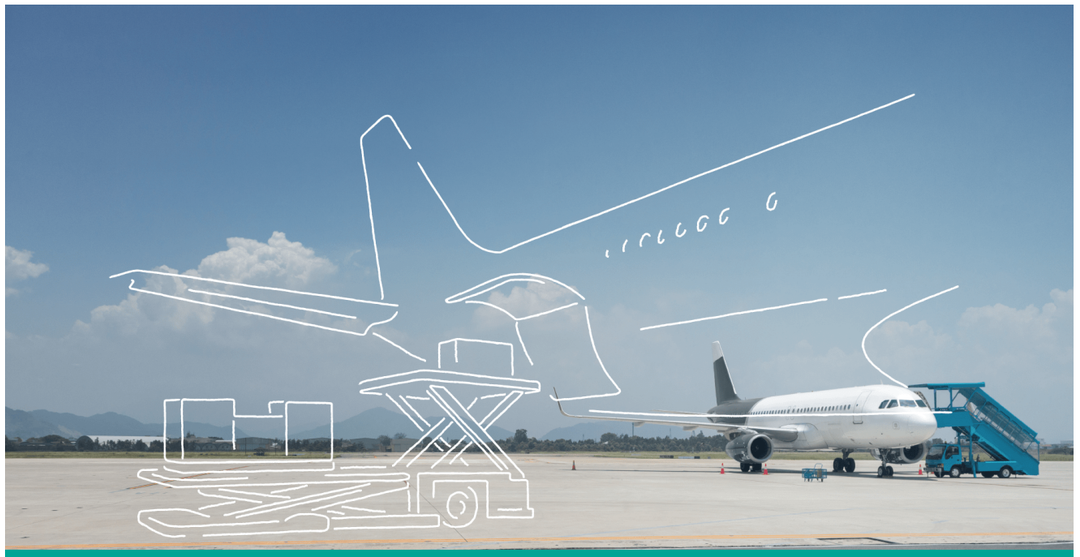
In March 2023, following highly successful trials in Benin and Tanzania that showed Interceptor® G2 nets are significantly more effective at preventing malaria cases than standard pyrethroid-only nets, the WHO issued a strong recommendation for their use. Our guarantee enabled people to benefit from the nets ahead of the recommendation and provided BASF with confidence to maintain high levels of production to meet anticipated demand.

Past agreement

COVID-19

COVID-19 supplies and other essential health products

2020 - 2022



Impact

7 months
faster delivery on products such as childhood vaccines compared to if countries did not order through UNICEF

9.8m
diagnostics and equipment

456m
COVID-19 vaccines and other childhood vaccines

2.8bn
syringes and safety boxes for safe injection

The challenge

The first wave of COVID-19 led to unprecedented demand for medical supplies, which fuelled price volatility and supply shortages as manufacturers battled to meet demand. Countries with greater purchasing power were better able to absorb higher prices and place large orders, while low- and middle-income countries were forced to the back of the queue for essential supplies. In addition, COVID-19 negatively affected routine health services such as immunisation and maternal and child health provision. Major procurers were able to negotiate lower prices for high volume COVID-19 orders, but they were only able to place orders on behalf of countries when funding or finance was in place. This threatened to leave lower-income countries waiting months for vital supplies.

Our response

MedAccess provided a $50 million procurement guarantee to the UNICEF Supply Division. The guarantee enabled UNICEF to procure essential COVID-19 and non-COVID-19 supplies on behalf of countries. Procuring through UNICEF enabled countries to expedite delivery of COVID-19 supplies and access the lower prices negotiated by UNICEF, which is the largest purchaser of health supplies in the world. The guarantee initially ran from July 2020 for one year. It was extended in March 2021 and expired on 31 December 2022. As the urgent need for COVID-19 products reduced, the guarantee supported UNICEF's procurement of other essential health products, including childhood vaccines, on behalf of countries.

Supporting information

Photography credits

Front cover: © UNICEF / Washington Sigu, Kenya – Mother Idah Achieng holds and kisses her six-month-old son, Adrian Steve Biko, at Kisumu County Referral Hospital. Adrian has just been vaccinated against malaria.

6: © Bloomberg via Getty Images / Guillem Sartorio, South Africa – An empty waiting room inside a clinic in the Alexandra township of Johannesburg.

7: © Wondfo – A patient uses a HIV self-test kit.

8: © Hologic / ITN Productions – A laboratory technician shows colleagues how to use the Panther® machine.

9: © TB Alliance / Brendan Hoffman, Ukraine – A patient with multidrug-resistant TB accessing treatment.

10: © CHAI / Eugene Ncube, Zimbabwe – CHAI staff member Maka Gombe visits with patient volunteers in Harare to discuss their 3HP medication regimen.

11: PATH / Conner House, Vietnam – A healthcare worker using the G6PD testing device.

12: © Adobe Stock / neznamov1984 – Bottles on the bottling line of the pharmaceutical plant.

13: © BASF, Namibia – Mother and baby under a mosquito net.

14: © Adobe Stock / Svetlana Radayeva – Aeroplane landed on airfield.

15: © UNICEF / Washington Sigu, Kenya – Health worker Jeniffer Achieng administers a dose of malaria vaccine to six-month-old Adrian Steve Biko, who is held by his mother, Idah Achieng.

MedAccess

For more information, please contact

info@medaccess.org

MedAccess
84 Eccleston Square
London
SW1V 1PX

Registered in England no 11080032