STOP
YOUR ANTI-DIVERSION PROGRAM
VIOLATES PHYSICIAN AND PATIENT
RIGHTS TO PROTECT YOUR PROFIT.

GO
EXPAND YOUR LICENSE TO
INCLUDE ALL MIDDLE-INCOME
COUNTRIES!

GILEAD
Gilead’s HCV direct-acting antiviral (DAA) pricing and licensing policies have negative effects on HCV treatment access in low- and middle-income countries (LMICs):

Gilead’s prices for sofosbuvir and sofosbuvir/ledipasvir are out of reach for the majority of people with hepatitis C worldwide. Their licensing agreements have strategically locked numerous key Indian generics manufacturers into agreements that place tight restrictions on the generics market. **Gilead uses and requires its licensees to institute anti-diversion measures that violate basic standards of patient confidentiality and autonomy, interfere with doctor-patient and pharmacist-patient relationships, and may compromise adherence and treatment outcomes.**

Gilead’s decisions will artificially inflate prices, limit patient access, and create barriers to HCV treatment scale-up.

We urge Gilead to immediately improve the terms of these licenses and support affordable access, by:

- Expanding geographic coverage of the licenses, to include the 51 middle-income countries that are currently excluded.
- Removing restrictions on producing and sourcing sofosbuvir’s active pharmaceutical ingredients (API), since cost of API is linked to the cost of the final product offered by generic companies.
- Modifying unethical anti-diversion requirements, to ensure that they do not limit or impede patient access.

**WE BELIEVE IN EQUITABLE ACCESS TO LIFE-SAVING TREATMENT FOR ALL WHO NEED IT.**

International Treatment Preparedness Coalition - Treatment Action Group
Médecins Sans Frontières - Initiative for Medicines, Access & Knowledge
Global Health Justice Partnership, Yale University
Health Gap - Médecins du Monde

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