

**TECHNICAL REPORT**

**AIDS MEDICINES AND DIAGNOSTICS SERVICE**

**MEETING REPORT**

**JOINT WHO/UNAIDS ANNUAL MEETING  
WITH PHARMACEUTICAL COMPANIES AND  
STAKEHOLDERS ON GLOBAL FORECASTS  
OF ANTIRETROVIRAL DEMAND FOR  
2014-2018 AND PROJECTION MODELLING  
OF NEW ANTIRETROVIRAL FORMULATIONS  
FOR 2015–2024 AND UPDATE ON  
HEPATITIS B AND C**

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# CONTENTS

<b>LIST OF FIGURES</b>	<b>6</b>
<b>ABBREVIATIONS AND ACRONYMS</b>	<b>7</b>
<b>1. INTRODUCTION</b>	<b>8</b>
<b>2. MEETING SESSIONS</b>	<b>9</b>
SESSION 1: PANEL ON ACHIEVING UNIVERSAL ACCESS: GLOBAL GUIDANCE FOR INNOVATION	9
SESSION 2: WHO AND UNAIDS FORECASTS OF ARV GLOBAL DEMAND 2014–2018 AND MODELLING PROJECTIONS OF NEW ARV FORMULATIONS 2015–2024 FOR ADULTS	9
I ) WHO and UNAIDS forecasts of ARV global demand 2014–2018 for adults	9
II ) Modelling projections of new ARV formulations 2015–2024 for adults	11
SESSION 3: WHO AND UNAIDS FORECASTS OF ARV GLOBAL DEMAND 2014–2018 AND MODELLING PROJECTIONS OF NEW ARV FORMULATIONS 2015–2024 FOR CHILDREN	12
I ) WHO and UNAIDS forecasts of ARV global demand 2014–2018 for children	12
II ) Modelling projections of new ARV formulations 2015–2024 for children	14
SESSION 4: PROCUREMENT INITIATIVES AND CHALLENGES	15
SESSION 5: FINANCIAL CONTRIBUTIONS	17
SESSION 6: REGULATORY AND QUALITY ASSURANCE ASPECTS	18
CLOSING REMARKS AND NEXT STEPS	19
<b>ANNEX 1: FINAL AGENDA</b>	<b>21</b>
<b>ANNEX 2: LIST OF PARTICIPANTS</b>	<b>24</b>

# LIST OF FIGURES

Figure 1.	Number of people to be on ART (average of the linear, country target and CHAI scenarios)	10
Figure 2.	Number of children on ART; country target, linear and CHAI projections	14
Figure 3.	Resource needs for ART at constant coverage as of 2013 versus expanding coverage to meet ambitious targets	18

# ABBREVIATIONS AND ACRONYMS

3TC	lamivudine
ABC	abacavir
ACT	Accelerating Children's HIV/AIDS Treatment
API	active pharmaceutical ingredient
ART	antiretroviral therapy
ARV	antiretroviral
ATV	atazanavir
AZT	zidovudine
CD4	cluster of differentiation 4
CHAI	Clinton Health Access Initiative
d4T	stavudine
ddI	didanosine
DNDI	Drugs for Neglected Diseases Initiative
DRV	darunavir
DTG	dolutegravir
EFV	efavirenz
ETV	etravirine
FDC	fixed-dose combination
FTC	emtricitabine
Global Fund	Global Fund to Fight AIDS, Tuberculosis and Malaria
GPRM	Global Price Reporting Mechanism
IAS	International AIDS Society
IATT	Interagency Task Team for the Prevention and Treatment of HIV Infection in Pregnant Women, Mothers and Children
IDV	indinavir
LPV/r	lopinavir/ritonavir
MSF	Médecins sans Frontières
NNRTI	non-nucleoside reverse-transcriptase inhibitors
NRTI	nucleoside reverse-transcriptase inhibitors
NVP	nevirapine
OGAC	Office of the U.S. Global AIDS Coordinator
PAPWG	Paediatric ARV Procurement Working Group
PEPFAR	U.S. President's Emergency Plan for AIDS Relief
PI	protease inhibitor
PMTCT	prevention of mother-to-child transmission
RAL	raltegravir
RTV	ritonavir
SCMS	Supply Chain Management System
SQV	saquinavir
TAF	tenofovir alafenamide
TDF	tenofovir disoproxil fumarate
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
USFDA	United States Food and Drug Administration
VL	viral load
WHO	World Health Organization
XTC	lamivudine or emtricitabine
ZDV	zidovudine (AZT)

# 1. INTRODUCTION

The World Health Organization (WHO) and the Joint United Nations Programme on HIV/AIDS (UNAIDS) Secretariat organize an annual meeting with pharmaceutical companies and stakeholders to discuss antiretroviral (ARV) drug demand forecasts for adults and children. These forecasts, developed by an ad-hoc multi-agency technical working group, are based on current consumption and likely future uptake indicated by observed upward or downward trends in response to new WHO policy guidelines and other market factors.

The March 2015 meeting went beyond the usual three-year forecast by including a model of new ARVs that will be needed up to 2024. This was deemed useful as it would accelerate access to new treatments by patients if producers were aware of the type and quantities of new ARVs needed, leading to a reduction in the time required for production and regulatory approval of new ARV formulations.

For the first time this year, the meeting also included a discussion on hepatitis B and C medicines. WHO's Global Hepatitis Programme is housed in WHO's HIV Department, and in view of the dynamic developments in treatment options for these infections, it was deemed important to inform pharmaceutical companies and stakeholders of WHO's perspectives and plans in the area of hepatitis treatment.

The meeting was held on 19–20 March 2015 in the UNAIDS Kofi A. Annan Conference Room at WHO Headquarters in Geneva.

The main objectives of the meeting were to:

- present an update on ARV policy guidelines and new procurement and treatment initiatives

producers, and partner organizations. The list of participants is in Annex II.

The opening remarks were delivered by Gottfried Hirnschall, Director, HIV, WHO, and Peter Ghys, Director, Strategic Information and Evaluation, UNAIDS.

In his opening remarks, Gottfried Hirnschall, Director, HIV, WHO, noted that the meeting comes at a critical time for meeting the targets for treatment by 2015, and at a time when new goals, such as 90-90-90 are being set whose targets will require massive treatment and scale up. Hepatitis is starting to receive more attention and WHO's work on hepatitis B and C has been strengthened. He thanked the ARV Demand Forecasting Technical Working Group for the coordinated efforts to produce the global ARV demand forecasts, and welcomed all participants.

Peter Ghys, Director, Strategic Information and Evaluation, UNAIDS, welcomed the participants and noted that the number of people on ART continues to increase, adding that they will be on target for the 2015 goal for treatment access, but that the number of people on treatment will need to more than double to reach the 90-90-90 targets.

To achieve these targets it will be important to ensure equity in treatment between adults and infants on one hand, and between different subpopulations on the other. Local production of ARVs, notably in the sub-Saharan African region, needs to be considered to support treatment scale-up efforts. Innovation, particularly in the delivery models of treatment, is required to reach the ambitious treatment goals.

Joseph Perriens, Coordinator, HIV Technologies and Commodities, WHO, introduced the agenda. He emphasized that even though the 90-90-90 targets were ambitious,

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