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23 September 2024

To: Paul Hudson, Chief Executive Officer, Sanofi

Re: Access to diabetes medicines for people living with diabetes in humanitarian and resource-poor settings

Dear Mr Hudson,

I write to you on behalf of Medecins Sans Frontieres (MSF) to urge action for greater access to insulin for people with diabetes in our care and beyond.

MSF is an international, independent, medical humanitarian organisation that works in humanitarian crises and with neglected and excluded populations. As part of this work, we provide quality and evidence-based diabetes care in our programmes and advocate for better access to medical tools for people with diabetes in low- and middle-income countries (LMICs). Over the last few years, we have witnessed the lack of access to insulin pens and newer diabetes medicines, often due to high prices and supply constraints.

Barriers to improving the availability of insulin pens in resource-poor settings

Through our experience of implementing diabetes programmes, and [as highlighted in a survey conducted by MSF and T1International](#), it is evident that insulin in pen devices is preferred by people over insulin injected from vials. Due to accuracy and ease of dosing and reduced stigma, pens have significantly improved the quality of life for people with diabetes and are now included in the World Health Organization (WHO) Model List of Essential Medicines. While pens and analogue insulins are the norm for diabetes care in high-income settings, they are not as widely available in LMICs and humanitarian settings due mainly to the business and pricing decisions of major insulin manufacturers.

Sanofi now has an opportunity to address this double standard that has long existed against people living with diabetes in LMICs. Your company has [announced publicly](#) that it is engaging with the South African Department of Health to supply analogue insulin pens at an affordable price after Novo Nordisk failed to supply human insulin pens, and this provides an opportunity to scale up glargine (long-acting) and short-acting insulin pens if the same are provided at an affordable price to the country.

On pricing, MSF recently analysed the market prices and estimated cost-based sustainable prices—at which a product could be profitably sold—of selected diabetes medicines and devices. The analysis covered insulins in all presentations (vials, cartridges and pre-filled pens), including those from Sanofi. It estimated that glargine in pre-filled pens could be sold profitably at US\$1.3/pen, rapid-acting aspart pre-filled pen at \$1.4/pen and glulisine at \$1.40/pen compared to the much higher current market price range of \$2.98-\$56, \$5.06-\$53.64 and \$4.70 -\$105.39 respectively.

The high prices of analogue pens pose a significant barrier to scaling up their availability in health systems in resource-poor settings. The analysis shows significant room for price reductions for major procurers like governments, as well

as for MSF.

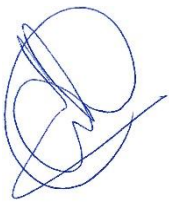
To address the above concerns on the double standard of care for people with diabetes and sustainable supply of diabetes medicines, we request Sanofi to take the following actions:

1. Urgently supply analogue insulin pens in adequate quantities to South Africa and beyond at a more affordable price (\$1 per pen).
2. Focus on local or regional manufacturing of analogue insulin and transfer capacity to not just manufacture insulin but also pens, including by licensing patents on any devices held by your company that can be used by manufacturers to deliver insulin pens, without restriction on supply or pricing.
3. Ensure that all insulins manufactured by Sanofi in all delivery devices (vials, cartridges and pre-filled pens) are offered at a transparent (publicly available) price to LMICs and humanitarian agencies, based on the cost-based price estimates published in the JAMA study. Governments, humanitarian agencies and other procurers can then decide what devices and types of insulin they wish to procure, founded on evidence-based clinical guidance, with consideration to the quality of life of people living with diabetes.
4. Enrol your IMPACT programme into an evaluation programme with a recognised methodology in order to best understand its impact on access for people. We suggest this could be done with the robust Access Observatory methodology, through Boston University.

Diabetes is assuming epidemic proportions in many low- and middle-income settings, and urgent action is needed from corporations that dominate the supply and pricing of medicines for diabetes. We urge Sanofi to step up in its role of ensuring adequate supply and to make a decisive effort to lower the prices of its diabetes medicines.

We thank you for your consideration of our concerns and request a written response and further meetings to address these issues by 10 October 2024.

Sincerely,

A handwritten signature in blue ink, appearing to be 'Joan Tubau', written in a cursive style.

Joan Tubau
Executive Director
Médecins Sans Frontières Access Campaign