

GLOBAL ACCELERATOR FOR PAEDIATRIC FORMULATIONS 2022-2024 STRATEGY

**Shaping the global
innovation and access
landscape for better
paediatric medicines**



**GLOBAL ACCELERATOR
FOR PAEDIATRIC FORMULATIONS
2022-2024 STRATEGY**

**Shaping the global
innovation and access
landscape for better
paediatric medicines**



Shaping the global innovation and access landscape for better paediatric medicines

ISBN 978-92-4-004464-7 (electronic version)

ISBN 978-92-4-004465-4 (print version)

© World Health Organization 2022

Some rights reserved. This work is available under the Creative Commons Attribution-NonCommercial-ShareAlike 3.0 IGO licence (CC BY-NC-SA 3.0 IGO; <https://creativecommons.org/licenses/by-nc-sa/3.0/igo>).

Under the terms of this licence, you may copy, redistribute and adapt the work for non-commercial purposes, provided the work is appropriately cited, as indicated below. In any use of this work, there should be no suggestion that WHO endorses any specific organization, products or services. The use of the WHO logo is not permitted. If you adapt the work, then you must license your work under the same or equivalent Creative Commons licence. If you create a translation of this work, you should add the following disclaimer along with the suggested citation: "This translation was not created by the World Health Organization (WHO). WHO is not responsible for the content or accuracy of this translation. The original English edition shall be the binding and authentic edition".

Any mediation relating to disputes arising under the licence shall be conducted in accordance with the mediation rules of the World Intellectual Property Organization (<http://www.wipo.int/amc/en/mediation/rules/>).

Suggested citation. Shaping the global innovation and access landscape for better paediatric medicines. Geneva: World Health Organization; 2022. Licence: [CC BY-NC-SA 3.0 IGO](https://creativecommons.org/licenses/by-nc-sa/3.0/igo).

Cataloguing-in-Publication (CIP) data. CIP data are available at <http://apps.who.int/iris>.

Sales, rights and licensing. To purchase WHO publications, see <http://apps.who.int/bookorders>. To submit requests for commercial use and queries on rights and licensing, see <https://www.who.int/copyright>.

Third-party materials. If you wish to reuse material from this work that is attributed to a third party, such as tables, figures or images, it is your responsibility to determine whether permission is needed for that reuse and to obtain permission from the copyright holder. The risk of claims resulting from infringement of any third-party-owned component in the work rests solely with the user.

General disclaimers. The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of WHO concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

The mention of specific companies or of certain manufacturers' products does not imply that they are endorsed or recommended by WHO in preference to others of a similar nature that are not mentioned. Errors and omissions excepted, the names of proprietary products are distinguished by initial capital letters.

All reasonable precautions have been taken by WHO to verify the information contained in this publication. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall WHO be liable for damages arising from its use.

Contents

Why GAP-f?

Children do not have equitable access to medicines adapted to their needs

1

GAP-f: a unique and concerted response to a fragmented landscape and critical gaps

10

The GAP-f 2022–2024 Strategy: from priority setting to targeted action for greater impact

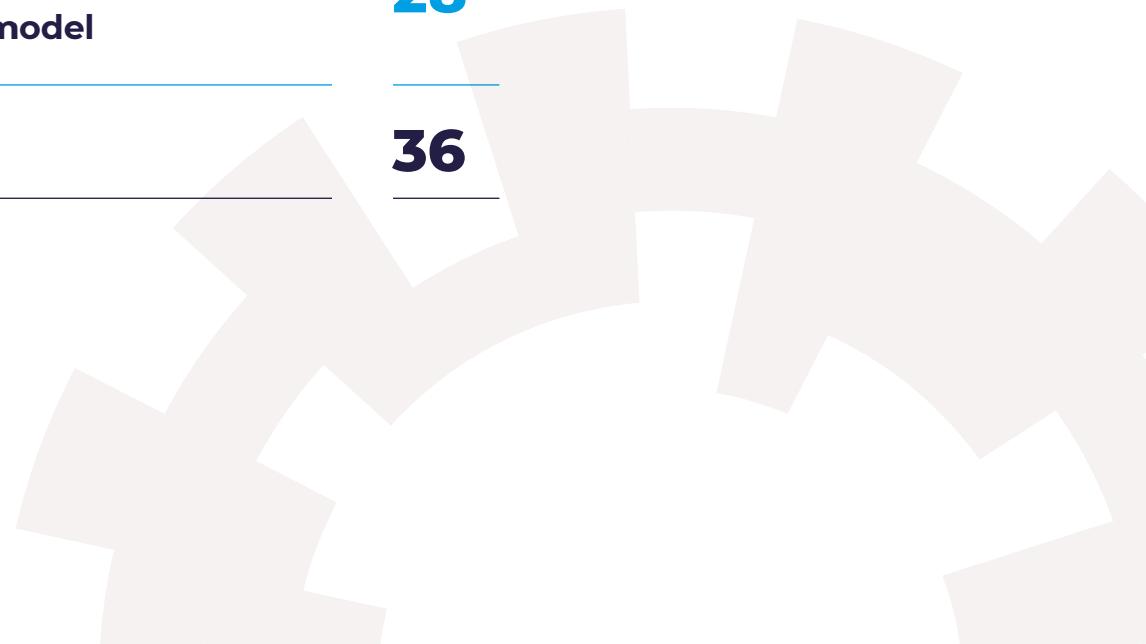
13

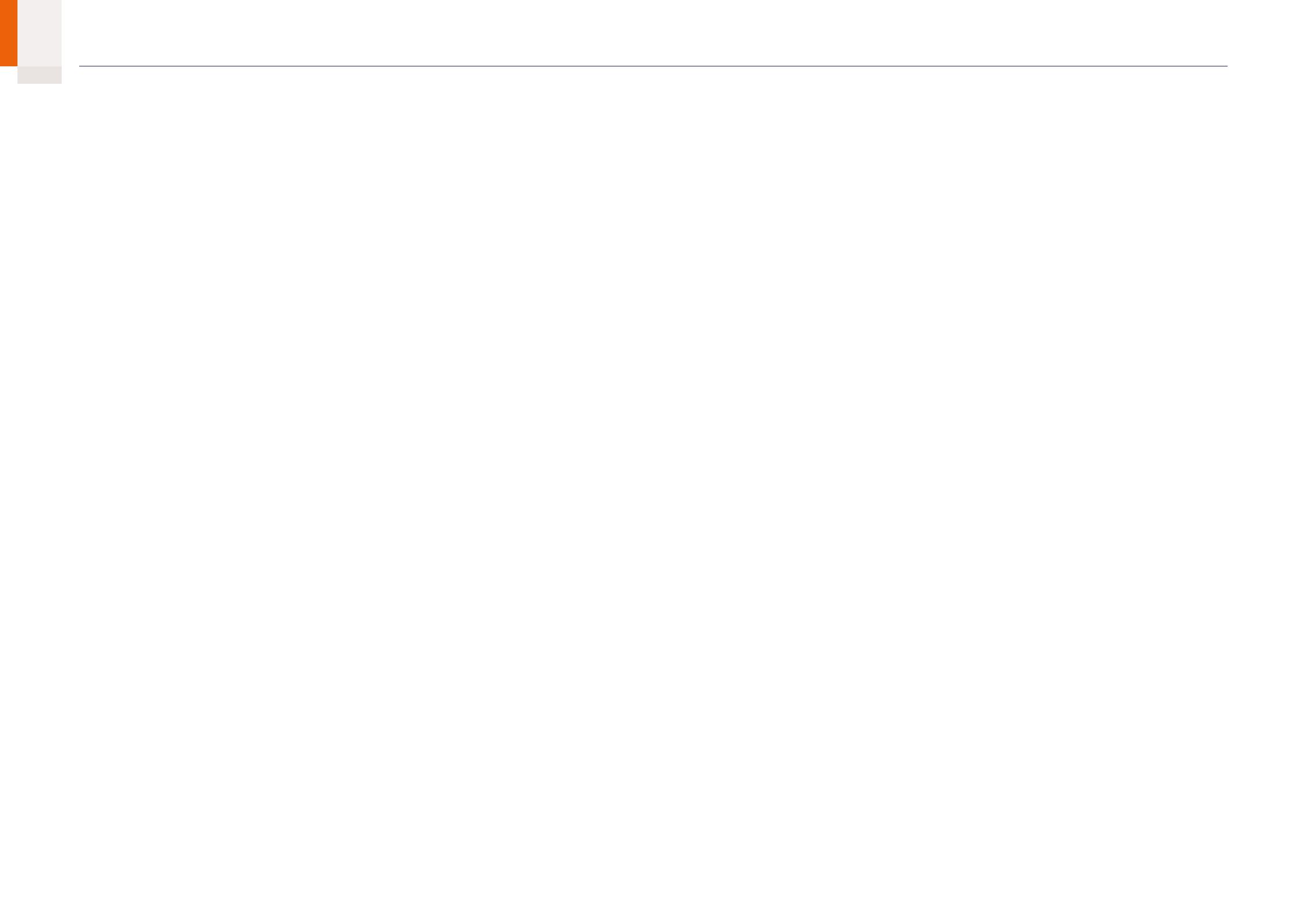
Ready to scale: learning and evolving from Phase 1 by reinforcing the foundations of the GAP-f collaboration model

28

Overview of the 2022–2024 GAP-f strategic framework

36





Why GAP-f?

Children do not have
equitable access to
medicines adapted
to their needs

The lack of appropriate paediatric medicines and formulations is hindering the achievement of the Sustainable Development Goals and universal health coverage and is putting children's lives at risk.

'Equitable access to innovation means leaving no one behind; it means leaving no infant or child

Children are not small adults, and infants are distinct from children. They cannot swallow tablets or capsules, often cannot bear the taste of liquid medicines and metabolize drugs differently as they develop and grow (1,2). For them, medicines need to be palatable, scored, crushable, dispersible, chewable, sprinkled on food or mixed with breast-milk. When multiple drugs need to be taken together for one purpose, they must be administered with the correct dose of each active agent. For this reason, fixed-dose combinations can make a huge difference, both for ease of administering them and for ensuring that the right dose is taken.

Reality, however, often looks quite different, particularly for disadvantaged or at-risk children, who face barriers in accessing medications (3,4). Appropriate medicines to save and improve the lives of infants and children to address the world's most pressing health priorities often do not exist, are unavailable or are not quality assured, especially in low-resource settings.



预览已结束，完整报告链接和二维码如下：

https://www.yunbaogao.cn/report/index/report?reportId=5_23340

