International Federation of Pharmaceutical Manufacturers & Associations



UNODC Conference on Fraudulent Medicines

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Outline



- 1. Our engagement
- 2. Current challenges in fighting counterfeit medicines
- 3. Case studies
- 4. Conclusions

Our Engagement



- Anti-counterfeiting is an industry priority
 - ✓ IFPMA Ten Principles
 - Partnerships
 - Policy research
 - Awareness raising

Support to WHO initiatives

Our Ten Principles





The IFPMA Ten Principles on Counterfeit Medicines

 Medicine counterfeiting is first and foremost a crime against patients. By deliberately and decetfully attempting to pass themselves off as something that they are not, namely, genuine approved medicines, counterfeit medicines pose a global public health risk, leading to resistance to treatment, illness, disability and even death.

Counterfeit medicines threaten the full spectrum of legitimate medicines. They can be faisified versions of patented medicines, generic medicines or over-the-counter medicines and exist in all therapeutic areas (even traditional medicine). They range from medicines with no active ingredients to those with dangerous adulterations.

3. Patents have nothing to do with counterfeiting and counterfeiting has nothing to do with patents. Purely commercial patent infiningement disputes which may arise in the ordinary course of business should not be confused with disputes related to the fraudulent production of falsified versions of genuine approved medicines.

4. All substandards are not counterfeits. A medicine which is approved and legally manufactured, but does not meet all quality criteria, is substandard and may pose a significant health risk, but should not be regarded as counterfeit. However, all counterfeits are, by their nature, at high risk of being substandard.

 A medicine that is authorized for marketing by one regulatory authority but not by another should not be regarded as counterfeit on these grounds alone in the latter's territory.

6. Government regulatory and enforcement authorities must be fully vested with the proper power and adequately resourced to fight counterfeits. While the incidence of counterfeit medicines occurs in both developed and developing countries, the problem is more prevalent in countries where regulatory oversight and enforcement are weak.

Stopping the international trade in counterfeit medicines is vital. Countries should be encouraged to adopt border measures that will stop trade in medicines that do not contain the ingredients that they purpor to contain.

8. All stakeholders across the pharmaceutical supply chain must be made aware of the health threats posed by counterfeit medicines and collaborate. Public and private organizations, national regulatory and enforcement agencies, health professionals, publicits, research-based and generic pharmaceutical manufacturers, drug distributors, wholesalers and retailers. All play a role in preventing counterfeits from reaching patients.

9. Global cooperation is needed. Because counterfeiting does not recognize borders, the International Medical Products Anti-Counterfeiting Task Force (IMPACT), which is the sole global initiative laumed by regulation to specifically focus on combating outerfeiting of medical products should be supported. IMPACT brings together the expertise of medicines' regulatory agencies, enforcement agencies, healthcare providers and the private sector in suringe global platform.

10. The leadership of the World Health Organization is crucial. Patients need to be protected worldwide. As the leader on global health matters, and particularly with respect to threats to public health in developing countries, the World Health Organization has a key role to play. The WHO is currently the home of the IMPACT secretariat.

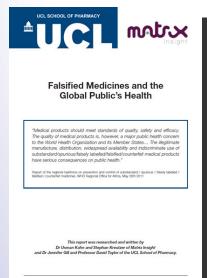
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Federation of Pharmaceutica Manufacturers Ch. Louis-Dunant 15 Tel: +41 22 338 32 P.O. Box 195 Fax: +41 22 338 32 1211 Geneva 20 www.ifpma.org Medicine counterfeiting is first and foremost a crime against patients

- Counterfeit medicines threaten the full spectrum of legitimate medicines
- Patents have nothing to do with counterfeiting and counterfeiting has nothing to do with patents
- Global cooperation is needed
- WHO leadership is critical

Our Recent Initiatives







call on appropriate international organizations and governments, including the governments of the ted States, EU, EU member states, and Japan, to sustain oversight and enforcement, in accordance with lonal lexistation, researdine illegical sales of medicine on the Internet and to Focus more closely on the





report:
Falsified
medicines
and global
public's
health

Position on Internet Sales and Access to Safe Medicines

FIP-IFPMA
Document:
The threat of false friends

Workshop: The threat of false friends Fake medicine -Imminent Risks to Global Health

Current Challenges



- Detection of counterfeit medicines requires control of supply chain and enhanced regulatory capacity
- b. Lack of global data and health impact assessment require regular reporting from competent authorities and other organizations
- Robust and adapted legislative and regulatory frameworks require continuous enforcement efforts at national and international level

Case Studies



- a. Scope: global, multiple therapeutic areas, patented and generic medicines
- b. Illegitimate Internet sales
- c. Unregulated API
- d. Legislative challenges: Jurisdictional alignment, statutory limitations, domestic resource constraints
- e. Opportunities: New technology & tools, growing awareness and actions, shared commitment to patient safety

Conclusions



Robust
Regulatory
Framework
and
Enforcement

Education and Awareness Raising

Capacity Building International multi-sector Cooperation



Thank you