GLOBAL DAY OF ACTION AGAINST ROCHE'S INHUMANITY
#RocheGreedKills

7th February 2017

Today we stand together as women living with cancer, families of people with cancer, activists, scientists, researchers and health professionals from across the world. Together we demand that no woman go without it lifesaving breast cancer treatment because it is too expensive.

We demand justice for Tobeka Daki.

A fearless activist from South Africa who was living with HER2+ breast cancer since 2013. Despite being a good candidate for trastuzumab, Tobeka was never able to access the treatment due to its high cost.

On 14 November 2016 she died in her home.

Today in South Africa, we re-launch this the **Tobeka Daki Campaign for Access to Trastuzumab** to recognise her inspirational leadership and to pledge ourselves to continue her struggle for access to affordable medicines.

We do not know whether trastuzumab would have saved Tobeka's life – trastuzumab doesn't always work. We do know, however, that Tobeka was never given a chance. Even though she was dying and the medicine existed, she was never given an opportunity to try it.

The price of trastuzumab varies in countries across the world. These prices aren't always public. They are agreed behind closed doors.

In South Africa the annual price in the private sector is around US$ 38 365 (ZAR 516,700). The few public facilities which can access trastuzumab do so at a lower price of around US$ 15 735 (ZAR 211,920) per year. Both out of reach of most.

In Brazil it costs US$ 17 562.

In Malaysia it costs US$ 17 929.

In France it costs US$ 30 595.

In India it costs US$ 10 938.

But, health economists have shown that a year's worth of trastuzumab can be produced and sold for only US$ 240 (around ZAR 3 400). Drastically less. This estimated price even includes a 50% increase above the cost of production for profit.

Meanwhile Roche are posting fat profits.

In 2015 Roche made US$ 8.9-billion profit (around 119 billion Rand). In the same year CEO Severin Schwan earned US$ 12-million (around 160 million Rand). It seems highly plausible that Roche could cut the price of trastuzumab dramatically and still be very profitable.

Instead Roche maintains it's high prices in any way possible. Roche holds multiple evergreened patents on trastuzumab in certain countries across the world. In South Africa, for example, multiple patents extend their monopoly until 2033.

In countries where the patents have ended or do not exist, Roche is using other means to block potentially more affordable biosimilar versions coming to market. In India Roche have initiated a court challenge against the Indian regulatory body for its decision to approve Mylan's version as a biosimilar product.

In Brazil and Argentina, Roche is one of the pharmaceutical companies litigating against those governments for their attempts to use legal international safeguards to protect public health.

For countries like the UK and the US, Roche are trying to charge a price for T-DM1, the drug breast cancer patients need once trastuzumab fails, that is so high even they cannot afford it.

For too long Roche has been allowed to charge exorbitant prices for these lifesaving treatments.

Tobeka had one life. Her two children had one mother. We had the means to give her a chance at survival and we failed her – as we will continue to fail other women.

What is most disturbing is the unconcerned attitude and the lack of basic humanity shown by people at Roche. It is not as if they are unaware that many people can't access trastuzumab because of its high price.

Shame on you Manfred Heinzer (Roche South Africa General Manager) for not having done more since hearing about Tobeka's plight six months before her death.

Shame on you Severin Schwan (Roche CEO) for insisting on fat profits while you could save lives by trimming your profits.

You could have given Tobeka a chance, but instead you turned your back on her.

Don't turn your back on all the other women across the world.

WE DEMAND THAT ROCHE:

- Drop the price of trastuzumab and T-DM1 so that all women living with HER2+ breast cancer who need these medicines can access them;

- Immediately cease all litigation against biosimilar versions of trastuzumab;

- Stop abusive patenting practices that needlessly extend patent monopoly on trastuzumab and other medicines; and

- Immediately cease litigation against the Brazilian and Argentinian governments for their use of TRIPS flexibilities.

RECEIVED BY ROCHE:
(Aadila Fakier / Oscar Manuga)

PRESENTED ON BEHALF OF UNDERSIGNED:

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MEMORANDUM ENDORSED BY:

ACT UP London, United Kingdom
ACT UP New York, United States
ACT UP Paris, France
AIDS Access Foundation, Thailand
AIDS and Rights Alliance of Southern Africa (ARASA)
All India Drug Action Network (AIDAN), India
All-Ukrainian Network of PLWHA, Ukraine
Alliance of Doctors for Ethical Healthcare, India
Asia Pacific Council of AIDS Service Organisations (APCASO), Thailand
Asia Pacific Network of People Living with HIV/AIDS (APN+)
Asia Pacific Network of Sex Workers (APNSW)
Association of Korean medicine Doctors for Health rights (AKDH), South Korea
Association of Physicians for Humanism (APH), South Korea
Brazilian Interdisciplinary AIDS Association (ABIA), Brazil
Cancer Alliance, South Africa
Cape Mental Health, South Africa
Center for Health and Social Change (SHSC), South Korea
Center for Research of Environment, Appropriate Technology, and Advocacy

(CREATA), Indonesia
Charitable Foundation of Patients "Blood drop", Ukraine
Child With Future, Ukraine
Children with Hemophilia, Ukraine
Coalition Plus, France
Community Development Centre, Malaysia
Crisis Care Home, Malaysia
Delhi Network of Positive People (DNP+), India
EVA Non-Profit Partnership, Russia
Fix the Patent Laws Coalition, South Africa
Fundación Grupo Efecto Positivo, Argentina
Global Network of Sex Work Projects (NSWP), International
Health GAP, International
Health Poverty Action, United Kingdom
HIV i-base, United Kingdom
Housing Works, United States
Human Rights Law Network, India
I-MAK, United States
Indonesia AIDS Coalition (IAC), Indonesia
Indonesia For Global Justice (IGJ), Indonesia
Indonesia Positive Women Network (IPPI), Indonesia
Initiative for Health & Equity in Society, India
Intellectual Property Left, South Korea
International Treatment Preparedness Coalition, Global
International Treatment Preparedness Coalition, Middle East and North Africa (ITPC-MENA)
International Treatment Preparedness Coalition, Russia (ITPCru)
International Treatment Preparedness Coalition, South Asia
Jaringan Peduli Tuberkulosis Indonesia (JAPETI), Indonesia
Just Treatment, United Kingdom
Kartini Samon, Indonesia
Kesatuan Nelayan Tradisional Indonesia (KNTI), Indonesia
Knowledge Ecology International (KEI), International
Korea Alliance of Patients' Organization, South Korea
Korea Congenital Heart Disease Patient Group, South Korea
Korea Heart Disease Patient Group, South Korea
Korea Kidney Cancer Association, South Korea
Korea Leukemia Patient Group, South Korea
Korean Dentists Association for Healthy Society (KDAH), South Korea
Korean Federation of Medical Groups for Health rights (KFHR), South Korea

Korean GIST Patients Organization, South Korea
Korean Pharmacists for Democratic Society (KPDS), South Korea
Korean Progressive Network-Jinbonet, South Korea
Lawyers Collective, India
LOCOST, India
Lusiana, Indonesia
Médecins Du Monde, France
Mr. Charles Santiago, Member of Parliament, Malaysia
Mr. Mark Cheong, Lecturer, School of Pharmacy, Monash University, Malaysia
Muskan Sanstha, India
National Working Group on Patent Laws, India
Network of Marginalised Peoples JERIT, Malaysia
Patients of Ukraine
People's Health Institute, South Korea
People's Health Movement Global
People’s Solidarity for Social Progress, South Korea
Pink Ribbon of Ukraine
Positive Malaysian Treatment Access & Advocacy Group (MTAAG+), Malaysia
Positive Women, Ukraine
Public Citizen, United States
Rare Immune Disease, Ukraine
RED Argentina de Personas Positivas, Argentina
Red Latinoamericana por el Acceso a Medicamentos (RedLAM), Argentina
Rural Women's Assembly, South Africa
SAMA - Resource Group for Women and Health, India
SANGRAM, India
SECTION27, South Africa
Seruni, Indonesia
Socialist Party of Malaysia
Solidaritas Perempuan (Women's Solidarity for Human Rights), Indonesia
Solidarity for HIV/AIDS Human Rights-NANURI+, South Korea
Solidarity for Worker's Health (SWH), South Korea
Sonke Gender Justice, South Africa
South African Depression and Anxiety Group (SADAG), South Africa
South African Non-Communicable Diseases Alliance (SA NCD Alliance)
Spark of Hope, Ukraine
STOPAIDS, United Kingdom
Talking about Reproductive and Sexual Health Issues (TARSHI), India
Thai Network of People Living with HIV/AIDS, Thailand
Third World Network, International

Transnational Institute (TNI), International
Treatment Action Campaign (TAC), South Africa
Treatment Action Group (TAG), United States
Treatment Advocacy and Literacy Campaign (TALC), Zambia
Union for Affordable Cancer Treatment (UACT), United States
Universities Allied for Essential Medicines (UAEM), International
Veshya Anyay Mukti Parishad (VAMP), India
Vietnam Network of People living with HIV (VNP+)
Wahana Lingkungan Hidup Indonesia (WALHI), Indonesia
WOMIN, South Africa
Young Professionals Chronic Disease Network (YP-CDN), International
Youth STOPAIDS, United Kingdom