

Secretary of State for Business and Trade  
Department for Business and Trade  
Old Admiralty Building, Admiralty PI  
London SW1A 2DY

Dear Secretary of State for Business and Trade,

CC: Foreign Secretary, Minister for International Trade, Minister of State for Development and Africa

We are writing to you as civil society organisations, health providers, and medical professionals from low and middle-income countries. Pharmaceutical companies often deny our patients timely, affordable access to the medicines they desperately need. In this context, cheaper, generic medicines provide us with a lifeline. We write to you to warn that your government could be about to cut this lifeline short.

The United Kingdom is negotiating a free trade agreement with India, a global epicentre of generics production. India's generics industry is underpinned by a legal system which seeks to balance intellectual property rights with the right to health. However, a leaked government paper has revealed that the UK wants to introduce sweeping changes to these laws as part of any agreement.

The UK proposals include:

- *Patent term extension*: India would be required to extend patent monopolies beyond the 20 years agreed under the TRIPS Agreement, by several years. This would lead to further delays in introducing price-lowering generic competition.
- *Data exclusivity*: The UK's proposal asks India to introduce new rules that delay the registration of generic versions of medicines for six years, even when there is no patent on that medicine or even if the generic product meets the quality standards prescribed by the national drug regulatory authority. This is far beyond the TRIPS agreement's requirements.
- *Lowering the bar of patent examination on medicines*: The UK proposal asks India to introduce and allow patenting on trivial changes of known medicines, which can lead to longer monopolies and delay generic entry.
- *Removing pre-grant patent oppositions*: The UK proposal asks India to remove a "pre-grant opposition" mechanism, a democratic procedure in Indian law that allows anybody to submit evidence opposing or challenging the validity of a patent application at any time before the patent office makes a decision.

These measures could threaten the supply of generic medicines to low and middle-income countries. Patients may have to wait years longer before they can access certain medicines, and countless lives could be lost as a result. For example, this year, the Indian Patent Office rejected a controversial attempt by Johnson & Johnson to extend the patent on its tuberculosis drug bedaquiline. This case opened the door for other companies to produce affordable generic versions of Bedaquiline, with some health experts estimating the cost of treatment could be cut by up to 80%. Depriving people of affordable medicines would

increase health inequality, as only the wealthiest in our countries may be able to afford these medicines. Moreover, it would add further financial burden on our already stretched health systems.

We urge you to think of the wider context of your relations with the Global South. The UK has slashed Overseas Development Assistance funding which, by your government's own estimations, will lead to thousands of deaths. During the COVID-19 pandemic the British Government repeatedly worked to block a widely supported proposal at the World Trade Organisation which would have helped low and middle-income countries produce generic vaccines, tests, and treatments. Attacking India's generics industry would be yet another act of global health vandalism, which could leave the UK's international reputation in tatters and undermine the UK's international development strategies.

As trade negotiations reach their final stages, we hope that you will consider the harm these proposals could inflict on both patients and health systems in the Global South. As UK health workers and campaigners have [warned](#), the measures you are pushing for could even harm the UK's NHS. We urge you to change course and drop the UK's demands for stricter intellectual property provisions as part of any trade deal with India. And we ask that you pledge that your government will never propose such changes in any trade negotiations with low and middle-income countries that could increase the costs of medicines globally.

The UK's own Global Health Framework [says](#) that your country wants to play a leading role in improving health globally and in improving access to vaccines, treatments, and diagnostics. This is a noble aim. We urge you not to sabotage your own mission.

Signed,

Third World Network	Acire Robin-Gulu University, AIDS Healthcare Foundation -Uganda cares, UGANDA	Malawi, Eswatini and Lesotho
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América Latina y el Caribe Mejor Sin TLC, Chile	Arun Kanti Howlader, Climate Hero Initiative, Bangladesh	Equidad de Género: Ciudadanía, Trabajo y Familia, Mexico
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Asia Pacific Forum on Women, Law and Development, Thailand	Coalition of Women Living with HIV and AIDS, Malawi	Fundación IFARMA, Colombia
Asia Pacific Network of People Living with HIV (APN+), Thailand	Consumers' Association of Penang, Malaysia	Fundación para Estudio e investigación de la Mujer, Argentina
Asociación Civil Cambio y Acción , Perú	Research and Support Center for Development Alternatives-Indian Ocean (RSCDA-IO) / Centre de Recherches et d'Appui pour les Alternatives de Développement-Océan Indien (CRAAD-OI), Madagascar	Fundasida, El Salvador
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Cancer Alliance, South Africa		Garabtaag, Malaysia
Centre for Environment, Human Rights & Development Forum (CEHRDF), Bangladesh		Global Call to Action Against Poverty-Sénégal /CAAPOST-2015, Sénégal
Center for Health Human Rights and Development (CEHURD), Uganda	Crisis Home Kuala Lumpur , MALAYSIA	Dorcas Coker-Appiah, Gender Studies and Human Rights Documentation Centre , Ghana
Centre for Social Equity and Inclusion, India	Dandora Community AIDS Support Association (DACASA), Kenya	Luz Marina Umbasia Bernal, GHP Corp, Colombia
Centre for Women Justice Uganda, Uganda	DAWN, Fiji	Global Call to Action Against Poverty (GCAP) India
Citizens' Health Initiative, Malaysia	Disability Peoples Forum Uganda, Uganda	Governance Links, Tanzania
Charstar Innovation Centre, Uganda	Drugs for Neglected Diseases Initiative	Grupo de Trabalho sobre Propriedade Intelectual, Brasil
	Dr Gopal Dabade, Drug Action Forum - Karnataka, India	Beverley Snell, Coordinator, Health Action International Asia Pacific, Regional
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International Community of Women living with HIV Eastern Africa, Uganda

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Karyn Kaplan, Independent,

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Indonesia AIDS Coalition, Indonesia

Indonesia for Global Justice (IGJ), Indonesia

Innovarte NGO, Chile

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International Women's Rights Action Watch Asia Pacific (IWRAP AP), Malaysia

Kenya Legal and Ethical Issues Network on HIV and AIDS (KELIN), Kenya

Khulumani Support Group, South Africa

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Malaysian Women's Action on Tobacco Control and Health (MyWATCH), Malaysia

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