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The recall of an HIV/AIDS drug has left many in poor nations in distress

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Roche Pharmaceuticals last month announced a global recall of its HIV/AIDS drug Viracept after discovering that some batches had been contaminated with a carcinogen during a flawed manufacturing process at its Swiss plant.

Patients should immediately discontinue the drug and switch to other medicines, Roche said, noting that the recall affected "Europe and some other world regions."

In Europe, the recall caused little stir, since the drug had mostly fallen out of use, replaced by newer, more expensive alternatives. But tens of thousands of people take Viracept worldwide, most of them poor people with the acquired immune deficiency syndrome in developing countries.

And in places, newer substitutes are not available to patients, either because they are not licensed or are substantially more expensive, said people with the human immunodeficiency virus that causes AIDS, and international health experts. In Panama, for example, a substitute drug, Kaletra, costs 10 times as much as Viracept.

This has left patients with the painful choice of discontinuing a lifesaving medicine, or using a drug that might contain a dangerous contaminant.

Roche, which had revenue of 42 billion Swiss francs, or \$35 billion, last year, said it would cover the "reasonable costs" of the recall, but so far, patients or HIV treatment programs have had to make up the difference in cost.

"Roche has provided information, but there has been much less support in terms of who is going to pay the additional cost," said Dr. César

Nuñez, the Unaid's coordinator for Latin America, who is based in Panama.

Officials at the World Health Organization in Geneva and the European Medicines Agency in London said Roche had not provided information they consider essential for safeguarding public health: which countries the tainted medicine was shipped to, the concentration of the contaminant and what the company will do for its patients. The European agency has canceled Roche's license to market the drug.

Dr. Lembit Rago, an official at the World Health Organization, called the total recall "sort of a disaster" for patients in very poor countries. "They failed in communication," he said about Roche.

Had Roche been forthcoming about the countries affected and the lots that were suspect, this might have allowed a more limited recall, said Rago, the WHO coordinator of quality assurance and safety for medicines. "It's fine for Roche to say 'withdraw and replace,' but there may not be much else at hand to substitute" in many places, he said. "This is not just about Europe."

In response to e-mailed questions, Martina Rupp, a spokeswoman for Roche, said it had shipped "at least one packet of Viracept with high levels of the impurity to 35 countries." But she declined to say which countries, as a matter of policy. High levels of the contaminant "were observed in batches of Viracept that had been released to countries since March 2007," she said.

The company made the recall worldwide "in order to avoid confusion," she said. Roche has estimated that about 45,000 patients were affected by the recall. Rupp said the toxic substance, ethyl mesilate, should be called an "impurity" rather than a contaminant because it was created in the manufacturing process and because this type of chemical can be found in very low levels in other medicines, although it was not supposed to be present in Viracept.

"Roche considers the risk to patients to be low," Rupp said.

The company was performing studies on the issue, but the results would not be available for "some months," she said. At high doses, ethyl mesilate has been shown to cause cancer in animals, and at lower levels it has caused genetic mutations, but data are extremely limited.

It is particularly harmful to children and pregnant women.

The global market for HIV drugs features different drugs at different prices in different places. HIV specialists now prefer Kaletra, made by Abbott Laboratories. It is in the same class of drugs as Viracept and has fewer side effects. But it has not been licensed in many middle-income and poor countries.

Asia Russell, of Health Gap, a U.S.-based nongovernment organization that focuses on medical care in the developing world, said, "It seems that Roche has abandoned these patients, since in many places there aren't ready alternatives."

In Venezuela, 3,000 people were on Viracept and the effect of the recall was "severe," since many had no other options, Edgar Carrasco, an AIDS activist in Caracas, said.

Alberto Nieve, another activist, said Roche had promised to make a donation of another medicine.

"Most people are still waiting - they have not switched yet, especially outside Caracas," Nieve said

The company insisted that it receive a list of people who were on Viracept before it would make the donation, he said. People were also given little information about the risks of the tainted medicine, he said, and were referred to an English-language Web site.

In the month since the recall, officials at the European Medicines Agency and the World Health Organization said that they, too, would like more information from Roche about the dose of the contaminant and where exactly the medicine was sent.

"We have not gotten information - not even an order of magnitude," Martin Harvey Allchurch, a spokesman for the European agency, said. "I understand sales figures are confidential, but I would have thought by now we would have this information."

Viracept was sold in 49 countries since 2004, according to the World Health Organization, with more than 12 million units sold in 2006 and 2 million in 2007. Canada, Japan and the United States were not affected by the recall since another company, Pfizer, makes a version of Viracept in those nations.

The European Medicines Agency asked Roche to clarify what doses would be toxic in humans and to create a registry of patients exposed to "contaminated batches of Viracept."

Tido Von Schoen-Angerer, director of the essential medicines campaign at Médecins sans Frontières, or Doctors Without Borders, said about half of the 400 patients who received therapy supplied by the group in Africa were on Viracept. The alternate from Abbott is not yet available, he said.

Unicef records show that Viracept was recently sold to Benin, Ivory Coast, Moldova, Mali, Niger, Nigeria, Pakistan, Philippines and Yemen. In South Africa, Brazil and Botswana, countries with relatively developed and well-financed HIV/AIDS treatment systems, there was little problem in switching away from Viracept.

In Zambia, the recall created a panic among patients who felt they did not get adequate information, according to the Churches Association of Zambia, a major provider of HIV treatment.