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## World Health Professions Alliance WHPA NCD Campaign and Launch of the Global Health Improvement Scorecard

**Speech by Mr. Mario Ottiglio, Associate Director, Public Affairs & Global Health Policy, IFPMA**

**12 September 2011, Geneva**

It seems fitting that we are marking the launch of the WHPA Health improvement toolkit by bringing people from all walks of life together. That is entirely the kind of collaborative approach that is needed to meet the NCD challenge.

We at IFPMA feel privileged to have been able to contribute to this WHPA's initiative and we see it as a tangible demonstration of the climate created by the WHO NCD Global Plan and its belief that partnerships can be a potent force in helping patients to identify and prevent risky behaviours.

The increase in low and middle income countries of NCDs is in part a result of changes in lifestyle and in increased living standards for some. As few people contract communicable diseases in part due to more effective medicines and treatments, people are living longer and more liable to suffer from non-communicable diseases. More and more low and middle income countries will face a double whammy as their health systems will be overburden by both communicable and non-communicable diseases.

You all know the figures: over half of NCDs are avoidable; for many NCDs, prevention measures don't require more than for individuals to change their lifestyle.

What's more, alleviating the social and economic burden of NCDs through prevention is an important public health consideration. We like to say that prevention is the best cure and it is also the best value for governments who should make of increased health literacy the flagship of any NCDs control strategy.

The WHPA Health Improvement Card hits right at the real core of the debate: health literacy highlighting the role of health professionals as crucial for increasing awareness and encouraging changed and healthier behaviours.

Let me walk you through some of the specifics regarding our approach to the NCD challenge. R&D in NCD medicines and partnership programmes are concrete contributions by the research-based pharmaceutical industry. The medicines our industry developed a generation ago represent today effective front line treatments for all major NCDs. What's more, the vast majority of these medicines are available in generic form. Neither are we new to the problems presented by NCDs in the developing world: we have a track record of partnering to make a difference to patients suffering from chronic diseases in low and middle income countries. Our member companies are involved in many projects ranging from access to education to capacity building. For instance, one member company has launched an awareness programme to fight against childhood cancers in 21 emerging countries, helping in one year only nearly 13000 children and training little less than 3000 health professionals. Another four-year, multi-million collaborative programme has provided diabetes training to over 5000 health professionals in India.

But we are not resting on our laurels. We have built on WHO's NCD strategy to forge a pharmaceutical industry wide roadmap called the NCD Framework for Action which focuses on: innovation, access and affordability, prevention and health, and partnerships.

Our Framework for Action on NCDs covers the areas we believe our industry can contribute best, given our pharmaceutical business expertise and our experience in understanding, preventing and managing NCDs. We are currently carrying out an online consultation to gather views and ideas from the global health community – as we believe that collaboration and partnerships are the best way to make a real difference to people in their everyday lives.

We are indeed engaged for the long haul, beyond the UN Summit. This IFPMA NCD Research Series will help identify unmet needs and provide a sound evidence base upon which we can make informed decisions and engage with policy makers

The motivation for the research is that we need to work out sustainable and pragmatic solutions; "we" as in the pharmaceutical industry, but also "we" as a global health community. So while prevention is key, it is also necessary to address problems such as treatments that are not getting to the people who need them, despite most first line treatments are widely available and affordable.

Designing solutions require us, and policy makers, to work together - and to think in different ways. We are therefore very keen in going forward to seek views and input from others and invite other stakeholders to work with us. We thank the WHPA for embracing the spirit of partnership and involving us in their project. We intend to continue in this spirit and we trust more and more people will see it the way we do.