The Hon. Dr Pakishe Aaron Motsoaledi  
The Minister: National Department of Health  
Private Bag X399, Pretoria, 0001  
Fax: 021 465 1575 / 012 325 5526  
Email: masukm@health.gov.za

2 March 2010

Dear Minister Motsoaledi

RE: DELAY IN REGISTRATION OF ANTIRETROVIRALS BY MEDICINES CONTROL COUNCIL

The Southern African HIV Clinicians Society (the Society) is an association of over 16 000 health care workers in the field of HIV, most of whom reside in South Africa. The Society has been instrumental in developing independent HIV treatment guidelines that inform the care of the vast majority of patients in South Africa, as well as advising on the Department of Health guidelines.

As President of the Society, I have been approached several times in the last few weeks by concerned stakeholders, including HIV researchers, government health officials, international aid agencies, donors, pharmaceutical companies and activists, expressing intense frustration with the MCC's slow
registration process of antiretrovirals. Several of these individuals have indicated to me that they are considering resorting to legal action, as all other remedies, including repeated correspondence, have failed to draw a response or an explanation from the MCC.

HIV remains an absolute public health emergency for South Africa, with almost half of all deaths due to the disease. South Africa has over a million patients on antiretrovirals in the state and public sector, by far the largest in the world. The new Department of Health HIV treatment guidelines strive to improve the selection of antiretrovirals and the tender process, and the private sector is seeking to expand access to drugs for people with resistance. In both these cases, the single obstacle to getting affordable access to medicines appears to be the MCC registration process, as some dossiers have been before the MCC for years.

We ask that the MCC prioritise the following drugs immediately:

For adults:

- All fixed dose combinations, especially the combination of tenofovir, emtricitabine (or lamivudine) and efavirenz, which will be the state first line antiretroviral and the most popular initial antiretroviral combination in private practice
- Generic versions of antiretrovirals, especially of tenofovir and paediatric abacavir
- Darunavir
- Raltegravir
- Etravirine
- All variations of existing registered antiretrovirals that require simple dossier changes

For children:

- Fixed dose combinations, as above, including abacavir/lamivudine and lopinavir/ritonavir (including the newer heat stable formulations)
- Generic abacavir
In addition, drugs to treat tuberculosis and other common opportunistic infections should be fast-tracked.

If the above is not done immediately, the government will be unable to issue a competitive tender for fixed dose combinations in April, further delaying patient access to drugs which are easier to take and require less pharmacy time. In addition, competition between pharmaceutical companies is compromised, with managed care organisations, medical aids and private patients having to pay more than they should.

I am aware that the MCC is dealing with a backlog, but the fact that it appears to be blocking access to lifesaving medication is unacceptable. I suggest you instruct your acting DG to place this issue on the next MCC meeting’s agenda, scheduled for 19 March 2010, for immediate attention and action. I would appreciate a formal and urgent response from the MCC after that meeting.

Regards

[Signature]

Professor Francois Venter
President: Southern African HIV Clinicians Society

Cc:
Professor Peter Eagles
Chairperson: Medicines Control Council
Per email: peagles@uwc.ac.za / peagles@mweb.co.za

Ms Mandisa Hela
Registrar: Medicines Control Council
Per fax: 012 312 3105
Hon. Dr Molefi Sefularo  
Deputy Minister: Department of Health  
Per fax: 012 320 3835 / 021 461 9203

Dr Yogan Pillay  
Deputy Director General Strategic Health Programmes: Department of Health  
Per email: pillay@health.gov.za

Dr Thobile Mbengashe  
Chief Director HIV and AIDS, STI: National Department of Health  
Per email: MbengT@health.gov.za

Dr Nonhlanhla Dlamini  
Acting Director CCMT, HIV & AIDS: National Department of Health  
Per email: DlamiR@health.gov.za

Dr Anban Pillay  
Director Pharmaceutical Economic Evaluations: National Department of Health  
Per fax: 012 312 0051

Mr Jonathan Berger  
Senior Researcher: AIDS Law Project  
Per email: Bergerj@alp.org.za

Kirti Narsai  
Head: Scientific and Regulatory Affairs, Pharmaceutical Industry Association of South Africa  
Per fax: 011 805 5105/9

Board of Healthcare Funders  
Per fax: 011 880 8798
Dr Skhumbuzo Ngozwana  
Chairperson: National Association of Pharmaceutical Manufacturers  
Per fax: 086 529 4245

Professor Ian Sanne  
Director: Clinical HIV Research Unit, University of the Witwatersrand  
Per email: isanne@witshealth.co.za

Professor James McIntyre  
Executive Director: Anova Health Institute  
Per email: mcintyre@pixie.co.za

Professor Andy Gray  
Dept of Therapeutics and Medicines Management, University of KwaZulu-Natal  
Per email: Graya1@ukzn.ac.za

Dr Stella Anyangwe  
Country Representative: WHO  
Per email: anyangwes@za.afro.who.int

Mr Vishal Brinjal  
Country Director: Clinton Health Access Initiative  
Per email: vbrijlal@clintonfoundation.org

Ms Catherine Sozi  
Country coordinator: UNAIDS  
Per email: SoziC@unaids.org

Mr Mark Heywood  
Deputy Chairperson: SANAC  
Per email: heywoodm@alp.org.za
Professor Helen Rees
Chairperson: SANAC Programme Implementation Committee
Per email: hrees@rhru.co.za