

Marie-Paule Kieny
Assistant Director-General, Health Systems and Innovation
World Health Organization
20 Avenue Appia
1211 Geneva
Switzerland

November 16, 2016

Letter on behalf of the Global Health Technologies Coalition: Critical need for an Essential Diagnostics List

Dear Dr. Kieny,

The Global Health Technologies Coalition (GHTC)—a group of more than 25 nonprofit organizations advancing policies to accelerate the creation of new technologies to bring healthy lives within reach for all people—applauds the vital work of the Essential Medicines and Health Products Department within your World Health Organization (WHO) cluster in establishing the Model Lists of Essential Medicines (EMLs). By providing science-based guidance to countries on which drugs, biologics, and diagnostic agents to include in national standards, EMLs have had a dramatic impact on global public health. As argued in a recent *New England Journal of Medicine* article, ¹ as well as in multiple other op-eds, ^{2,3} a similar model list for diagnostic tests would have an equally transformative impact. GHTC therefore fully endorses these calls for a Model List of Essential Diagnostics (EDL) and respectfully requests your and the WHO's leadership in establishing it.

An EDL would provide a vital tool to help increase access to the diagnostic tests necessary to maximize the use of limited health resources and improve health outcomes. Improved diagnostic capacity, such as point-of-care tests, could enable earlier identification of disease outbreaks, saving the lives and costs associated with epidemics. In the fight against antimicrobial resistance (AMR), rapid diagnostics to specify treatment and improved antibiotic susceptibility testing enable treatment to be better targeted to the patient's specific infection, as well as to ensure appropriate regimen use. Both help to conserve the efficacy of current antibiotics. Where these diagnostics exist but are not in routine use, the EDL provides a forceful policy argument for governments to invest in making them available.

Furthermore, by detailing which diagnostics are necessary to support health interventions, an EDL could readily expose where there are gaps in existing appropriate diagnostic tools. In this way, the list could

¹ Schroeder LF, Guarner J, Elbireer A, Castle PE, Amukele TK. Time for a Model List of Essential Diagnostics. New England Journal of Medicine. June 30;374(26):2511-4

² Schroeder LF, Amukele TK. Africa has an essential medicines list. Now it needs one for diagnostics [op-ed]. *The Conversation*. October 25, 2016. https://theconversation.com/africa-has-an-essential-medicines-list-now-it-needs-one-for-diagnostics-66973

³ Schroeder LF, Amukele TK, Pai M. Why the world needs an essential diagnostics list [op-ed]. *Forbes*. August 4, 2016. http://www.forbes.com/sites/sciencebiz/2016/08/04/why-the-world-needs-an-essential-diagnostics-list/#6ae9752879cd



signal to product developers, industry, and donors where funding and attention is needed to facilitate research and development (R&D).

Given WHO's experience in hosting the EML, its ongoing work developing technical guidance on diagnostics, its work in laboratory accreditation, and its widely-respected role in setting global norms, GHTC believes WHO is uniquely positioned to lead the development and implementation of an EDL. We respectfully urge you to support the establishment of an EDL and stand ready to advocate with member states on behalf of an EDL that would save money overall, encourage R&D for needed diagnostics, and increase access.

We thank you for your consideration of this request and would appreciate the opportunity to discuss the issue with you further. We eagerly await your response, and ask that you kindly direct it to Matthew Robinson at MRobinson@ghtcoalition.org by November 30.

Sincerely,























Cc: Suzanne Hill