



START WITH THE HOOK: TODAY SOMETHING IMPORTANT IS HAPPENING RIGHT HERE

- *For example:*

“We are launching a drive for [University X students] to sign on the Philadelphia Consensus Statement, which asks Universities to ensure that the drugs developed right here in our campus laboratories reach those who need it most, in the developing world. The statement has already been endorsed by a host of luminaries, including a South African Supreme Court Justice, and three Nobel Laureates. Our signature drive will be part of a national campaign formally launched by 30 Chapters across the U.S. and Canada. The stakes are extremely high: universities can save millions of lives, if they choose to.”
- *Your 20-second summary will obviously vary according to what your chapter has planned. However, what you want to drive home is:*
 - **Campus Action:** *Something is happening here on campus. This can be as simple as “We are launching a campaign campus-wide,” but should be specific if you can add more color.*
 - **What we’re asking:** *That the university ensure that drugs developed right here in our campus laboratories actually reach those who need it most*
 - **We’re not alone:** *We have both fancy folks and students across the country behind this.*
 - **Universities role:** *Just as we said it above: The stakes are high. In very simple terms – Universities can save millions of lives – if they choose to.*

EXPLAIN WHY THIS IS NEWS NOW: STUDENTS ACTING ON CAMPUS ARE JOINING ACTIONS BY HEALTH POLICY LUMINARIES AND ON CAPITOL HILL TO CREATE A PERFECT STORM

- **Today [or “this week” or “this month”] our organization is formerly releasing the Philadelphia Consensus Statement and launching a campaign for students across the country to sign on.**
 - *If you can, say specifically what you are doing.*
- **Prominent voices have joined our call for universities to take action.**
 - For five years, students across North America have been calling on their universities to make the life-saving medicines discovered in campus laboratories available in the developing world.
 - The Philadelphia Consensus Statement, which for the first time puts UAEM’s proposals into a concrete but accessible two page document, has been signed by luminaries including:
 - Dr. Paul Farmer, famous for his path-breaking work in Haiti
 - Stephen Lewis, UN Special Envoy for HIV/AIDS in Africa
 - Edwin Cameron, South African Supreme Court Justice
 - Three Nobel Laureates (Dr. John Polanyi, Sir John Sulston, and Dr. Harold Varmus)
 - Many of the highest profile professors of intellectual property law

- And even the head of one forward thinking technology transfer office, U.C. Berkeley.
- **Adding his own voice, Senator Leahy (Ranking Member on the Senate Judiciary Committee) introduced a bill that would condition federal research dollars on an institution’s adoption of policies like the ones we propose. NOTE: S. Leahy is not an official signatory to the Statement, so try to comment on the bill as a *separate* activity from the consensus statement.**
 - Senator Leahy’s (D-VT) *Public Research in the Public Interest Act of 2006* (S. 4040) would require all federally-funded research institutions to ensure that the drugs they develop are supplied to poor countries at the lowest possible cost. The Act reflects a growing consensus that 1) this is an issue of immediate national importance and 2) universities have failed to act on an issue uniquely within their power.
- **Our efforts here on campus are part of a fast growing national student movement**
 - This week we are beginning our drive for students here to sign on the Philadelphia Consensus Statement as part of a campaign that was formally launched by 30 chapters across the country, including many of the nation’s leading research institutions: Harvard, John Hopkins, UCSF, UPenn, and the University of Washington.
 - Our past conference at the University of Pennsylvania was our largest conference to date with 155 students from 37 schools. *(If applicable, you might want to add here, “X number of students attended from our school. Invigorated by the national movement, we are now taking action on our own campus to urge [University X] to do the right thing.)*

EXPLAIN WHY THIS MATTERS: POOR PEOPLE ARE DYING BECAUSE THEY CANNOT ACCESS EXISTING MEDICINES. UNIVERSITIES CAN, AND MUST, CHANGE THAT. DRUGS DEVELOPED IN CAMPUS LABORATORIES WITH PUBLIC FUNDS SHOULD BE MADE AVAILABLE IN THE DEVELOPING WORLD

- **Access to life-saving drugs is a pressing problem of great magnitude.**
 - According to the World Health Organization, about 10 million people—most of them in low and middle- income countries—die needlessly every year because they do not have access to existing medicines and vaccines.¹
 - Last year 2.8 million people died of AIDS alone.
- **Universities can change these devastating figures**
 - Universities play a major role in the drug development pipeline, as pharmaceutical companies increasingly rely on discoveries made in campus laboratories with the support of federal funds. *(For more detail, see the pipeline primer included in Appendix G)*
 - As a result, universities wield substantial leverage when it comes to setting the licensing terms for the drugs developed by their researchers.

¹ World Health Organization (2004) *Equitable access to essential medicines: A framework for collective action*. Available: http://whqlibdoc.who.int/hq/2004/WHO_EDM_2004.4.pdf.

- Universities can leverage their [intellectual property] rights in the discoveries made by university scientists to ensure they are made available in the developing world.
- As the source of life-saving drugs, Universities can ensure access to its innovations even as they flow down the supply stream. In other words, Universities are perfectly positioned to provoke serious system-wide change that would save millions of lives.
- **Universities have an obligation to allow access to their drugs**
 - Universities are dedicated to the creation and dissemination of knowledge in the public interest.
 - *If you have a specific quote for your university's mission or technology transfer policy, you may wish to insert it here.*
 - Therefore, ensuring its innovations reach those who need it most goes to the heart of what it means to be a great research university.

GIVE THE REPORTER TANGIBLE EXAMPLES

- **In 2001, Yale demonstrated the role universities can play to trigger dramatic price reductions in developing countries**
 - Universities Allied for Essential Medicines originated in a 2001 campaign at Yale University. Students, scientists, and the organization Doctors Without Borders asked Yale to help increase access to the AIDS drug zidovudine or *d4t* in South Africa. Yale scientists discovered and patented *d4t*; the university subsequently licensed the drug to Bristol-Myers Squibb, which marketed it for \$1,600 per patient per year. Under pressure from students, faculty, and the general public, Yale and Bristol-Myers Squibb agreed to allow generic manufacturers of *d4t* to compete in certain markets, thus lowering the price of the drug to \$55 per patient per year—a 96 percent reduction.
- **But, the Yale-D4T Case was an isolated one. The more recent Emory–Gilead Story underscores that missed opportunities have real human costs.**
 - Last year, Emory University, Gilead Sciences, and Royalty Pharma announced a deal in which Emory sold its 20% royalty rights in the ARVs Emtriva and Truvada for an up-front payment of \$525 million. Emory could have used this sale to negotiate conditions about Gilead's licensing, registration, and patenting practices, but did not.
 - Although Gilead's Access Program promises to supply 97 developing countries, the drugs are only available in a fraction of them.
 - After the transaction, Emory has significantly less leverage to ensure its drugs are available in impoverished countries. This example demonstrates why universities must require humanitarian licensing provisions for all their innovations.
 - *If the reporter has more questions on the Gilead/Emory deal, please direct them to Stephanie Doan*
 - 717-575-0575
 - sddoan@sph.emory.edu

- **Even more recently, a license just this summer by Yale of a d4T successor—without any provisions for access—provides a concrete example of the work that still needs to be done, and to be done urgently.**
 - Last summer, Students at Yale discovered that the university had exclusively licensed a compound known as *Ed4t* to a Japanese pharmaceutical company without any provisions for access. *Ed4t* is closely related to *d4t*, but in early tests has proven both more effective and less toxic than its predecessor. Yale refuses to disclose in exactly what countries it is patenting the molecule, but its international patent application designates 76 low- and middle-income countries “for every kind of national protection available.” The list includes countries like Lesotho, where almost a quarter of the population is infected with HIV. Meanwhile, Lesotho’s entire annual GDP is less than yearly returns on Yale’s endowment.
 - *If the reporter has more questions on Ed4T, please direct them to Michael Steffen*
 - *Phone: (203) 233-1521*
 - *E-mail: michael.steffen@yale.edu*

MAKE SURE YOU GET A MENTION OF THE CONSENSUS STATEMENT WEBSITE IN

- Faculty, students and community members are encouraged join the consensus statement by going to www.essentialmedicine.org/cs.

BE READY FOR FOLLOW-UP QUESTIONS ON THE THREE MAIN PIECES OF NEWS

- **Your Campus Action**
- **Philadelphia Consensus Statement**
 - **What is the Philadelphia Consensus Statement?**
 - A document that lays out a comprehensive set of policy proposals by which universities can address the access crisis. The Consensus Statement is organized along three main points: (1) promoting equal access to university research; (2) promoting research and development for neglected diseases; and (3) measuring research success according to impact on human welfare.
 - In other words, it summarizes UAEM’s proposals into a concrete but accessible two page document
 - As of today, we are **launching a broader push**. We are urging students, citizens, and others to add their names to our consensus statement.
 - Faculty, students, and community members to do so by going to our website www.essentialmedicine.org/cs.
 - *If the reporter has more detailed questions on the Consensus Statement, you can direct him/ her to Dave Chokshi or Caroline Gallant:*
 - *Dave: Phone: (225) 354-6673; E-mail: daveash@med.upenn.edu*
 - *Caroline: Phone: (514) 833-7703; Email: caroline.gallant@mail.mcgill.ca*

- **National Legislation: Senator Leahy’s Public Research in the Public Interest Act of 2006**
 - **How is the bill related to the consensus statement and the other work UAEM is doing?**
 - S. 4040 would essentially make it a condition of receiving federal research support that universities to do what we are asking them to do voluntarily
 - Senator Leahy’s introduction of the Public Research in the Public Interest Act of 2006 (S. 4040) reflects a growing consensus that 1) this is an issue of immediate national importance and 2) universities have failed to act on an issue uniquely within their power.
 - **Is this a radical proposal?**
 - No. We think this bill proposes a commonsense solution – backed by opinion leaders in the field – that has the potential to save millions of lives.
 - **How much would it cost?**
 - This legislation would ensure that public funds serve truly public purposes, delivering immense human benefits at little cost to American taxpayers, universities, or pharmaceutical companies.
 - **How does it work?**
 - The bill requires humanitarian licensing of essential medicines as a condition for receipt of federal research funding. The mandated humanitarian licensing terms would allow generic manufacturers to supply drugs developed at federally-funded institutions in eligible countries at affordable prices.
 - **Should it pass?**
 - Universities should not need an Act of Congress to revive their sense of public mission. But Senator Leahy’s bill represents a growing consensus that universities themselves have failed to act on an issue uniquely within their power. We urge Universities to heed this call and to take the lead at another watershed moment, by leveraging its most innovative assets to save lives worldwide.
 - But if universities cannot act voluntarily—then yes, it should pass.
 - *If the reporter has further questions, please direct them to Robynn Sturm:*
 - *Phone: (301) 467-7489*
 - *E-mail: robynn.sturm@yale.edu*