

Q&A: Cipla-Unitaid agreement on price reduction of first combination therapy to prevent life-threatening infections in people living with HIV

Q: What makes this price cut so significant?

A: The price reduction of this innovative drug has the potential to significantly increase the quality of life of millions of people living with HIV in low- and middle- income countries.

The single pill combination is expected to improve adherence to treatment and be particularly effective in reducing TB-related HIV deaths. It will increase the use of isoniazid, the TB-fighting component, whose availability has been inconsistent in low- and middle-income countries to date.

Q: What is this combination drug used for?

A: Tuberculosis (TB) and other bacterial infections were the main cause of about one million AIDS-related deaths in 2016. The new pill contains three different drugs, recommended by the World Health Organisation, that work together to prevent these infections.

Q: How is Cipla's pill different from other brands on the market?

A: Until now, patients had to take three pills a day to get the treatment that Cipla's product packs into a single daily pill. Cipla is the only manufacturer, at the moment, of a quality-assured fixed-dose combination. More manufacturers are expected to enter the market in due course, bringing competition and greater supply to meet patient demand.

Q: Why is it important to lower the price?

A: The product has been on the market since 2017, but its high price has put it beyond the reach of health budgets in less-affluent countries where it is most needed. The lower price that has been negotiated makes the new drug combination similar in cost to taking the three drugs separately. The price of the product is expected to come down more as governments and international funding bodies procure larger quantities for their HIV treatment programmes.

Q: How many countries can access the new lower price?

A: All public sector purchasers operating in low- and middle-income countries (as defined by the World Bank) have access to this price, as well as international procurement organisations such as the Global Fund and US President's Emergency Plan for AIDS Relief (PEPFAR).

Q: How often does TB affect people living with HIV?

A: People living with HIV are 16 to 27 times more likely to develop TB than those without the virus. TB is the most common illness among people living with HIV, including among those taking antiretroviral treatment.

Q: Where is the epidemic concentrated?

A: Sub-Saharan Africa bears the brunt of the TB/HIV epidemic, accounting for approximately 86% of all deaths from HIV-associated TB in 2016.